

Initial Application Date: 9-14-15

Application # 1550037094

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: ALAN S. CHISEK Mailing Address: 367 Sherman Lakes Dr  
City: Fuquay Varina State: NC Zip: 27526 Contact No: 919-650-9782 Email: chisekas@gmail.com

APPLICANT\*: \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Contact No: \_\_\_\_\_ Email: \_\_\_\_\_  
\*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: ALAN CHISEK Phone # 919-650-9782

PROPERTY LOCATION: Subdivision: Sherman Lakes phase 2 Lot #: 17 Lot Size: 1.614 ac  
State Road # 367 State Road Name: Sherman Lakes Map Book & Page: F 1730A  
Parcel: 08 0655 0118 31 PIN: 0655-35-6787.000  
Zoning: RA30 Flood Zone: X Watershed: IV Deed Book & Page: 23021 263 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: \_\_\_\_\_ Monolithic 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 20x18 21x22) Use: Family Room @ Back Carport / Mudroom Closets in addition? ( ) yes ( ) no  
addition on side

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 Manufactured Homes: \_\_\_\_\_ Other (specify): 1 BARN

**Required Residential Property Line Setbacks:**

Front	Minimum	Actual
		<u>188'</u>
Rear		<u>86'</u>
Closest Side		<u>21'</u>
Sidestreet/corner lot		
Nearest Building on same lot		<u>115'</u>

Comments: Removing deck and adding family room.  
Adding mud room at side entrance with 1 car, carport.

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:

North on US 401 to Sherman Lakes Subdivision  
on left. Main road is Sherman lakes dr. Take  
it all the way to the end of Culdesac.  
(1 mile south of Wake County line.)

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

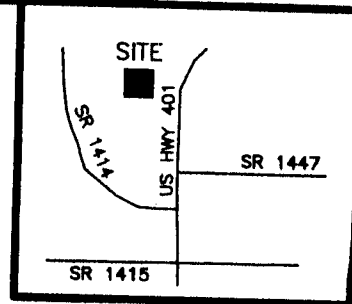
9-14-15  
Date

\*\*\*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\*\*

**NOTES:**

- 1) ALL DISTANCES SHOWN ARE HORIZONTAL GROUND DISTANCES
- 2) AREAS COMPUTED BY COORDINATE METHOD
- 3) PROPERTY SUBJECT TO ALL EASEMENTS AND RESTRICTIONS OF RECORD
- 4) NO HORIZONTAL CONTROL FOUND WITHIN 2000 FEET OF SURVEY
- 5) BOUNDARY PREDICATED ON EXISTING MONUMENTATION FOUND IN THE FIELD
- 6) NO DETERMINATION HAS BEEN MADE AS TO THE EXISTENCE OF FEMA FLOOD HAZARD AREAS ON THIS PARCEL



MINIMUM BUILDING SETBACKS  
ZONING: RA-30

FRONT.....35 FEET  
SIDE.....10 FEET  
REAR.....25 FEET

N/F  
**DOROTHY W. LANDIS**  
DB 1340 PG 95  
PIN 0655-35-1771

N/F  
**JAMES G. WEATHERS**  
**SUSAN B. WEATHERS**  
DB 817 PG 900  
PIN 0655-46-0137

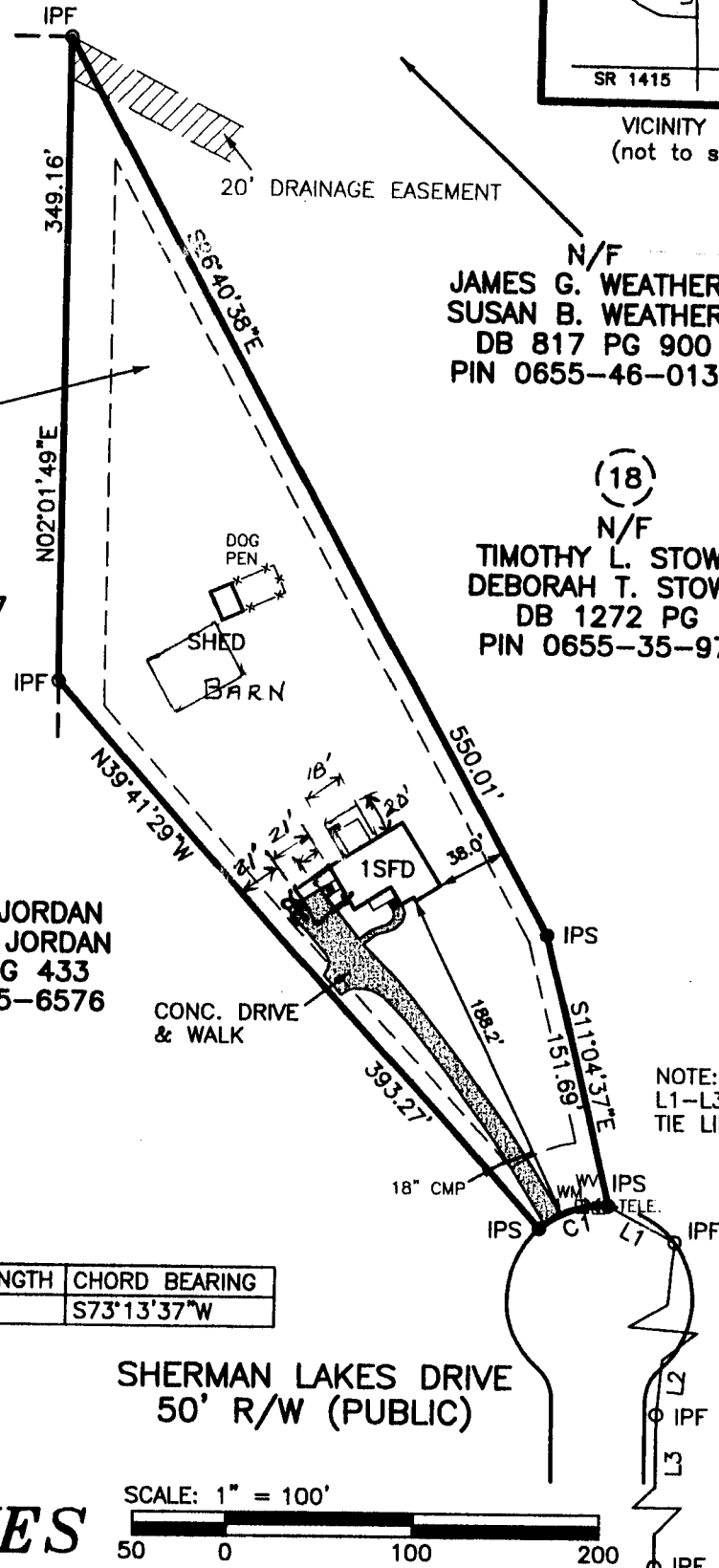
(17)  
70294 SF  
1.614 AC  
DB 1893 PG 629  
PB F PG 730-A  
PIN 0655-35-6787

(18)  
N/F  
**TIMOTHY L. STOWELL**  
**DEBORAH T. STOWELL**  
DB 1272 PG 1  
PIN 0655-35-9709

(16)  
N/F  
**ROBERT M. JORDAN**  
**REBECCA M. JORDAN**  
DB 1617 PG 433  
PIN 0655-35-6576

SITE PLAN APPROVAL.  
 DISTRICT **RA30** USE **Residential**  
 #BEDROOMS **1**  
 Date **9-14-15**  
 Zoning Administrator

PB F PG 730-A



NOTE:  
L1-L3 ARE  
TIE LINES ONLY

NUMBER	DIRECTION	DISTANCE
L1	S59°49'47"E	40.79'
L2	S07°12'05"W	160.30'
L3	S02°01'40"W	100.01'

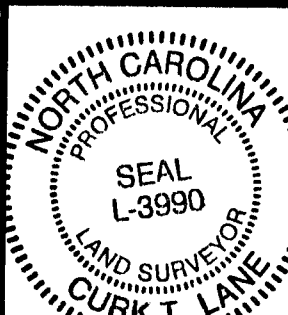
NUMBER	RADIUS	ARC LENGTH	CHORD LENGTH	CHORD BEARING
C1	50.00	40.00	38.94	S73°13'37"W

**LOT 17**  
**SHERMAN LAKES**

SHERMAN LAKES DRIVE  
50' R/W (PUBLIC)

SCALE: 1" = 100'

- LEGEND**
- IPF IRON PIPE FOUND
  - IPS IRON PIN SET
  - RRSF RAILROAD SPIKE
  - PKNF PARKER-KALON
  - NAIL FOUND
  - WV WATER VALVE
  - WM WATER METER
  - CO CLEAN OUT
  - S.F. SQUARE FEET
  - 100.0 ELEVATIONS
  - CATV CABLE TV BOX
  - ELEC ELECTRIC BOX
  - PB PLAT BOOK
  - PP POWER POLE



PHYSICAL SURVEY  
FOR  
**ALAN CHISEK**  
AND WIFE  
**LINDA CHISEK**  
367 SHERMAN LAKES DRIVE, FUQUAY-VARINA, NC 27526  
HECTOR'S CREEK TWSP. HARNETT COUNTY NORTH CAROLINA

**TRUE LINE SURVEYING, P.C.**

Harnett County Central Permitting  
PO Box 85 Lillington NC 27548  
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 ALAN S. CHISEK Date \_\_\_\_\_  
Site Address 367 Sherman Lakes Dr. Phone 919-650-9782

Directions to job site from Lillington \_\_\_\_\_  
North on US 401 to Sherman Lakes Subdivision on left. Take Sherman Lakes Dr to end of Cull-osee.

Subdivision Sherman Lakes Lot 17

Description of Proposed Work FAMILY Rm + Laundry # of Bedrooms \_\_\_\_\_

Heated SF \_\_\_\_\_ Unheated SF \_\_\_\_\_ Finished Bonus Room? \_\_\_\_\_ Crawl Space  Slab \_\_\_\_\_

**General Contractor Information**

ALAN CHISEK 919-650-9782  
Building Contractor's Company Name Telephone  
367 Sherman Lakes Dr. chisekas@gmail.com  
Address Email Address

License # \_\_\_\_\_

**Electrical Contractor Information**

Description of Work \_\_\_\_\_ Service Size \_\_\_\_\_ Amps T-Pole  Yes  No

ALAN CHISEK \_\_\_\_\_  
Electrical Contractor's Company Name Telephone

Address \_\_\_\_\_ Email Address \_\_\_\_\_

License # \_\_\_\_\_

**Mechanical/HVAC Contractor Information**

Description of Work \_\_\_\_\_

ALAN CHISEK \_\_\_\_\_  
Mechanical Contractor's Company Name Telephone

Address \_\_\_\_\_ Email Address \_\_\_\_\_

License # \_\_\_\_\_

**Plumbing Contractor Information**

Description of Work \_\_\_\_\_ # Baths \_\_\_\_\_

ALAN CHISEK \_\_\_\_\_  
Plumbing Contractor's Company Name Telephone

Address \_\_\_\_\_ Email Address \_\_\_\_\_

License # \_\_\_\_\_

**Insulation Contractor Information**

ALAN CHISEK \_\_\_\_\_  
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

Don J. Church  
Signature of Owner/Contractor/Officer(s) of Corporation

9-14-15  
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 \_\_\_\_\_

Sign w/Title

Don J. Church

Date

9-14-15

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 . . . . . 15-50037094  
 Property Address . . . . . 367 SHERMAN LAKES DR  
 PARCEL NUMBER . . . . . 08-0655- - -0118- -31-  
 Application description . . . CP ADD & ALTER RESIDENTIAL  
 Subdivision Name . . . . .  
 Property Zoning . . . . . RES/AGRI DIST - RA-30

Page 3  
 Date 10/16/15

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	105	B105	R*OPEN FLOOR	_____	__/__/__
999	101	B101	R*BLDG FOOTING / TEMP SVC POLE	_____	__/__/__
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	_____	__/__/__

Permit type . . . . . RESIDENTIAL INSULATION PERMIT

999	129	I129	R*INSULATION INSPECTION	_____	__/__/__
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HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

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 Property Address . . . . . 367 SHERMAN LAKES DR  
 PARCEL NUMBER . . . . . 08-0655- - -0118- -31-  
 Application type description CP ADD & ALTER RESIDENTIAL  
 Subdivision Name . . . . .  
 Property Zoning . . . . . RES/AGRI DIST - RA-30

Owner

Contractor

-----

CHISEK ALAN S & LINDA L  
 367 SHERMAN LAKES DR  
 FUQUAY VARINA NC 27526

OWNER

Applicant

-----

CHISEK ALAN  
 367 SHERMAN LAKES DR  
 FUQUAY VARINA NC 27526  
 (919) 650-9782

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Structure Information 000 000 -----

Flood Zone . . . . . FLOOD ZONE X  
 Other struct info . . . . . SEPTIC - EXISTING? EXT TANK  
 WATER SUPPLY COUNTY

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Permit . . . . . RESIDENTIAL BUILDING PERMIT  
 Additional desc . . . . .  
 Phone Access Code . . . . . 1113059  
 Issue Date . . . . . 10/16/15 Valuation . . . . . 61582  
 Expiration Date . . . . . 10/15/16

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Permit . . . . . RESIDENTIAL ELECTRICAL PERMIT  
 Additional desc . . . . .  
 Phone Access Code . . . . . 1113067  
 Issue Date . . . . . 10/16/15 Valuation . . . . . 0  
 Expiration Date . . . . . 10/15/16

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Permit . . . . . RESIDENTIAL INSULATION PERMIT  
 Additional desc . . . . .  
 Phone Access Code . . . . . 1113075  
 Issue Date . . . . . 10/16/15 Valuation . . . . . 0  
 Expiration Date . . . . . 10/15/16

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Permit . . . . . LAND USE PERMIT  
 Additional desc . . . . .  
 Phone Access Code . . . . . 1113083  
 Issue Date . . . . . 10/16/15 Valuation . . . . . 0

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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.

Page 2  
Date 10/16/15

Application Number . . . . . 15-50037094  
Expiration Date . . . . . 4/13/16

Permit . . . . . RESIDENTIAL MECHANICAL PERMIT  
Additional desc . . . . .  
Phone Access Code . . . . . 1113091  
Issue Date . . . . . 10/16/15 Valuation . . . . . 0  
Expiration Date . . . . . 10/15/16

Permit . . . . . RESIDENTIAL PLUMBING PERMIT  
Additional desc . . . . .  
Phone Access Code . . . . . 1113117  
Issue Date . . . . . 10/16/15 Valuation . . . . . 0  
Expiration Date . . . . . 10/15/16

Special Notes and Comments

T/S: 09/14/2015 09:43 AM JBROCK ----  
401 TO SHERMAN LAKES S/D ON LEFT TAKE  
IT ALL THE WAY TO THE END OF CUL-DE-SAC