

Initial Application Date: 9 APR 2015

Application # 1550035863

CU# _____

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION
Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits

"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION"

LANDOWNER: BELINDA GIBBS Mailing Address: 156 COUNTRYSIDE DR.
City: LILLINGTON State: NC Zip: 27546 Contact No: _____ Email: gibbsb31@hotmail.com

APPLICANT*: SAME Mailing Address: _____

City: _____ State: _____ Zip: _____ Contact No: _____ Email: _____

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: _____ Phone # _____

PROPERTY LOCATION: Subdivision: OAKMONT SUBDIVISION Lot #: 57 Lot Size: 81 AC
State Road # 156 State Road Name: COUNTRYSIDE DR Map Book & Page: 213 / 346
Parcel: 03 650701 0046 12 PIN: 0507-31-5692 000
Zoning: R200R Flood Zone: X Watershed: NA Deed Book & Page: 325 / 852 Power Company*: _____

*New structures with Progress Energy as service provider need to supply premise number _____ from Progress Energy.

PROPOSED USE:

- SFD: (Size _____ x _____) # Bedrooms: _____ # Baths: _____ Basement(w/wo bath): _____ Garage: _____ Deck: _____ Crawl Space: _____ Slab: _____ Slab: _____
(Is the bonus room finished? () yes () no w/ a closet? () yes () no (if yes add in with # bedrooms)
- Mod: (Size _____ x _____) # Bedrooms _____ # Baths _____ Basement (w/wo bath) _____ Garage: _____ Site Built Deck: _____ On Frame _____ Off Frame _____
(Is the second floor finished? () yes () no Any other site built additions? () yes () no
- Manufactured Home: _____ SW _____ DW _____ TW (Size _____ x _____) # Bedrooms: _____ Garage: _____ (site built?) _____ Deck: _____ (site built?) _____
- Duplex: (Size _____ x _____) No. Buildings: _____ No. Bedrooms Per Unit: _____
- Home Occupation: # Rooms: _____ Use: _____ Hours of Operation: _____ #Employees: _____
- Addition/Accessory/Other: (Size 12' x 16') Use: DECK Closets in addition? () yes () no

Water Supply: _____ County _____ Existing Well _____ New Well (# of dwellings using well _____) *Must have operable water before final

Sewage Supply: _____ New Septic Tank (Complete Checklist) _____ Existing Septic Tank (Complete Checklist) _____ County Sewer

Does owner of this tract of land, own land that contains a manufactured home within five hundred feet (500') of tract listed above? () yes () no

Does the property contain any easements whether underground or overhead () yes () no

Structures (existing or proposed): Single family dwellings: 1 ext. Manufactured Homes: _____ Other (specify): 1 proposed Deck

Required Residential Property Line Setbacks:

Front	Minimum _____	Actual _____
Rear	_____	<u>25+</u>
Closest Side	_____	<u>10+</u>
Sidestreet/corner lot	_____	_____
Nearest Building on same lot	_____	_____

Comments: Re Graham
the tank doesn't have to be dug up-

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: _____

If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted. I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

B. Lynch
Signature of Owner or Owner's Agent

9 APR 2015
Date

It is the owner/applicants responsibility to provide the county with any applicable information about the subject property, including but not limited to: boundary information, house location, underground or overhead easements, etc. The county or its employees are not responsible for any incorrect or missing information that is contained within these applications.

This application expires 6 months from the initial date if permits have not been issued

09/09/11

Application # _____

Harnett County Central Permitting
PO Box 65 Lillington NC 27546
910 893 7525 Fax 910 893 2793 www.harnett.org/permits

Each section below to be filled out by whomever performing work Must be owner or licensed contractor Address company name & phone must match

Application for Residential Building and Trades Permit

Owner s Name BELINDA GIBBS Date 9 APR 2015
Site Address 156 COUNTRYSIDE DR Phone 919-499-0747
Directions to job site from Lillington _____

Subdivision ORKMONT Lot # 57
Description of Proposed Work DECK 12'X16' # of Bedrooms _____
Heated SF _____ Unheated SF _____ Finished Bonus Room? _____ Crawl Space _____ Slab _____

General Contractor Information

LARRY HYLTON Telephone 919-895-9462
Building Contractor s Company Name _____
77 SEAN LN SANFORD NC 27332
Address _____ Email Address _____

License # _____

Electrical Contractor Information

Description of Work _____ Service Size _____ Amps T-Pole ___ Yes ___ No

Electrical Contractor s Company Name _____ Telephone _____
Address _____ Email Address _____

License # _____

Mechanical/HVAC Contractor Information

Description of Work _____

Mechanical Contractor s Company Name _____ Telephone _____
Address _____ Email Address _____

License # _____

Plumbing Contractor Information

Description of Work _____ # Baths _____

Plumbing Contractor s Company Name _____ Telephone _____
Address _____ Email Address _____

License # _____

Insulation Contractor Information

Insulation Contractor s Company Name & Address _____ Telephone _____

***NOTE General Contractor must fill out and sign the second page of this application**

I hereby certify that I have the authority to make necessary application that the application is correct and that the construction will conform to the regulations in the Building Electrical Plumbing and Mechanical codes and the Harnett County Zoning Ordinance I state the information on the above contractors is correct as known to me and that by signing below I have obtained all subcontractors permission to obtain these permits and if any changes occur including listed contractors site plan number of bedrooms building and trade plans Environmental Health permit changes or proposed use changes I certify it is my responsibility to notify the Harnett County Central Permitting Department of any and all changes

EXPIRED PERMIT FEES - 6 Months to 2 years permit re-issue fee is \$150 00 After 2 years re-issue fee is as per current fee schedule

Belinda D. Hylton

9 APR 2015

Signature of Owner/Contractor/Officer(s) of Corporation

Date

Affidavit for Worker's Compensation N C G S 87-14

The undersigned applicant being the

General Contractor Owner Officer/Agent of the Contractor or Owner

Do hereby confirm under penalties of perjury that the person(s) firm(s) or corporation(s) performing the work set forth in the permit

Has three (3) or more employees and has obtained workers compensation insurance to cover them

Has one (1) or more subcontractors(s) and has obtained workers compensation insurance to cover them

Has one (1) or more subcontractors(s) who has their own policy of workers compensation insurance covering themselves

Has no more than two (2) employees and no subcontractors

While working on the project for which this permit is sought it is understood that the Central Permitting Department issuing the permit may require certificates of coverage of worker s compensation insurance prior to issuance of the permit and at any time during the permitted work from any person firm or corporation carrying out the work

Company or Name LARRY HYLTON

Sign w/Title *Belinda D. Hylton* Date 9 APR 2015

HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

LILLINGTON, NC 27546

For Inspections Call: (910) 893-7525 Fax: (910) 893-2793

Bldg Insp scheduled before 2pm available next business day.

Application Number	15-50035863	Date	4/24/15
Property Address	156 COUNTRYSIDE DR		
PARCEL NUMBER	03-0507-01- -0046- -12-		
Application type description	CP ADD & ALTER RESIDENTIAL		
Subdivision Name	OAKMONT PH1 SC3 52LOTS		
Property Zoning	RES/AGRI DIST - RA-20R		

Owner

GIBBS BELINDA & GARY
 156 COUNTRYSIDE DRIVE
 LILLINGTON NC 27546

Contractor

LARRY HYLTON
 77 SEAN LN
 SANFORD NC 27332
 (919) 895-9462

Applicant

GIBBS BELINDA
 156 COUNTRYSIDE DR
 LILLINGTON NC 27546

--- Structure Information 000 000 12X16 DECK
 Flood Zone FLOOD ZONE X
 Other struct info SEPTIC - EXISTING? EXT TANK
 WATER SUPPLY COUNTY

Permit	RESIDENTIAL BUILDING PERMIT		
Additional desc			
Phone Access Code	1084060		
Issue Date	4/24/15	Valuation	0
Expiration Date	4/23/16		

Permit	LAND USE PERMIT		
Additional desc			
Phone Access Code	1084086		
Issue Date	4/24/15	Valuation	0
Expiration Date	10/21/15		

Special Notes and Comments

T/S: 04/09/2015 02:49 PM JBROCK ----
 OAKMONT S/D LOT 57

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Property Zoning	RES/AGRI DIST - RA-20R		

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date

Permit type	RESIDENTIAL BUILDING PERMIT				
999	101	B101	R*BLDG FOOTING / TEMP SVC POLE	_____	__/__/__
999	131	R131	ONE TRADE FINAL	_____	__/__/__

PREPARED 4/30/15, 14:12:24
Harnett County

INSPECTION TICKET
INSPECTOR: IVR

PAGE 28
DATE 5/01/15

ADDRESS . . : 156 COUNTRYSIDE DR
CONTRACTOR : LARRY HYLTON
OWNER . . : GIBBS BELINDA & GARY
PARCEL . . : 03-0507-01- -0046- -12-
APPL NUMBER: 15-50035863 CP ADD & ALTER RESIDENTIAL
DIRECTIONS : T/S: 04/09/2015 02:49 PM JBROCK ----
OAKMONT S/D LOT 57

SUBDIV: OAKMONT PH1 SC3 52LOTS
PHONE : (919) 895-9462
PHONE :

STRUCTURE: 000 000 12X16 DECK

FLOOD ZONE : FLOOD ZONE X

SEPTIC - EXISTING? : EXT TANK

WATER SUPPLY : COUNTY

PERMIT: CPBP 00 CP BUILDING PERMIT

TYP/SQ	REQUESTED COMPLETED	INSP RESULT	DESCRIPTION RESULTS/COMMENTS
B101 01	4/29/15	MR	R*BLDG FOOTING / TEMP SVC POLE TIME: 17:00 VRU #: 002652675
	4/29/15	AP	T/S: 04/28/2015 01:15 PM DJOHNSON ----- T/S: 04/29/2015 12:48 PM MREARIC -----
R131 01	5/01/15	TI	ONE TRADE FINAL VRU #: 002653836

11 AP-IVR

----- COMMENTS AND NOTES -----
