

Initial Application Date: 3.13.18

Application # 1850043535

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: Kirk/Sharon Jackson Mailing Address: 254 Sherman Pines Dr
City: Jugway State: NC Zip: 27526 Contact No: 919 624 0741 Email: _____

APPLICANT: David Creed Harris Mailing Address: 1904 Pines West Rd
City: Jugway State: NC Zip: 27526 Contact No: 919 669 7999 Email: _____

*Please fill out applicant information if different than landowner



CONTACT NAME APPLYING IN OFFICE: _____ Phone # _____

PROPERTY LOCATION: Subdivision: Sherman Pines Lot #: 11 Lot Size: .57AC
State Road #: _____ State Road Name: NC 401 N Map Book & Page: 2006.373
Parcel: 08-0655-0118-47 PIN: 0655-42-0873
Zoning: R30 Flood Zone: X Watershed: IV Deed Book & Page: 2880.0821 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 14x40 Use: finishing attic Closets in addition? yes () no
bathroom, game room, office

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 Manufactured Homes: _____ Other (specify): _____

Required Residential Property Line Setbacks:

	Minimum	Actual
Front	_____	_____
Rear	_____	_____
Closest Side	_____	_____
Sidestreet/corner lot	_____	_____
Nearest Building on same lot	_____	_____

existing

Comments: _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: _____

Sherman Pines
Lot 11

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.

David Powell
Signature of Owner or Owner's Agent

3/15/10
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



* 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: Kirk and Shannon Franklin Date: 3/12/18
Site Address: 754 Sherman Pines Drive Phone: 919-624-0741
Directions to job site from Lillington: 40E towards Fugway Subdivision on the left

Subdivision: Sherman Pines Lot: 11
Description of Proposed Work: Convert walkup attic to office, bath and bedroom # of Bedrooms: _____
Heated SF: 567 Unheated SF: _____ Finished Bonus Room? 1 Crawl Space: _____ Slab: _____

General Contractor Information

David Carroll Homes, Inc 919-669-7999
Building Contractor's Company Name Telephone
1904 Phelps West Rd dchomes68@gmail.com
Address Email Address
55230

License #

Electrical Contractor Information

Description of Work Finish attic space Service Size: 200 Amps T-Pole: Yes No
Reliable Home Solutions 252-308-7638
Electrical Contractor's Company Name Telephone
839 Purser Dr Raleigh
Address Email Address
10909-U

License #

Mechanical/HVAC Contractor Information

Description of Work Finish attic space
Reliable Home Solutions 252-308-7658
Mechanical Contractor's Company Name Telephone
832 Purser Dr Raleigh
Address Email Address
33003

License #

Plumbing Contractor Information

Description of Work Add bathroom to attic # Baths 1
Scott Zimmerman Plumbing 919-370-1956
Plumbing Contractor's Company Name Telephone
7429 Sanders Rd
Address Email Address
30514

License #

Insulation Contractor Information

Livegreen Insulation 919-453-6411
Insulation Contractor's Company Name & Address Telephone

*NOTE: General Contractor / owner 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.

David Powell
Signature of Owner/Contractor/Officer(s) of Corporation

3/15/18
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: David Carroll Homes, Inc

Sign w/Title: David Powell President Date: 3/15/18

Application Number	18-50043535	Page	3
Property Address	91748 TECH 1	Date	3/15/18
PARCEL NUMBER	- - - - -		
PIN			
Application description . . .	CP ADD & ALTER RESIDENTIAL		
Subdivision Name			
Property Zoning	UNZONED		

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	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	_____	___/___/___
Permit type RESIDENTIAL INSULATION PERMIT					
999	185	I185	C*INSULATION INSPECTION	_____	___/___/___
999	129	I129	R*INSULATION INSPECTION	_____	___/___/___

HARNETT COUNTY CENTRAL PERMITTING
P.O. BOX 65
LILLINGTON, NC 27546
For Inspections Call: (910) 893-7525 Fax: (910) 893-2793

Application Number 18-50043535 Date 3/15/18
Property Address 91748 TECH 1
PARCEL NUMBER - - - - -
PIN
Application type description CP ADD & ALTER RESIDENTIAL
Subdivision Name
Property Zoning UNZONED

Owner Contractor

FRANKLIN KIRK AND SHANNON #11 DAVID CARROLL CUSTOM HOMES, LLC
254 SHERMAN PINES DR
FUQUAY-VARINA NC 27526 1904 PHELPS WEST RD.
(919) 624-0741 FUQUAY-VARINA NC 27526
(919) 669-7999

Applicant

DAVID CARROLL HOMES INC #11
1904 PHELPS WEST RD

(919) 669-7999

--- Structure Information 000 000 FINISH ATTIC SPACE/GAME ROOM/OFFICE
Flood Zone FLOOD ZONE X
Other struct info # BATHS 99
SEPTIC - EXISTING? NA
WATER SUPPLY COUNTY

Permit RESIDENTIAL BUILDING PERMIT
Additional desc
Phone Access Code 1233626
Issue Date 3/15/18 Valuation 0
Expiration Date 3/15/19

Permit RESIDENTIAL ELECTRICAL PERMIT
Additional desc
Phone Access Code 1233634
Issue Date 3/15/18 Valuation 0
Expiration Date 3/15/19

Permit RESIDENTIAL INSULATION PERMIT
Additional desc
Phone Access Code 1233659
Issue Date 3/15/18 Valuation 0
Expiration Date 3/15/19

Permit RESIDENTIAL MECHANICAL PERMIT

HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

LILLINGTON, NC 27546

For Inspections Call: (910) 893-7525 Fax: (910) 893-2793

Application Number	18-50043535	Page	2
Additional desc		Date	3/15/18
Phone Access Code	1233667		
Issue Date	3/15/18	Valuation	0
Expiration Date	3/15/19		

Permit	RESIDENTIAL PLUMBING PERMIT		
Additional desc			
Phone Access Code	1233675		
Issue Date	3/15/18	Valuation	0
Expiration Date	3/15/19		

Special Notes and Comments
T/S: 03/13/2018 06:47 PM DJOHNSON --
SHERMAN PINES SUBD LOT 11
254 SHERMAN PINES DR

Plan Box # JLL

Date 3.13.18

Job Name Franklin

Plan Name _____

App # 43535

Valuation \$54,432

SQ Feet 567

Garage _____
= 567

Inspections for SFD/SFA

Crawl _____ Slab _____ Mono _____ Basement _____

Footing	Footing	Plum Under Slab	Footing
Foundation	Foundation	Ele. Under Slab	Foundation
Address	Address	Address	Waterproofing
Open Floor	Slab	Mono Slab	Plum Under slab
Rough In	Rough In	Rough In	Address
Insulation	Insulation	Insulation	Slab
Final	Final	Final	Open Floor
			Rough In
			Insulation
			Final

Foundation Survey _____

Envir. Health _____

Other _____

Additions / Other

Footing _____

Foundation _____

Slab _____

Mono _____

Open Floor _____

Rough In _____

Insulation _____

Final _____

*finishing attic
for office / game room*

HARNETT COUNTY CASH RECEIPTS

*** CUSTOMER RECEIPT ***

Oper: LLUCAS Type: CP Drawer: 1
 Date: 3/15/18 53 Receipt no: 289164

Year	Number	Amount
2018	50043535	
91748 TECH 1		
LILLINGTON, NC 27546		
B1	BP - PERMIT FEES	\$325.00

DAVID CARROLL HOMES INC

Tender detail		
CK CHECK PAYMEN	7924	\$325.00
Total tendered		\$325.00
Total payment		\$325.00

Trans date: 3/15/18 Time: 10:24:46

** THANK YOU FOR YOUR PAYMENT **