

Initial Application Date: 3.28.16

*John of ERNCA Info Only*

Application # 16 50038334

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: Michael Shear Mailing Address: 711 Gardner Rd

City: Angier State: NC Zip: 27501 Contact No: 919.427.3313 Email: \_\_\_\_\_

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: Rickie L Day Lot #: 1 Lot Size: 1.12 AC

State Road # \_\_\_\_\_ State Road Name: Warren Rd Map Book & Page: 2013, 322

Parcel: 00-1500-01-0009 PIN: 0596-98-7186

Zoning: ERNUA Flood Zone: X Watershed: NA Deed Book & Page: 3310, 501 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 14 x 20) Use: LR, Family Room 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: existing Manufactured Homes: \_\_\_\_\_ Other (specify): \_\_\_\_\_

**Required Residential Property Line Setbacks:**

Comments: \_\_\_\_\_

	Minimum	Actual
Front	<u>7</u>	<u>7</u>
Rear	<u>7</u>	<u>7</u>
Closest Side	<u>7</u>	<u>7</u>
Sidestreet/corner lot	<u>7</u>	<u>7</u>
Nearest Building on same lot	<u>7</u>	<u>7</u>

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:

421 to Erwin Right into  
Town left at Carlee's C's Right on Erwin Rd  
1226 on Right

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

3/28/16  
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: Maehail Sheau

APPLICATION #: 38334

**\*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 # 014977

**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)

*[Handwritten Signature]*

3/28/16

DATE



Town of Erwin  
**Zoning Application & Permit**  
 Planning & Inspections Department

Permit #

Rev Sep2014

Each application should be submitted with an attached plot/site plan with the proposed use/structure showing lot shape, existing and proposed buildings, parking and loading areas, access drives and front, rear, and side yard dimensions.

Name of Applicant	Michael Shean	Property Owner	Michael Shean
Home Address	711 Gardner Rd	Home Address	Same
City, State, Zip	Angier NC 27501	City, State, Zip	Same
Telephone	919-427-3313	Telephone	
Email	oldharley61man@hotmail.com	Email	

Address of Proposed Property	1226 Warren Rd		
Parcel Identification Number(s) (PIN)	0596-98-7186-000	Estimated Project Cost	11,000
What is the applicant requesting to build / what is the proposed use of the subject property? Be specific.	Addition, Living Room		
Description of any proposed improvements to the building or property	14'x20' living room/family room		
What was the Previous Use of the subject property?	single family home		
Does the Property Access DOT road?	Yes, Warren Rd		
Number of dwelling/structures on the property already	1	Property/Parcel size	1.25 Acres
Floodplain SFHA	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Watershed	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
		Wetlands	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<b>MUST</b> circle one that applies to property	Existing/ <del>Proposed</del> Septic System Or Existing Well		
	Existing/Proposed County/City Sewer		

**Owner/Applicant Must Read and Sign**

The undersigned property owner, or duly authorized agent/representative thereof certifies that this application and the foregoing answers, statements, and other information herewith submitted are in all respects true and correct to the best of their knowledge and belief. The undersigning party understands that any incorrect information submitted may result in the revocation of this application. Upon issuance of this permit, the undersigning party agrees to conform to all applicable town and state zoning regulations, and the laws of the State of North Carolina regulating such work and to the specifications of plans herein submitted. The undersigning party authorizes the Town of Erwin to review this request and conduct a site inspection to ensure compliance to this application as approved.

**PAID**  
 MAR 25 2016

<u>Michael Shean</u> Print Name	<u>[Signature]</u> Signature of Owner or Representative	<u>2/22/16</u> Date	TOWN OF ERWIN pd cash
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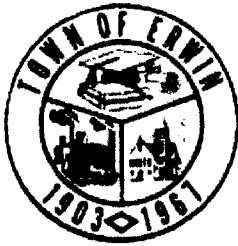
**For Office Use**

Zoning District	R-10	Existing Nonconforming Uses or Features	
Front Yard Setback	35'	Other Permits Required	Conditional Use <input type="checkbox"/> Building <input checked="" type="checkbox"/> Fire Marshal <input type="checkbox"/> Other <input type="checkbox"/>
Side Yard Setback	10'	Requires Town Zoning Inspection(s)	<input checked="" type="checkbox"/> Foundation <input type="checkbox"/> Prior to C. of O.
Rear Yard Setback	35'	Zoning Permit Status	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied
		Fee Paid: 10.00	Date Paid: 3/23/16 Staff Initials: <u>SB</u>

Comments	14' x 20' heated area addition. 280 sq ft
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Signature of Town Representative: <u>[Signature]</u>	Date Approved/Denied: 3/23/16
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Town & Erwin needs to do Foundation Zoning Inspection



# TOWN OF ERWIN

P.O. Box 459 · Erwin, NC 28339  
Ph: 910-897-5140 · Fax: 910-897-5543  
www.erwin-nc.org

**Mayor**  
Patsy M. Carson  
**Mayor Pro Tem**  
Randy L. Baker  
**Commissioners**  
William R. Turnage  
Thurman E. Whitman  
Alvester L. McKoy  
Ricky W. Blackmon  
Frankie Ballard

March 23, 2016

Michael Shean  
711 Garner Road  
Angier, N.C. 27501

**RE: Zoning Verification Letter – 1226 Warren Road, PIN 0596-98-7186.000 –  
Living Room/Family Room Addition**

Please accept this correspondence from the Town of Erwin as verification of zoning compliance for the noted address with Harnett County Tax PIN# **0596-98-7186.000**. The subject property is within the **R-10 Residential** Zoning District as denoted by the most recently adopted Erwin Zoning Map. The existing use of the property is that of **Residential**. The noted Zoning District permits this use. The nature of the proposed improvement is for a residence.

This letter verifies that the proposed work is in compliance with the Town of Erwin Zoning Code and that the proposed work is eligible for permitting by the Town of Erwin and Harnett County permitting, as applicable; provided, however that this letter does not authorize new construction or additions or development of the subject property such as expansion of existing primary or accessory structures/uses or the construction of additional primary or accessory structures/uses. We are in receipt of a zoning permit application with site plan illustrating the proposed development.

Should there be any further questions, please feel free to contact me at Town Hall.

Sincerely,

Richard N. Hicks  
Interim Town Manager

**PAID**

MAR 25 2016

TOWN OF ERWIN

*pd  
Carson*

09/09/11

Application # 38334

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 Michael Shean Date 4/26/16  
Site Address 1226 Warren Rd Erwin NC Phone 919 427-3313  
Directions to job site from Lillington \_\_\_\_\_

Subdivision N/A Lot 4  
Description of Proposed Work \_\_\_\_\_ # of Bedrooms 0  
Heated SF \_\_\_\_\_ Unheated SF \_\_\_\_\_ Finished Bonus Room? \_\_\_\_\_ Crawl Space \_\_\_\_\_ Slab \_\_\_\_\_

**General Contractor Information**  
Michael Shean 919 427 3313  
Building Contractor's Company Name Telephone  
711 Gardner Rd Angier NC 27501 oldharley61man@aol.com  
Address Email Address

License # \_\_\_\_\_  
**Electrical Contractor Information**  
Description of Work Family Room Service Size 200 Amps T-Pole Yes  No  
Michael Shean 919-427-3313  
Electrical Contractor's Company Name Telephone  
711 Gardner Rd Angier NC 27501  
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 N/A Existing # Baths \_\_\_\_\_  
Plumbing Contractor's Company Name Telephone  
Address Email Address

License # \_\_\_\_\_  
**Insulation Contractor Information**  
Michael Shean 919 427-3313  
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

4/26/16  
\_\_\_\_\_  
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 \_\_\_\_\_

Date 4/26/16





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.

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Application Number . . . . . 16-50038334  
Expiration Date . . . . . 10/23/16

Page 2  
Date 4/26/16

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Special Notes and Comments

T/S: 03/29/2016 09:14 AM DJOHNSON --  
421 TO ERWIN. RIGHT AND GO THRU TOWN  
LEFT AT CARLIE C'S. RIGHT ON ERWIN RD  
1226 ON RIGHT.

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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.

Application Number . . . . .	16-50038334	Page	3
Property Address . . . . .	1226 WARREN RD	Date	4/26/16
PARCEL NUMBER . . . . .	06-1506-01- -0009- - -		
Application description . . .	CP ADD & ALTER RESIDENTIAL		
Subdivision Name . . . . .			
Property Zoning . . . . .	ERWIN		

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	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	_____	___/___/___