

Initial Application Date: 3-28-16

Application # 1650038322

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: KENNETH D HANNINK : Tracie Mailing Address: 86 MOONLIGHT DR

City: FUQUAY VARIKA State: NC Zip: 27526 Contact No: 209-985-6676 Email: _____

APPLICANT*: MARK Mcbill Mailing Address: 1576 WOLCOTT RD

City: WOLCOTT State: CT Zip: 06716 Contact No: 203-206-2868 Email: _____

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: MARK Mcbill Phone # 203-206-2868

PROPERTY LOCATION: Subdivision: Stetson MAP#2008-193 Lot #: 51 Lot Size: 2.29

State Road # _____ State Road Name: 86 Moonlight Dr. Map Book & Page: 2008, 193

Parcel: 040674 0046 51 PIN: 0665-70-1979.000

Zoning: RA-30 Flood Zone: X Watershed: - Deed Book & Page: 3293, 0079 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 16 x 20) 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: _____ Manufactured Homes: _____ Other (specify): _____

Proposed Deck

Required Residential Property Line Setbacks:

Comments: _____

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

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:

TURN RT ON 5 MAIN ST 1.5 MI TURN LEFT ON 401 7.5 MI
TURN RT ON CHALYBEATE SPRINGS RD 2.3 MI TURN LEFT
ON ATKINS RD 1.6 MI TURN RT ON MOONLIGHT

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]
Signature of Owner or Owner's Agent

3/25/16
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: [Signature]

APPLICATION #: 3/28/16

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 # 014980

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, water lines 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.

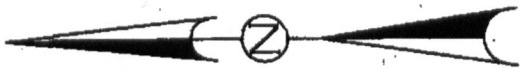
I Understand That I Am Solely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making The Site Accessible So That A Complete Site Evaluation Can Be Performed.

[Signature]
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

3/28/16
DATE

IMPERVIOUS SURFACE COVERAGE
 3033 SQ.FT. - HOUSE, PORCHES & GARAGE
 159 SQ.FT. - STEPS & WALK
 728 SQ.FT. - DRIVEWAY
 3920 TOTAL SQ.FT. - PROPOSED COVERAGE
 37354 SQ.FT. - ALLOWABLE COVERAGE
 33434 SQ.FT. - AVAILABLE COVERAGE

DEED NORTH 1841 PG 532



SUBDIVISION,
 193-196 AND
 PGS. 199-200.
 DATE METHOD.
 WITHIN 2000'.
 HARNETT COUNTY
 ITEMS.

ORD.
 TION,

Drawn under my
 seal, indicated as
 being a true and
 correct copy of the
 original filed in
 the office of the
 Register of Deeds
 for the County of
 Harnett, North Carolina
 this 20th day of
 July, 2014.
 J. WILLIAMS
 Professional Land
 Surveyor
 No. 10000
 STATE OF NORTH CAROLINA
 REGISTER OF DEEDS
 HARNETT COUNTY

J. P.A. W

'597
 C-0243

MOONLIGHT DRIVE
 50' PUBLIC R/W

N 88°21'29" E 230.00'

N 82°10'19" E

20' PUBLIC DRAINAGE EASEMENT

40.00'

PROPOSED DRIVEWAY

PROPOSED DWELLING

SLAB

PORCH

10' x 20'

25'

LOT 51

2.382 ACRES

N 15°36'21" W 195.63'

N 74°33'28" E 150.00'

N 15°26'32" W 105.50'

S 78°28'15" W 193.16'

N 71°47'54" W 175.16'

67.63'

20' PUBLIC DRAINAGE EASEMENT

S 02°20'52" E

S 13°14'16" W 275.70'

S 45°55'36" E 581.75'

TO C/L INTERSECTION OF MOONLIGHT DRIVE & SADDLEBROOK DRIVE

LOT 50 OF MAP NUMBER 2008-193

50' BUFFER MEASURED FROM EDGE OF POND

POND

FUTURE DEVELOPEMENT

SITE PLAN APPROVAL

DISTRICT #BEDROOMS 3-28-10

USE DDW & BGW

PLOT PLAN FOR
 COMFORT HOMES
 BLACK RIVER TOWNSHIP
 HARNETT COUNTY
 NORTH CAROLINA

DRAWN BY: DDW & BGW

CHECKED BY: DDW

DATE: 07-03-2014

SCALE: 1" = 80'

JOB: STETSON CF

80 0 80 160 240



GRAPHIC SCALE - FEET
 PLAN "DUNCAN"
 OVERALL 47.0 X 65.0

Harnett County Central Permitting

PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 910-893-2793 - www.harnett.org/permits

**Certification of Work Performed By Owner/Contractor
(Individual Trade Application)**

Owner (s) of Structure: KENNETH D HANNINK Phone: 209-985-6676

Owner (s) Mailing Address: 86 MOONLIGHT DR FARGAY VARENA 27526

Land Owner Name (s): KENNETH D HANNINK Phone: 209-985-6676

Construction or Site Address: 86 MOONLIGHT DR FARGAY VARENA

PIN # _____ Parcel # _____

Job Cost: \$3500.00 Description of Work to be done BUILD DECK

Mechanical: New Unit With Ductwork New Unit Without Ductwork Gas Piping Other

Electrical*: 200 Amp <200 Amp Service Change Service Reconnect Other
* For Progress Energy customers we need the premise number

Plumbing: Water/Sewer Tap Number of Baths Water Heater

Specific Directions to Job from Lillington:

TURN RT ON STATE ST 1.6 MI TURN LEFT ON 401 7.5 MI
TURN RT ON CHALYBEATE SPRINGS RD 2.3 MI TURN LEFT ON
ATKINS RD 1.6 MI TURN RT ON MOONLIGHT DR

Subdivision: _____ Lot #: _____

I MARK Mc Gill will provide the CARPENTER labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is _____, which entitles me to perform such work on the above structure legally. All work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations.

MARK Mc Gill
Contractor's Company Name

203-206-2868
Telephone

1576 WOLCOTT RD WOLCOTT CT 06216
Address

Email Address

License # _____

Structure Owner / Contractor Signature: [Signature] Date: 3/25/16

By signing this application you affirm that you have obtained permission from the above listed license holder to purchase permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or sell the listed property for 12 months after completion of the listed work.

***Company name, address, & phone must match information on license**

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	16-50038322	Page	2
Property Address	86 MOONLIGHT DR	Date	4/18/16
PARCEL NUMBER	04-0674- - -0046- -51-		
Application description . . .	CP ADD & ALTER RESIDENTIAL		
Subdivision Name	STETSON 53LOTS		
Property Zoning	RES/AGRI DIST - RA-30		

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	_____	___/___/___

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 16-50038322 Date 4/18/16
Property Address 86 MOONLIGHT DR
PARCEL NUMBER 04-0674- - -0046- -51-
Application type description CP ADD & ALTER RESIDENTIAL
Subdivision Name STETSON 53LOTS
Property Zoning RES/AGRI DIST - RA-30

Owner

Contractor

HANNINK KENNETH D & TRACIE L
86 MOONLIGHT DRIVE
FUQUAY VARINA NC 27526

OWNER

Applicant

MCGILL MARK
1576 WOLCOTT RD
WOLCOTT CT 06716
(203) 206-2868

--- Structure Information 000 000 16X20 DECK
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 . . 1135433
Issue Date 4/18/16 Valuation 0
Expiration Date . . . 4/18/17

Permit LAND USE PERMIT

Additional desc . . .
Phone Access Code . . 1135441
Issue Date 4/18/16 Valuation 0
Expiration Date . . . 10/15/16

Special Notes and Comments

T/S: 03/28/2016 10:22 AM LBENNETT --
STETSON - 86 MOONLIGHT DR
TURN R ON S MAIN ST - 1.5 MI TURN LEFT
ON 401 - 7.5 MI TURN RIGHT ON
CHALYBEATE SPRINGS RD- 2.3 MI TURN LEFT
ON ATKINS RD - 1.6 MI TURN RIGHT ON
MOONLIGHT

