

Initial Application Date: 4-12-14

Application # 1650038447

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: Brian Doyle - Jennifer Davis Mailing Address: 6093 NC 217

City: Linden State: NC Zip: 28356 Contact No: 910-237-7563 Email: brian.doyle77@yahoo.com

APPLICANT\*: Brian Doyle Mailing Address: 6093 NC 217

City: Linden State: NC Zip: 28356 Contact No: 910-237-7563 Email: brian.doyle77@yahoo.com

\*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Brian Doyle Phone # 910-237-7563

PROPERTY LOCATION: Subdivision: The Pines sec 11 PC # C/163-A Lot #: 9 Lot Size: 1.45

State Road # \_\_\_\_\_ State Road Name: 6093 NC 217 Map Book & Page: - 1 -

Parcel: 120575 0003 08 PIN: 0575-83-0455.000

Zoning: RA40 Flood Zone: X Watershed: - Deed Book & Page: 1296, 0782 Power Company\*: DUKE Progress

\*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 36 x 29) Use: GARAGE / STORAGE 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): Addition

**Required Residential Property Line Setbacks:**

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

Front	Minimum	Actual
Rear	<u>35</u>	<u>80+-</u>
Closest Side	<u>10</u>	<u>25+-</u>
Sidestreet/corner lot	_____	_____
Nearest Building on same lot	_____	_____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 401 south left on Hoarsehoe Bend  
Right on 217 House on Right 6090 NC 217 Linden NC

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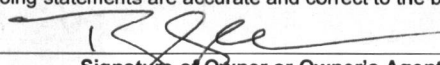
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If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted. I hereby state that foregoing statements are accurate and correct to the best of my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

  
Signature of Owner or Owner's Agent

4/12/16  
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: Brian Doyle

APPLICATION #: \_\_\_\_\_

**\*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 # \_\_\_\_\_

**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.

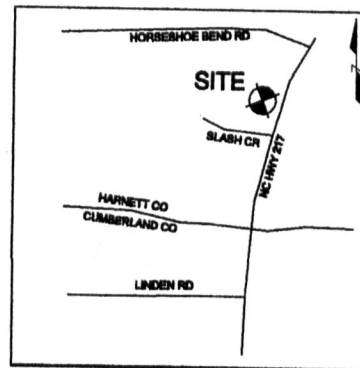
**I Have Read This Application And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And State Officials Are Granted Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules. I Understand That I Am Solely Responsible 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)**

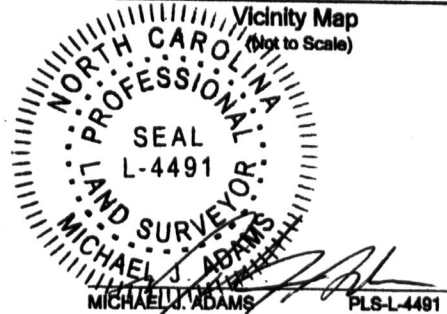
4/12/16  
 \_\_\_\_\_  
**DATE**

# CLOSING SURVEY

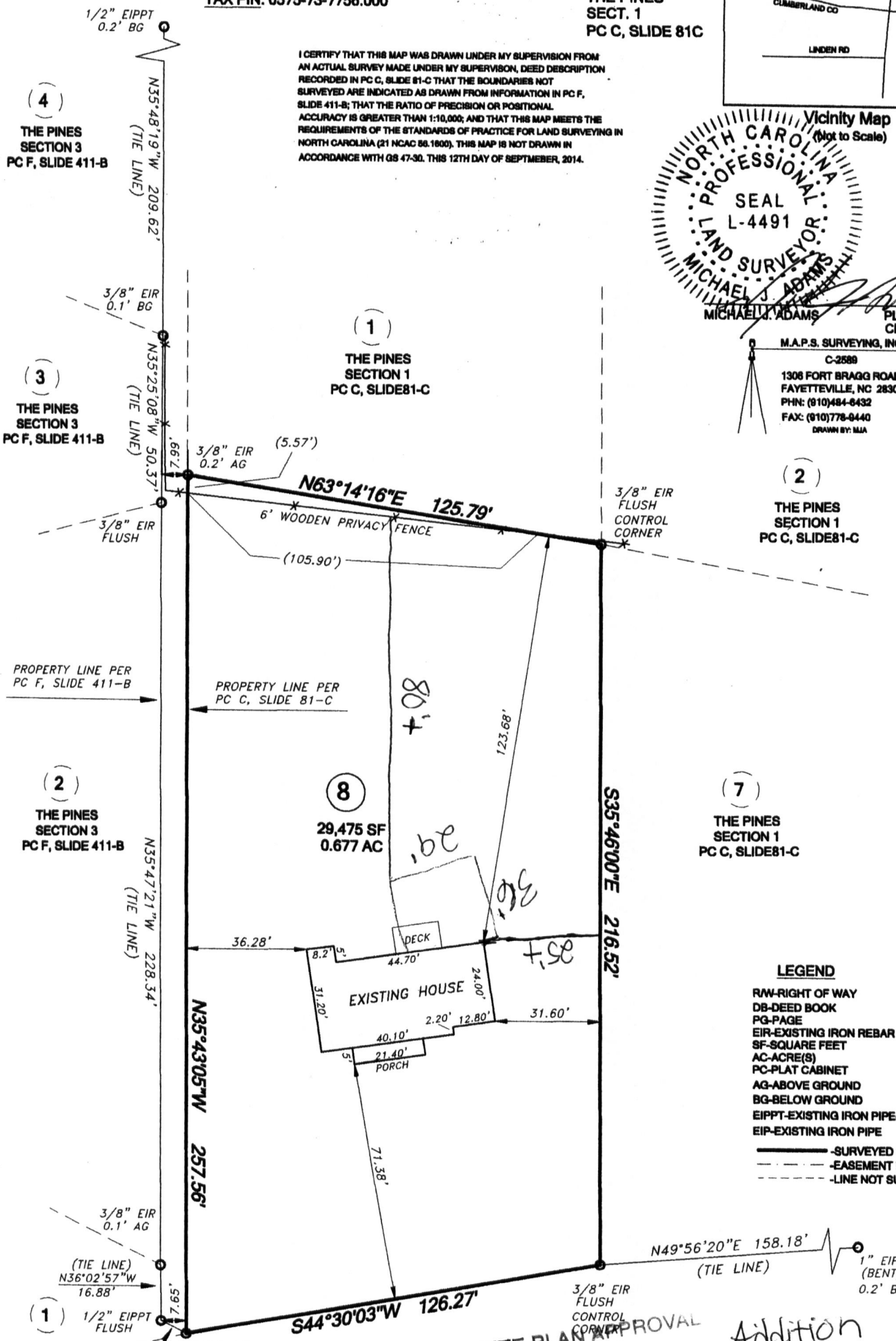
**PROPERTY OF:** BRIAN O. DOYLE      **TOWNSHIP:** STEWARTS CREEK  
**ADDRESS:** 6090 NC HWY 217      **DATE:** SEPTEMBER 12, 2014  
**CITY:** LINDEN, NC      **SCALE:** 1" = 40'  
**COUNTY:** HARNETT      **REFERENCE:** LOT 8  
**TAX PIN:** 0575-73-7756.000      **THE PINES**  
    **SECT. 1**  
    **PC C, SLIDE 81C**



I CERTIFY THAT THIS MAP WAS DRAWN UNDER MY SUPERVISION FROM AN ACTUAL SURVEY MADE UNDER MY SUPERVISION, DEED DESCRIPTION RECORDED IN PC C, SLIDE 81-C THAT THE BOUNDARIES NOT SURVEYED ARE INDICATED AS DRAWN FROM INFORMATION IN PC F, SLIDE 411-B; THAT THE RATIO OF PRECISION OR POSITIONAL ACCURACY IS GREATER THAN 1:10,000; AND THAT THIS MAP MEETS THE REQUIREMENTS OF THE STANDARDS OF PRACTICE FOR LAND SURVEYING IN NORTH CAROLINA (21 NCAC 56.1900). THIS MAP IS NOT DRAWN IN ACCORDANCE WITH GS 47-30. THIS 12TH DAY OF SEPTMBER, 2014.

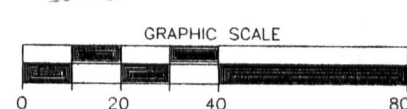


**M.A.P.S. SURVEYING, INC.**  
 C-2588  
 1306 FORT BRAGG ROAD  
 FAYETTEVILLE, NC 28305  
 PHN: (910)484-6432  
 FAX: (910)778-0440  
 DRAWN BY: MJA



- LEGEND**
- RAW-RIGHT OF WAY
  - DB-DEED BOOK
  - PG-PAGE
  - EIR-EXISTING IRON REBAR
  - SF-SQUARE FEET
  - AC-ACRE(S)
  - PC-PLAT CABINET
  - AG-ABOVE GROUND
  - BG-BELOW GROUND
  - EIPPT-EXISTING IRON PIPE(PINCH TOP)
  - EIP-EXISTING IRON PIPE
  - SURVEYED LINE
  - - - EASEMENT LINE
  - - - LINE NOT SURVEYED

**SITE PLAN APPROVAL**  
 DISTRICT RA-40 USE Addition  
 #BEDROOMS 3  
4-12-14  
 Date  
LB X 7880  
 Zoning Administrator



NC HWY 217  
 50' PUBLIC RW

09/09/11

Application #  
38447

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 Brian Doyle Date 4/12/16  
Site Address 6090 NC 217 Phone 910-237-7563  
Directions to job site from Lillington South on 401 left on Horseshoe Bend  
Right on 217 property on Right 6090 NC 217

Subdivision \_\_\_\_\_ Lot \_\_\_\_\_  
Description of Proposed Work Garage Addition # of Bedrooms \_\_\_\_\_  
Heated SF \_\_\_\_\_ Unheated SF \_\_\_\_\_ Finished Bonus Room? \_\_\_\_\_ Crawl Space 200 Slab 802

**General Contractor Information**

Brian Doyle 910-237-7563  
Building Contractor's Company Name Telephone  
6093 NC 217 Linton brian.doyle.TT@yahoo.com  
Address Email Address

License # \_\_\_\_\_  
Description of Work Adding to existing service **Electrical Contractor Information** Service Size \_\_\_\_\_ Amps T-Pole  Yes  No

Bobby Williams 910 308-0595  
Electrical Contractor's Company Name Telephone  
805 South Washington Ave. Email Address  
165884  
License # \_\_\_\_\_

**Mechanical/HVAC Contractor Information**

Description of Work N/A  
Mechanical Contractor's Company Name Telephone  
Address Email Address  
165884  
License # \_\_\_\_\_

**Plumbing Contractor Information**

Description of Work N/A # Baths \_\_\_\_\_  
Plumbing Contractor's Company Name Telephone  
Address Email Address  
License # \_\_\_\_\_

**Insulation Contractor Information**

Brian Doyle 910-237-7563  
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

*R. J. Lee*  
Signature of Owner/Contractor/Officer(s) of Corporation

4/12/16  
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 Bean Doyle Date 4/12/16

Application Number . . . . .	16-50038447	Page	3
Property Address . . . . .	6093 NC 217	Date	4/25/16
PARCEL NUMBER . . . . .	12-0575- - -0003- -08-		
Application description . . .	CP ADD & ALTER RESIDENTIAL		
Subdivision Name . . . . .	THE PINES		
Property Zoning . . . . .	PENDING		

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 . . . . RESIDENTIAL ELECTRICAL PERMIT

\_\_\_\_\_

\_\_\_\_\_

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 4
Application Number . . . . . 16-50038447	Date 4/25/16
Property Address . . . . . 6093 NC 217	
PARCEL NUMBER . . . . . 12-0575- - -0003- -08-	
Application description . . . . . CP ADD & ALTER RESIDENTIAL	
Subdivision Name . . . . . THE PINES	
Property Zoning . . . . . PENDING	

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
999	211	E211	R*ELEC ABOVE CEILING	_____	__/__/__
Permit type . . . . . RESIDENTIAL ELECTRICAL PERMIT					
999	217	E217	R*ELEC RECONNECT	_____	__/__/__
999	205	E205	R*ELEC UNDER SLAB	_____	__/__/__
999	215	E215	R*ELEC. UND. POOL	_____	__/__/__
999	213	E213	R*ELECTRICAL UNDERGROUND	_____	__/__/__
999	131	R131	ONE TRADE FINAL	_____	__/__/__
999	125	R125	ONE TRADE ROUGH IN	_____	__/__/__
Permit type . . . . . RESIDENTIAL INSULATION PERMIT					
999	185	I185	C*INSULATION INSPECTION	_____	__/__/__
999	129	I129	R*INSULATION INSPECTION	_____	__/__/__
Permit type . . . . . LAND USE PERMIT					
999	818	Z818	PZ*ZONING INSPECTION	_____	__/__/__
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  
Bldg Insp scheduled before 2pm available next business day.

Application Number . . . . . 16-50038447 Date 4/25/16  
Property Address . . . . . 6093 NC 217  
PARCEL NUMBER . . . . . 12-0575- - -0003- -08-  
Application type description CP ADD & ALTER RESIDENTIAL  
Subdivision Name . . . . . THE PINES  
Property Zoning . . . . . PENDING

Owner	Contractor
-----	-----
DOYLE BRIAN O & DAVIS JENNIFER & DAVIS JOAN M & LINDEN NC 28356	BOBBY WILLIAMS ELECTRIC 805 SOUTH WASHINGTON AVE DUNN NC 28334 (910) 308-0595

Applicant  
-----  
DOYLE BRIAN  
6093 NC 217  
SHANNON NC 28386  
(910) 237-7563

--- Structure Information 000 000 36X29 GARAGE/STORAGE  
Flood Zone . . . . . FLOOD ZONE X  
Other struct info . . . . . # BEDROOMS 3.00  
SEPTIC - EXISTING? EXIST SEPTIC  
WATER SUPPLY WELL

Permit . . . . . RESIDENTIAL BUILDING PERMIT  
Additional desc . . .  
Phone Access Code . 1136753  
Issue Date . . . . . 4/25/16 Valuation . . . . . 0  
Expiration Date . . . 4/25/17

Permit . . . . . RESIDENTIAL ELECTRICAL PERMIT  
Additional desc . . .  
Phone Access Code . 1136761  
Issue Date . . . . . 4/25/16 Valuation . . . . . 0  
Expiration Date . . . 4/25/17

Permit . . . . . RESIDENTIAL INSULATION PERMIT  
Additional desc . . .  
Phone Access Code . 1136787  
Issue Date . . . . . 4/25/16 Valuation . . . . . 0  
Expiration Date . . . 4/25/17

Permit . . . . . LAND USE PERMIT  
Additional desc . . .

\_\_\_\_\_  
\_\_\_\_\_

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 . . . . .	16-50038447	Page	2
Phone Access Code . . . . .	1136779	Date	4/25/16
Issue Date . . . . .	4/25/16	Valuation . . . . .	0
Expiration Date . . . . .	10/22/16		

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Special Notes and Comments

T/S: 04/12/2016 09:51 AM LBENNETT --  
401 S LEFT ON HORSESHOE BEND - RIGHT ON  
217 HOUSE ON RIGHT

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**GEORGE M. ROSE, P.E.**

P.O. Box 53441  
Fayetteville, NC 28305  
910-977-5822

April 27, 2016

Jimmy Hall  
Harnett County Inspections Department  
108 E. Front Street  
Lillington, NC 28546

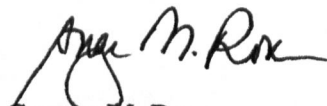
Re: 6090 NC 217  
Linden, NC 28356

Dear Mr. Hall,

I have personally inspected the premises at the above referenced address and noted the recently constructed wood floor system installed over the original single-car garage slab. The floor system was framed using 2x10 Southern Yellow Pine #2 joists spaced at 16" on-center. The overall span of the joists is approximately 11'-4" and a 2x4 knee wall bearing on the garage slab has been constructed at the approximate midpoint of that span. Given that the NC State Building Code allows for a clear span of 14'-8" for 2x10 joists at 16" on-center for residential living areas, it is my professional opinion that the floor system has been adequately constructed and exceeds the minimum requirements of the code. The floor system has been properly insulated with R19 fiberglass batt insulation and the ventilation of the crawl space area under the floor system exceeds code minimums.

Please contact me if you have questions or need additional information.

Sincerely,



George M. Rose  
Licensed Professional Engineer No. 11315

