

Initial Application Date: 10/03/2017

Application # 17-50042444

CU# \_\_\_\_\_

Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.hamett.org/permits

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION"

LANDOWNER: Burdge, Brenda Mailing Address: 98 Oxford Woods Drive

City: Angler State: NC Zip: 27501 Contact No: 336.637.6561 Email: \_\_\_\_\_

APPLICANT: Champion Windows Mailing Address: 300 Dominion Drive Ste 201

City: Morrisville State: NC Zip: 27560 Contact No: 919.468.5217 Email: psmlth@getchampion.com

\*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Princess Smith Phone # 919.468.5217

PROPERTY LOCATION: Subdivision: Oxford Woods Lot #: 41 Lot Size: 29923

State Road # 2900 State Road Name: Oxford Woods Dr. Map Book & Page: 2008/214

Parcel: 0406092 0017 36 PIN: 0682-98-6969,000

Zoning: RA 30 Flood Zone: X Watershed: No Dead Book & Page: 3484, 4 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 \_\_\_\_\_ x \_\_\_\_\_) Use: existing deck to screened/covered 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: 1 existing Manufactured Homes: 0 Other (specify): Screen Room

Required Residential Property Line Setbacks:

Front Minimum \_\_\_\_\_ Actual \_\_\_\_\_  
Rear 25 ft 223 ft  
Closest Side \_\_\_\_\_  
Sidestreet/corner lot \_\_\_\_\_  
Nearest Building on same lot \_\_\_\_\_

Comments: screening in an existing deck, no change to footprint. Existing deck will meet specs of current building codes/wind loads.

**SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:** directions on permit application-

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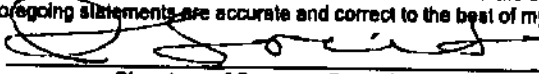
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If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted. I hereby state that foregoing statements are accurate and correct to the best of my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

  
\_\_\_\_\_  
Signature of Owner or Owner's Agent

10/3/17  
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\*\*

08/09/11

Application #

17-50042444

Harnett County Central Permitting  
PO Box 65 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 Brenda Burdge Date 8/22/17

Site Address 98 Oxford Woods Drive Phone \_\_\_\_\_

Directions to job site from Lillington Right onto US 421 S, left onto Leslie Campbell Ave traffic circle, 2nd exit, continue on Leslie Campbell, follow old stage rd to Oxford Woods drive, left onto Oxford Woods drive.

Subdivision Oxford Woods Sub Lot 41

Description of Proposed Work enclosing deck with screens # of Bedrooms \_\_\_\_\_

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

**General Contractor Information**

Champion Windows

919.468.5217

Building Contractor's Company Name

Telephone

300 Dominion Drive Ste 201

psmith@getchampion.com

Address

Email Address

75228

License #

**Electrical Contractor Information**

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

Electrical Contractor's Company Name

Telephone

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

 10/3/17  
 Signature of Owner/Contractor/Officer(s) of Corporation 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 Champion Windows

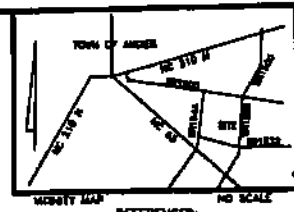
Sign w/Title  Date 10/3

**LEGEND**

——— LINES SURVEYED  
 - - - LINES NOT SURVEYED  
 - - - BLDG. SETBACK  
 - - - WOOD FENCE  
 ○ EXISTING IRON STAKE

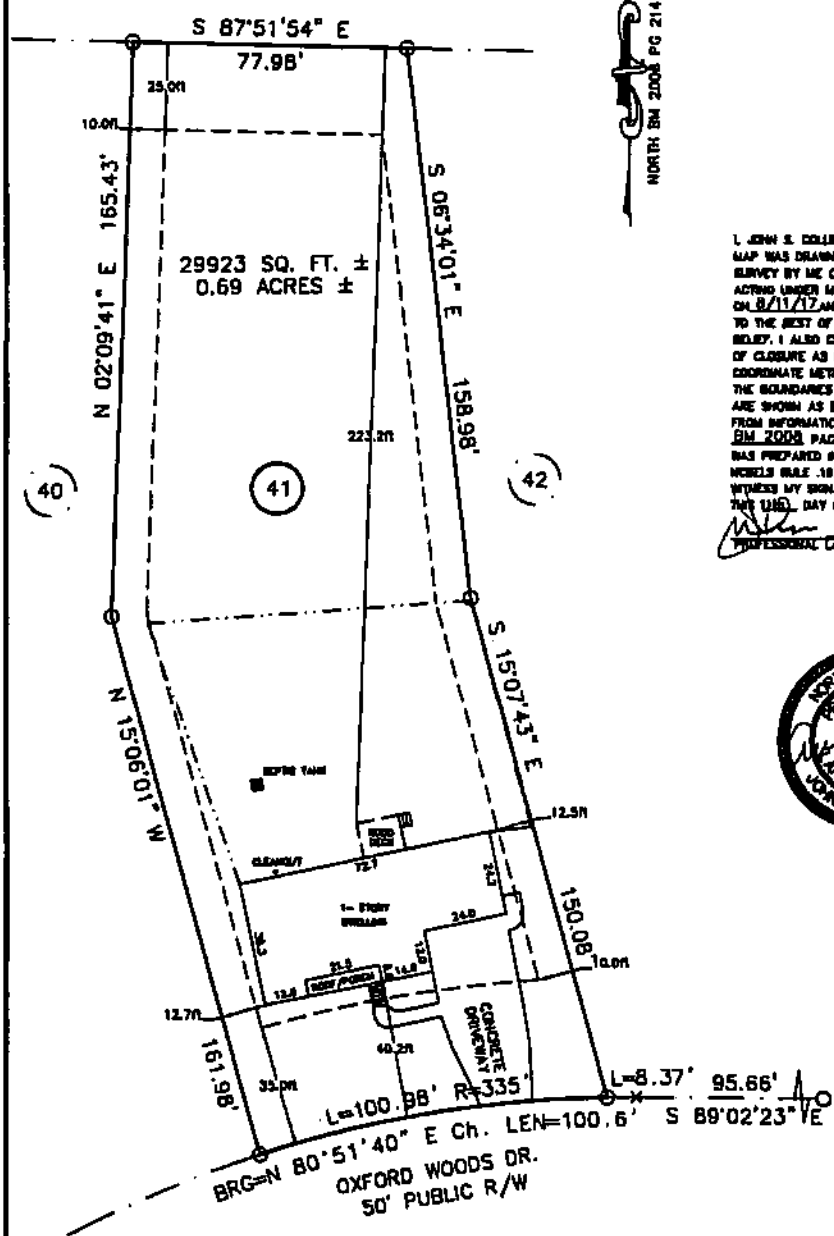
**NOTES**

- 1) ALL DISTANCES ARE HORIZONTAL GROUND.
- 2) THIS IS A SURVEY OF AN EXISTING PARCEL.
- 3) SEE RECORD PLAT FOR CONTROL TIE AND NOTES.
- 4) NO FEMA DESIGNATED FLOOD HAZARD AREAS.
- 5) FOR FIRM 37300623004, 10/3/2008.
- 6) COVENANT SETBACKS MAY BE MORE RESTRICTIVE.
- 7) SETBACKS SHOWN ARE HARNETT COUNTY ZONING.



HOW OR FORMERLY  
 WILLIAM PUGLES  
 DB 1772 PG 481

REFERENCES:  
 BM 2008 PG 214  
 DB 3484 PG 0004



NORTH: BM 2008 PG 214

I, JOHN S. COLLIER, CERTIFY THAT THIS MAP WAS DRAWN BY ME FROM AN ACTUAL SURVEY BY ME OR MY ASSISTANT ACTING UNDER MY DIRECT SUPERVISION ON 8/11/17 AND IS CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I ALSO CERTIFY THAT THE ERROR OF CLOSURE AS CALCULATED BY THE COORDINATE METHOD IS 1:39,000 +/- THE BOUNDARIES NOT SURVEYED ARE SHOWN AS BROKEN LINES PLOTTED FROM INFORMATION FOUND IN BOOK BM 2008 PAGE 214. THAT THIS MAP WAS PREPARED IN ACCORDANCE WITH NCELS'S RULE 1800. WITNESS MY SIGNATURE AND SEAL THE 11th DAY OF AUG 2017.

*John S. Collier*  
 PROFESSIONAL LAND SURVEYOR L-3879



CURRENT OWNER: BRENDA S. BURDGE  
 88 OXFORD WOODS DR.  
 ANGER, NC. 27501  
 PIN: 0682-98-6989, ZONED: RA-30  
 LOT 41, OXFORD WOODS SUB'D.  
 BLACK RIVER TWP, HARNETT COUNTY, NC.



THIS SURVEY IS OF THE IMPROVEMENTS TO THE PROPERTY.

<b>SURVEY FOR</b>		
CHAMPION WINDOW CO.		
PREPARED BY		
JOHN S. COLLIER, PLS, L-3879		
PROFESSIONAL LAND SURVEYOR		
3407 BAUGH ST., RALEIGH, NC.		
27604, 919-876-8727		
Scale: 1"=40'	Date: 8/11/17	LT: 41
Drawn: JSC	Checked: DHS	Job: 19/12