

Initial Application Date: 6/7/17

Application # 17-50041571

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 Worden Jr Mailing Address: 1415 Jarratt Bay Ln

City: Fuquay Varina State: NC Zip: 27570 Contact No: 856-236-3877 Email: Black River Woodwork@gmail.com

APPLICANT: Black River Woodwork Mailing Address: 574 N Broad St E

City: Angier State: NC Zip: 27501 Contact No: 919-757-4559 Email: Black River Woodwork@gmail.com

CONTACT NAME APPLYING IN OFFICE: Courtney Jusnes Phone # 719-757-4558

PROPERTY LOCATION: Subdivision: Alex Pace Lot #: 5 Lot Size: .82

State Road # 2261 State Road Name: Jarratt Bay Lane Map Book & Page: 2005/149

Parcel: 04 0004 0157 05 PIN: 0674-08-2467.000

Zoning: RA-20/CONS Flood Zone: X Watershed: GIS Deed Book & Page: 3207/623 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 17 x 11) Use: Deck expansion Closets in addition? () yes (X) 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 (X) no

Does the property contain any easements whether underground or overhead () yes (X) no

Structures (existing or proposed): Single family dwellings: 1 existing Manufactured Homes: _____ Other (specify): 1 proposed

Required Residential Property Line Setbacks:

Front	Minimum	Actual
		<u>88'</u>
Rear		<u>25'</u>
Closest Side		<u>37'</u>
Sidestreet/corner lot		
Nearest Building on same lot		

Comments: _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Left on Front St; 401 North
Right on Rawls Church, Right on Jallet Bay LN
house is on left

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.

Courtney Gray
Signature of Owner or Owner's Agent

6-7-17
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

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 KENNETH WORDEN JR Date 6/7/17

Site Address 145 JARRETT BAY LN FURWAY VALENA Phone 856 236 3827

Directions to job site from Lillington YOIN - P ON ZAWLS CHURCH
R ON JARRETT BAY
HOUSE ON LEFT

Subdivision ALEX PLACE Lot 5

Description of Proposed Work DECK EXPANSION # of Bedrooms 3

Heated SF _____ Unheated SF _____ Finished Bonus Room? _____ Crawl Space Slab _____

General Contractor Information

BLACK RIVER WOODWORK LLC
Building Contractor's Company Name
574 N BROAD STE ANGLIER NC
Address
73222

919 757 4559
Telephone
BLACK RIVER WOODWORK
Email Address @GMAIL.COM

License # _____

Electrical Contractor Information

Description of Work N/A Service Size _____ Amps T-Pole Yes No

Electrical Contractor's Company Name _____ Telephone _____

Address _____ Email Address _____

License # _____

Mechanical/HVAC Contractor Information

Description of Work N/A

Mechanical Contractor's Company Name _____ Telephone _____

Address _____ Email Address _____

License # _____

Plumbing Contractor Information

Description of Work N/A # 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

6/7/17
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 BLACK RIVER WOODWORK LLC

Sign w/Title 

BOBBI JONES O/O

Date 6/7/17

NAME: Kenneth Worden JR

APPLICATION #: 17-50041571

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 # 3A U/7/17 022408

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.

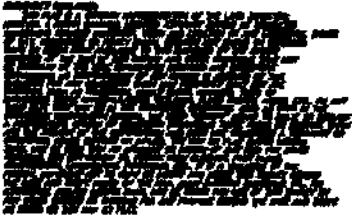
Kenneth Worden JR
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

6-7-17
DATE

CURVE DATA TABLE

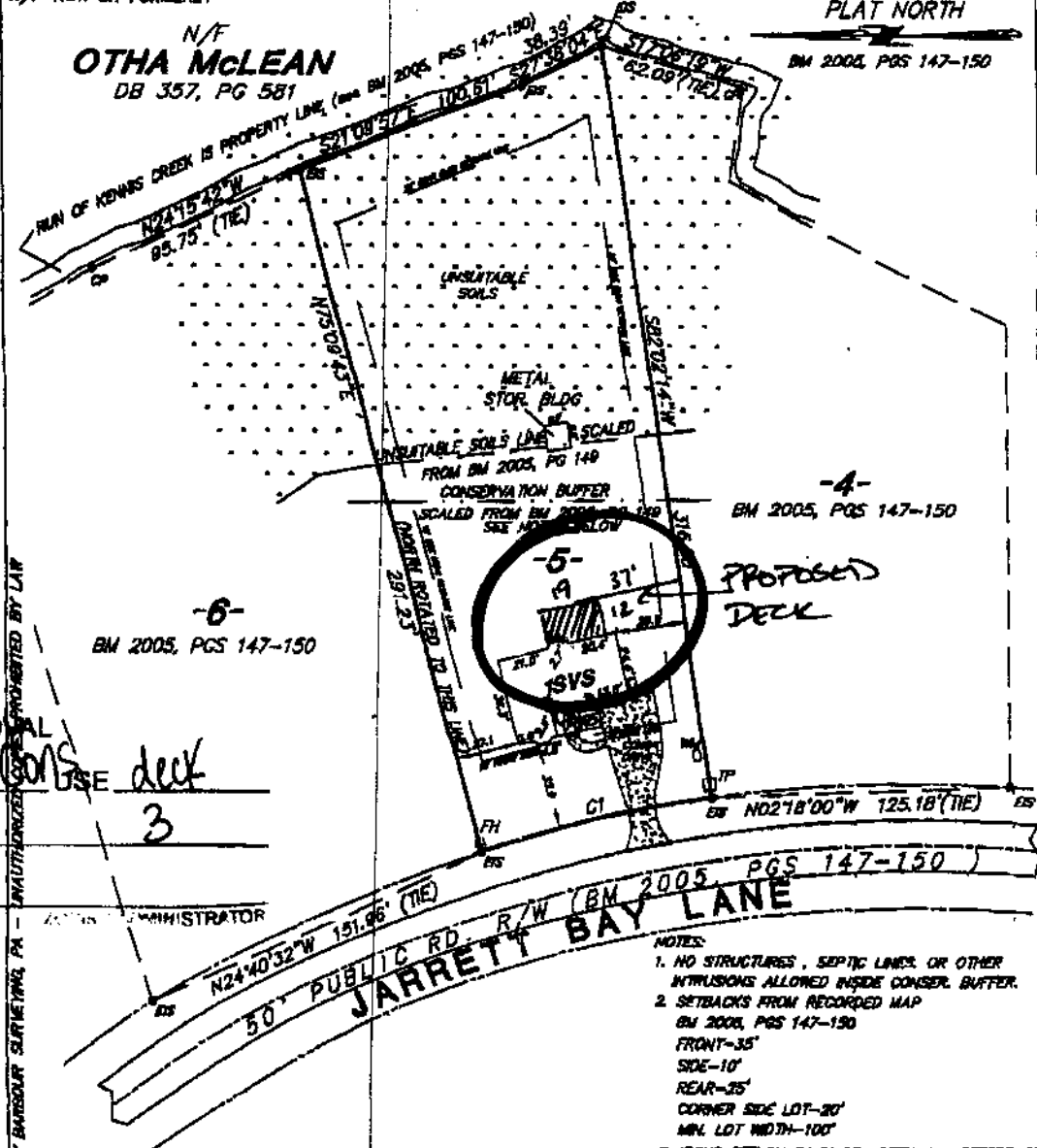
CURVE	RADIUS	ARC LENGTH	CHORD LENGTH	CHORD BEARING	DELTA ANGLE
C1	670.83'	99.71'	99.60'	N12°51'21" W	9°21'05"

LEGEND
 EIS-EXISTING IRON STAKE
 CP-COMPUTED POINT
 1SVS-ONE STORY DWELLING WITH VINYL SIDING
 WM-WATER METER
 TP-TELEPHONE PEDESTAL
 BM-BOOK OF MAPS
 PG-PAGE
 DB-DEED BOOK
 FH-FIRE HYDRANT
 R/W-RIGHT OF WAY
 N/F-NOW OR FORMERLY



VICINITY MAP
(NOT TO SCALE)
PLAT NORTH

N/F
OTHA McLEAN
 DB 357, PG 581



SITE PLAN APPROVAL
 DISTRICT PA-30/180NS deck
 #BEDROOMS 3
 (BR) 6/7/17

- NOTES:**
- NO STRUCTURES, SEPTIC LINES, OR OTHER INTRUSIONS ALLOWED INSIDE CONSERV. BUFFER.
 - SETBACKS FROM RECORDED MAP
 BM 2005, PGS 147-150
 FRONT-35'
 SIDE-10'
 REAR-35'
 CORNER SIDE LOT-30'
 MIN. LOT WIDTH-100'
 - IRONS SET ON BANK OF CREEK FOR REFERENCE ONLY. RUN OF CREEK IS PROPERTY LINE.



STREET ADDRESS:
 145 JARRETT BAY LANE
 FUQUAY VARINA, NC

LOT CONTAINS
 0.812 AC 35,887 SF
SURVEY FOR:

<p>State of North Carolina, JOHNSTON County I certify that this map was drawn under my supervision from an actual survey made under my supervision (and description recorded in Deed Book 3089, Page 715 or other referenced source in 2005, PG 147-150) and that the scale of precision or additional accuracy is 1:10,000+; and that this map complies with the requirements of the STANDARD PRACTICE OF LAND SURVEYING in North Carolina as set forth in the 1ST day of APRIL 2014.</p> <p style="text-align: right;">JIMMY C. BARBOUR Licensed Professional Land Surveyor No. 14-043</p>	<p>DEED REFERENCE DEED BOOK PG 1 PARCEL ID NO. 0874-09-2407 SURVEYED BY RM FIELD BOOK 140 AS RECORDED IN BOOK OF MAPS 2005, PGS 147-150 DATE 3-28-2014 BLACK RIVER TWP, JARRETT COUNTY, NC DRAWN BY CM SCALE 1"=60' DWS NO. 14-043</p> <p style="text-align: center;">KENNETH F. WORDEN, JR.</p> <p style="text-align: center;">LOT 5 ALEX PLACE S/D AS RECORDED IN BOOK OF MAPS 2005, PGS 147-150</p> <p style="text-align: center;">JIMMY C. BARBOUR SURVEYING, LLC JIMMY C. BARBOUR, P.L.S. 657 200 South 2nd Street P.O. Box 200 Fuquay Varina, NC 27043 (919) 852-2222</p>
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HTE # 05-8-1142

HARNETT COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SECTION

17568

OPERATIONS PERMIT

Name: (owner) Francis Building Inc New Installation Septic Tank Repair

Property Location: SR# 14/10 Nitrification Line Expansion

Subdivision Alaplace Lot # 5 Tax ID # _____ Quadrant # _____

Contractor: Francis Registration # _____

Basement with Plumbing: Garage:

Water Supply: Well Public Community

Distance From Well: 50 ft.

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

Type of system: Conventional Other EZF/ow

Size of tank: Septic Tank: 1000 gallons Pump Tank: _____ gallons

Subsurface Drainage Field No. of ditches 3 exact length of each ditch 75 ft. width of ditches 3 ft. depth of ditches 22-18 in.

French Drain Required: _____ Linear feet Date: 7/1/2005

PERMIT NO. 21646 Inspected by: Bryan McJinn L.S.

