

Initial Application Date: 7.28.16

Application # 1050039325

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:** Allen Denning Mailing Address: 112 Saw Grass Ct
City: LILLINGTON State: NC Zip: 27546 Contact No: _____ Email: _____

✓ **APPLICANT:** Moss Homebuilders Mailing Address: PO Box 577
City: LILLINGTON State: NC Zip: 27546 Contact No: (910) 890-2103 Email: Ken Moss @ C.HARNETT.NET
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Ken Moss Phone # (910) 890-2103

PROPERTY LOCATION: Subdivision: Walnut Grove Lot #: 29 Lot Size: .64
State Road # 2311 State Road Name: Saw Grass Ct Map Book & Page: 2008, 737
Parcel: 01-0525-0002-33 PIN: 0525-90-3590
Zoning: R420R Flood Zone: X Watershed: NA Deed Book & Page: 3406, 471 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 30 x 24) Use: detached 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): 1 proposed detached garage

Required Residential Property Line Setbacks:

	Minimum	Actual
Front	<u>35</u>	<u>60+</u>
Rear	<u>25</u>	<u>115</u>
Closest Side	<u>10</u>	<u>26</u>
Sidestreet/corner lot	<u>20</u>	<u>—</u>
Nearest Building on same lot	<u>11</u>	<u>60</u>

Comments: _____
the owner has already looked @ this lot for Kenneth & Allen Moss.

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 210 S. TO LASSITER RD
TAKE LEFT ON LASSITER - TURN INTO WALNUT GROVE STA

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] _____ ✓ _____
Signature of Owner or Owner's Agent 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.

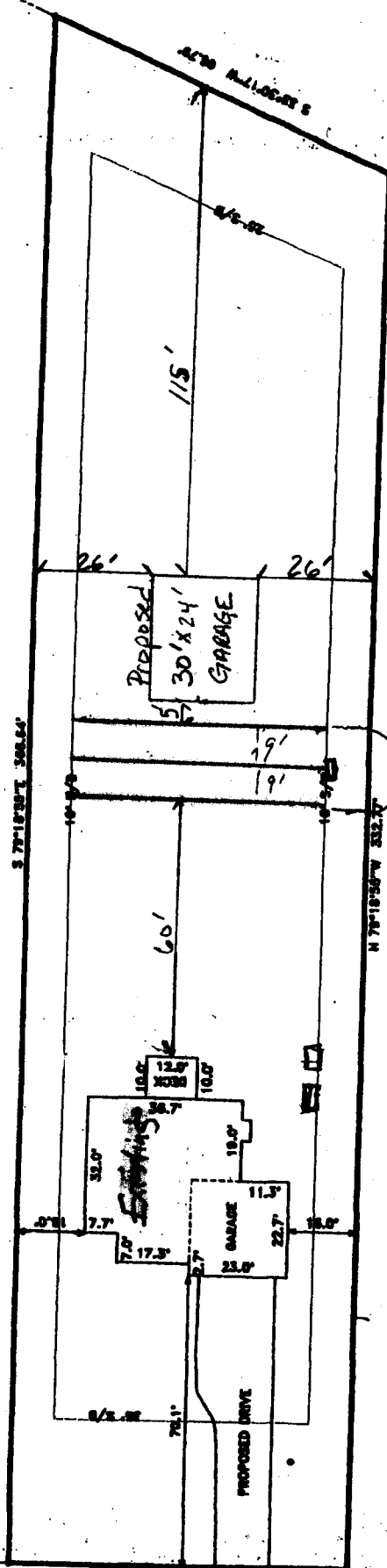
This application expires 6 months from the initial date if permits have not been issued

ELIMINARY PLAT
FOR RECORDATION
REVENUES OR SALES

SITE PLAN APPROVAL Revised
DISTRICT R200 USE Garage

#BEDROOMS 7.28.16 23
2 DIJONSM
Zoning Administrator

SAW GRASS COURT (50' R/W)



Existing Septic Tank

SITE PLAN APPROVAL Revised
DISTRICT R200 USE Garage

#BEDROOMS 7.28.16 25
2 DIJONSM
Zoning Administrator

PROPOSED PLOT PLAN
LOT 24 WALNUT GROVE S/D

OWNER: EYEN PAR DEVELOPMENT LLC
128 BAIRDON DRIVE
LILLINGTON, NC 27646
(919) 422-7065

ANDERSON CREEK TOWNSHIP - HARNETT COUNTY - NORTH CAROLINA
HOUSE PLAN (CUMBERLAND)



GRAPHIC SCALE - FEET = 1" = 40'

BENNETT SURVEYS, INC.
1882 CLARK ROAD, LITTLETON, NC 27646

DEED BOOK 2497, PAGE 478
MAP NO. 2008-737
PARCEL ID: 010525 0082 33
PIN NO 0525-96-3596.000

NAME: Moss Anne BUILDERS & REALTY INC

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 # 017024

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)

DATE

1650039325

Hamett County Central Permitting
PO Box 65 Lillington, NC 27546
Telephone Number 910-893-4759

Application for Building and Trade Permit

Owner's Name: Moss Home Builders Date: 6/22/00
Address: PO Box 577 Lillington NC Phone: 800 211
Directions to job site: Hwy 210 to Lillington Rd 27546
Walnut Grove #4

Subdivision: WALNUT GROVE Lot: 23
Type Construction: (Please Check)
New Renovation Addition
Moved House Other
Specify Type of Work: DETACHED GARAGE
Building Use: (Please Check)
Residential Modular
Commercial Multi-Family

Building Permit Information

Heated: Crawl Space
Unheated: Slab
Building Contractor's Company Name: Moss Home Builders & Realty
W. Alphonse
Signature of Officer(s) of Corporation
Building Construction Cost \$ 230,000
Acres Disturbed: 1 Stories: 1
Address: PO Box 577 Lillington NC
18637 License # 910-893-4875 Telephone

Electrical Permit Information

Description of Work: Electrical Electrical Cost \$ _____
TS Pole: Yes No Underground Overhead
Permanent Service: Underground Overhead
Electrical Contractor's Company Name: Pioneer Electric & Maintenance Co., Inc.
Neil B. Shaw
Signature of Officer (s) of Corporation
Service Size: _____ Amps
42201805421 Lillington NC, 27546 Address
21643 License # 910-814-3751 Telephone

Insulation Permit Information

Residential Other Not Required
Insulation Contractor's Company Name: TLC CITY INSULATION
910-486-8855 Telephone
418 Person St Fayetteville NC Address

Mechanical Permit Information

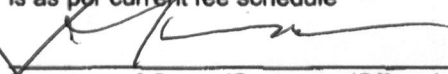
Description of Work: HVAC Number of Units _____ Type System _____ Mechanical Cost \$ _____
Number of Tons _____
Mechanical Contractor's Company Name: Beasley's HVAC, Inc.
R. Brent Beasley
Signature of Officer(s) of Corporation
57 W.C. Beasley Ln. Coats N.C. 27521 Address
9497 License # 919-894-4248 Telephone

Plumbing Permit Information

Description of Work: Plumbing Number of Baths _____ Plumbing Cost \$ _____
W.W. PLUMBING CO
Plumbing Contractor's Company Name
Rick Wells
Signature of Officer(s) of Corporation
PO Box 1239 HUBER Address
14087 License # 639-0195 Telephone

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


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

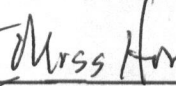
Has one (1) or more subcontractors(s) and has obtained workers compensation insurance to cover them

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

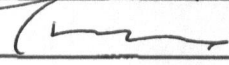
While working on the project for which this permit is sought it is understood that the Central Permitting Department issuing the permit may require certificates of coverage of worker s compensation insurance prior to issuance of the permit and at any time during the permitted work from any person firm or corporation carrying out the work

Company or Name

 Mrs. HomeBulwers in Realty Inc

Sign w/Title

Date

 8/8/2016

Date 8-8-16

Plan Box # File

Job Name MOSS Homebuilders

App # 1650039325

Valuation \$17760

SQ Feet _____

Garage 480

= _____

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 NO

Envir. Health exist Other _____

Additions / Other

- Footing _____
- Foundation _____
- Slab _____
- Mono _____
- Open Floor _____
- Rough In _____
- Insulation _____
- Final _____

Detached Garage

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 16-50039325

Page 2
Date 8/09/16

Special Notes and Comments

LASSITER THEN TURN INTO WALNUT GROVE.

HARNETT COUNTY CENTRAL PERMITTING

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Application Number	16-50039325	Page	3
Property Address	112 SAW GRASS CT	Date	8/09/16
PARCEL NUMBER	01-0525- - -0062- -33-		
Application description . . .	CP GARAGE/CARPORT RESIDENTIAL DETACHED		
Subdivision Name	WALNUT GROVE 37LOTS		
Property Zoning	RES/AGRI DIST - RA-20R		

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

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Application description . . .	CP GARAGE/CARPORT RESIDENTIAL DETACHED		
Subdivision Name	WALNUT GROVE 37LOTS		
Property Zoning	RES/AGRI DIST - RA-20R		

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 LAND USE PERMIT					
999	818	Z818	PZ*ZONING INSPECTION	_____	__/__/__
999	820	Z820	PZ*ZONING/FINAL INSPECTION	_____	__/__/__