

Initial Application Date: 8-24-15

Application # 1550036946

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: Victor Bashor Mailing Address: 121 Jaylin Blvd

City: Spring Lake State: NC Zip: 28390 Contact No: _____ Email: _____

APPLICANT: Rene Martinez Mailing Address: 1501 Hope Mills Rd.

City: Fayetteville State: NC Zip: 28304 Contact No: 910-261-6350 Email: rene@ydhille.com

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Rene Martinez Phone # 910-709-4565

PROPERTY LOCATION: Subdivision: _____ Lot #: 7 Lot Size: 0.50

State Road # _____ State Road Name: 121 Jaylin Blvd Map Book & Page: 2005, 781

Parcel: 010513 0217 07 PIN: 0513-45-10810.000

Zoning: RA-20M Flood Zone: - Watershed: - Deed Book & Page: 2770, 727 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) Monolithic

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 14 x 19) Use: Deck w/ Pergola 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: _____ Manufactured Homes: _____ Other (specify): Proposed Deck

Required Residential Property Line Setbacks:

Comments: _____

Front Minimum _____ Actual _____

Rear _____

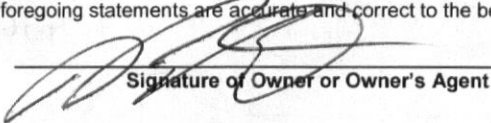
Closest Side _____

Sidestreet/corner lot _____

Nearest Building on same lot _____

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.



Signature of Owner or Owner's Agent

8/24/15
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****

NAME: Rene Martinez

APPLICATION #: 1556036946

This application to be filled out when applying for a septic system inspection.

County Health Department Application for Improvement Permit and/or Authorization to Construct

IF THE INFORMATION IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT PERMIT OR AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration depending upon documentation submitted. (Complete site plan = 60 months; Complete plat = without expiration)

910-893-7525 option 1

CONFIRMATION # 011633

- Environmental Health New Septic System** Code 800
 - **All property irons must be made visible.** Place "pink property flags" on each corner iron of lot. All property lines must be clearly flagged approximately every 50 feet between corners.
 - Place "orange house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks, out buildings, swimming pools, etc. Place flags per site plan developed at/for Central Permitting.
 - Place orange Environmental Health card in location that is easily viewed from road to assist in locating property.
 - If property is thickly wooded, Environmental Health requires that you clean out the undergrowth to allow the soil evaluation to be performed. Inspectors should be able to walk freely around site. **Do not grade property.**
 - **All lots to be addressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred for failure to uncover outlet lid, mark house corners and property lines, etc. once lot confirmed ready.**
 - After preparing proposed site call the voice permitting system at 910-893-7525 option 1 to schedule and use code **800** (after selecting notification permit if multiple permits exist) for Environmental Health inspection. Please note confirmation number given at end of recording for proof of request.
 - Use Click2Gov or IVR to verify results. Once approved, proceed to Central Permitting for permits.
- Environmental Health Existing Tank Inspections** Code 800
 - Follow above instructions for placing flags and card on property.
 - Prepare for inspection by removing soil over **outlet end** of tank as diagram indicates, and lift lid straight up (*if possible*) and then **put lid back in place.** (Unless inspection is for a septic tank in a mobile home park)
 - **DO NOT LEAVE LIDS OFF OF SEPTIC TANK**
 - After uncovering **outlet end** call the voice permitting system at 910-893-7525 option 1 & select notification permit if multiple permits, then use code **800** for Environmental Health inspection. Please note confirmation number given at end of recording for proof of request.
 - Use Click2Gov or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.

SEPTIC

If applying for authorization to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.

- Accepted Innovative Conventional Any
 Alternative Other _____

The applicant shall notify the local health department upon submittal of this application if any of the following apply to the property in question. If the answer is "yes", applicant **MUST ATTACH SUPPORTING DOCUMENTATION**:

- YES NO Does the site contain any Jurisdictional Wetlands?
- YES NO Do you plan to have an irrigation system now or in the future?
- YES NO Does or will the building contain any drains? Please explain. _____
- YES NO Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
- YES NO Is any wastewater going to be generated on the site other than domestic sewage?
- YES NO Is the site subject to approval by any other Public Agency?
- YES NO Are there any Easements or Right of Ways on this property?
- YES NO Does the site contain any existing water, cable, phone or underground electric lines?
If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service.

I Have Read This Application And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And State Officials Are Granted Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules. I Understand That I Am Solely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making The Site Accessible So That A Complete Site Evaluation Can Be Performed.

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

8/24/15
DATE

HTE# 08-520922R

Harnett County Department of Public Health

21459

PERMIT # 25894

Operation Permit

New Installation Septic Tank Repair Nitrification Line Expansion

PROPERTY LOCATION: CREEKSVILLE CHURCH RD

Name: (owner) WYNN CONSTRUCTION SUBDIVISION JAYLIN OAKS LOT # 7

System Installer: THORNTONS PUMPING Registration # _____

Basement with plumbing: Garage Number of Bedrooms 3

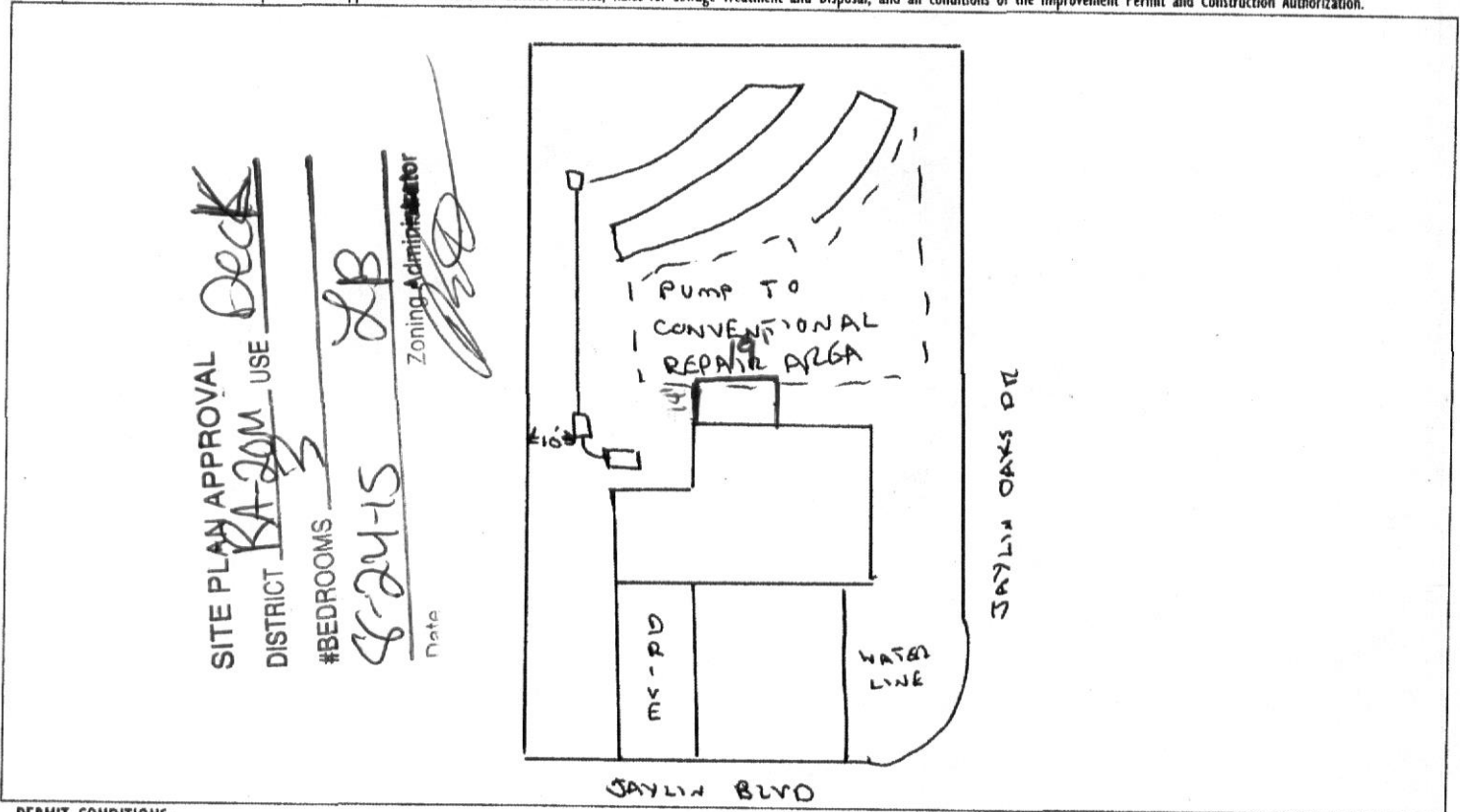
Type of Water Supply: Community Public Well Distance from well 100 feet

System Type: III Types V and VI Systems expire in 5 years.

(In accordance with Table V a)

Owner must contact Health Department 6 months prior to expiration for permit renewal.

This system has been installed in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.



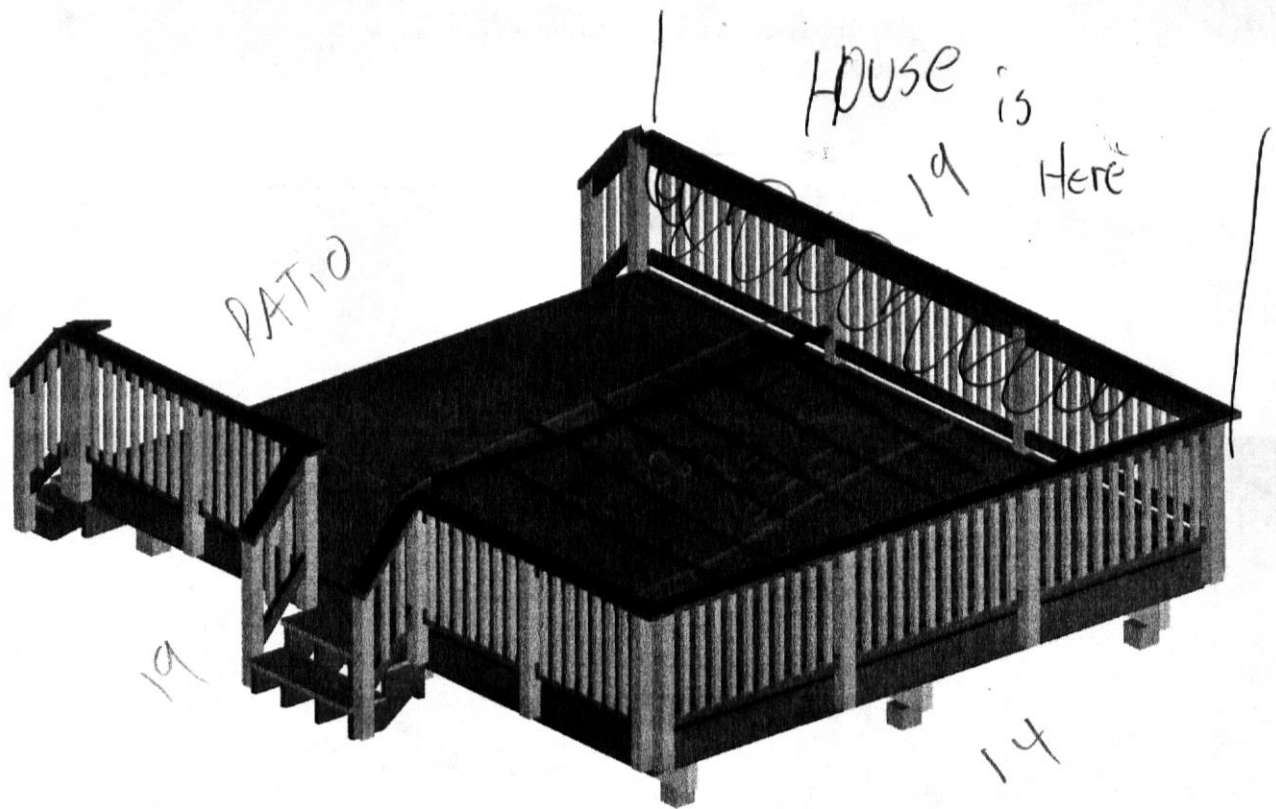
PERMIT CONDITIONS:

- I. Performance: System shall perform in accordance with Rule .1961.
- II. Monitoring: As required by Rule .1961.
- III. Maintenance: As required by Rule .1961. Other: _____
Subsurface system operator required? Yes No
If yes, see attached sheet for additional operation conditions, maintenance and reporting.
- IV. Operation: _____
- V. Other: _____

Following are the specifications for the sewage disposal system on the above captioned property.

Type of system: Conventional Other Pump To EZ Flow Septic Tank: 1000 gallons Pump Tank: 1000 gallons
 Subsurface No. of exact length width of depth of
 Drainage Field ditches 1 of each ditch 210 feet ditches 3 feet ditches 18 inches
 French Drain Required: _____ Linear feet

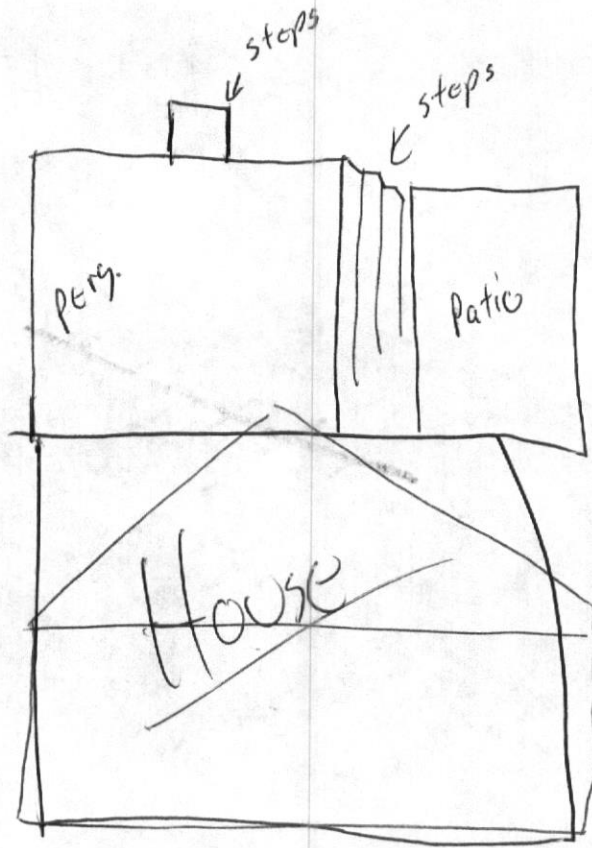
Authorized State Agent _____ Date 5/24/10



Deck with Pergola

Pergola is 14'x8'

Deck is 19'x14'



street

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 Victor Basher Date 8/24/15
Site Address 121 Jaylin Blvd. Phone _____
Directions to job site from Lillington _____

Subdivision _____ Lot _____
Description of Proposed Work Deck # of Bedrooms _____
Heated SF _____ Unheated SF _____ Finished Bonus Room? _____ Crawl Space _____ Slab _____

General Contractor Information

Your Dream Home Improvement, LLC 910-261-6350
Building Contractor's Company Name Telephone
1501 Hope Mills Rd. Fayetteville, NC 28304 rene@ydhille.com
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


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

8/24/15
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

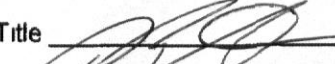
Has one (1) or more subcontractors(s) and has obtained workers compensation insurance to cover them

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 Your Dream Home Improvement, LLC

Sign w/Title  owner Date 8/24/15

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	15-50036946	Page	2
Property Address	121 JAYLIN BLVD	Date	9/02/15
PARCEL NUMBER	01-0513- - -0217- -07-		
Application description . . .	CP ADD & ALTER RESIDENTIAL		
Subdivision Name	JAYLIN OAKS		
Property Zoning	RES/AGRI DIST - RA-20M		

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
Permit type RESIDENTIAL BUILDING PERMIT					
999	103	B103	R*BLDG FOUND & TEMP SVC POLE	_____	___/___/___
999	111	B111	R*BLDG SLAB INSP/TEMP SVC POLE	_____	___/___/___
999	113	B113	R*BLDG WATER/DAMP PROOFING	_____	___/___/___
999	217	E217	R*ELEC RECONNECT	_____	___/___/___
999	209	E209	R*ELEC TEMP POWER CERT	_____	___/___/___
999	207	E207	R*ELEC TEMP SERVICE POLE	_____	___/___/___
999	205	E205	R*ELEC UNDER SLAB	_____	___/___/___
999	213	E213	R*ELECTRICAL UNDERGROUND	_____	___/___/___
999	409	M409	R*GAS PIPING	_____	___/___/___
999	405	M405	R*MECHANICAL UNDERGROUND	_____	___/___/___
999	105	B105	R*OPEN FLOOR	_____	___/___/___
999	305	M305	R*PLUMB SEWER CONNECTION	_____	___/___/___
999	309	P309	R*PLUMB UNDER SLAB	_____	___/___/___
999	307	P307	R*PLUMB WATER CONNECTION	_____	___/___/___
999	115	B115	R*OVERHEAD ELEC, MECH, PLB	_____	___/___/___
999	820	Z820	PZ*ZONING/FINAL INSPECTION	_____	___/___/___
999	101	B101	R*BLDG FOOTING / TEMP SVC POLE	_____	___/___/___
999	814	A814	ADDRESS CONFIRMATION	_____	___/___/___
999	429	R429	FOUR TRADE FINAL	_____	___/___/___
999	425	R425	FOUR TRADE ROUGH IN	_____	___/___/___
999	131	R131	ONE TRADE FINAL	_____	___/___/___
999	125	R125	ONE TRADE ROUGH IN	_____	___/___/___
999	329	R329	THREE TRADE FINAL	_____	___/___/___
999	325	R325	THREE TRADE ROUGH IN	_____	___/___/___
999	229	R229	TWO TRADE FINAL	_____	___/___/___
999	225	R225	TWO TRADE ROUGH IN	_____	___/___/___
999		H828	ENVIRO. WELL PERMIT	_____	___/___/___
999	104	B104	R*FOUND & SETBACK VERIF SURVEY	_____	___/___/___

Permit type LAND USE PERMIT

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P.O. BOX 65
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	Page	3
Application Number	Date	9/02/15
Property Address		
PARCEL NUMBER		
Application description		
Subdivision Name		
Property Zoning		

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
999	818	Z818	PZ*ZONING INSPECTION	_____	__/__/__
	Permit type		LAND USE PERMIT		
999	820	Z820	PZ*ZONING/FINAL INSPECTION	_____	__/__/__

HARNETT COUNTY CENTRAL PERMITTING
P.O. BOX 65
LILLINGTON, NC 27546
For Inspections Call: (910) 893-7525 Fax: (910) 893-2793
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PARCEL NUMBER 01-0513- - -0217- -07-
Application type description CP ADD & ALTER RESIDENTIAL
Subdivision Name JAYLIN OAKS
Property Zoning RES/AGRI DIST - RA-20M

Owner Contractor

BASHER VICTOR OWNER
121 JAYLIN OAKS DRIVE
SPRING LAKE NC 28390

Applicant

BASHER VICTOR
121 JAYLIN BLVD
SPRING LAKE NC 28390

--- Structure Information 000 000 14X19 DECK W/ PARGOLA
Flood Zone FLOOD ZONE X
Other struct info # BEDROOMS 3.00
SEPTIC - EXISTING? EXIST SEPTIC
WATER SUPPLY COUNTY

Permit RESIDENTIAL BUILDING PERMIT
Additional desc
Phone Access Code 1106954
Issue Date 9/02/15 Valuation 0
Expiration Date 9/01/16

Permit LAND USE PERMIT
Additional desc
Phone Access Code 1106962
Issue Date 9/02/15 Valuation 0
Expiration Date 2/29/16

Special Notes and Comments
T/S: 08/24/2015 09:11 AM LBENNETT --
121 JAYLIN BLVD - JAYLIN OAKS
SPRING LAKE

