| Initial Application Date 227 KJUCO1CC Application 17.50040679 |
|--|
| 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: Front Porch Blog Co. Mailing Address: 136 Stor mont Rd |
| City: Clay ton State: NC zip: 27520 contact No Email: |
| APPLICANT: Randal Durham Mailing Address 4567 Little Creek Orunch Rd |
| City: Classicon State NC 710-2751D Control No 919472 7349 0 00 10 110010 0 0 0 |
| |
| CONTACT NAME APPLYING IN OFFICE: Randell Durham Phone # 9194227349 |
| PROPERTY LOCATION: Subdivision: Leigh Lawel Lot # 20 Lot Size 0.80 |
| State Road # 411 State Road Name: WINOW COFF CT Map Book & Page 2004, 0416 |
| Parcel: 021518 0099 23 PIN: 1515 60 7651.000 |
| Zoning: RASO Flood Zone: X Watershed: NA Deed Book & Page: 34 DI 10093 Power Company*: DUKE |
| *New structures with Progress Energy as service provider need to supply premise numberfrom Progress Energy. |
| PROPOSED USE: 2 |
| SFD: (Size Bedrooms: = Bath: Jusement(w/wo bath): Garage:suk'awl Space: Slab: Slab: |
| (Is the bonus room finished? (, ,_s () no_w/ a closet? () yes (, yes add in with # bedrooms) |
| Mod: (Sizex) # 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:SWDWTW (Sizex) # Bedrooms:Garage:(site built?) Deck:(site built?) |
| Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit: |
| Home Occupation: # Rooms: Use: Hours of Operation: #Employees: |
| Addition/Accessory/Other: (Size 24x 24 use: dlucted galage 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 () y |
| Does the property contain any easements whether underground or overhead () yes (|
| Structures (existing or proposed) Single family dwellings: Manufactured Homes: Other (specify): |
| Required Residential Property Line Setbacks: ' Comments: |
| Front Minimum 35 Actual 69+ |
| |
| Rear <u>25</u> 504 |
| Closest Side 10 20' |
| 100' |
| Closest Side 10 20' |

| PECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: | |
|--|---|
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| rmis are granted I agree to conform to all ordinances and taws of the State of Nor | orth Carolina regulating such work and the specifications of plans supp |
| and accurate and correct to the best of my know | owledge. Permit subject to revocation if false information is provided. |
| Mandell Con Sunham | SIMOUNIG |
| Signature of Owner or Owner's Agent | Data / |

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

Harnett County Central Permitting PO Box 65 Lillington NC 27546 910 893 7525 Fax 910 893 2793 www harnett org/permits

Application #

Application for Residential Building and Trades Permit

| Owner's Name | Date |
|---|-----------------------|
| Site Address | Phone |
| Directions to job site from Lillington | |
| Subdivision | Lot |
| Description of Proposed Work | |
| Heated SF Unheated SF Finished Bonus Room? | |
| General Contractor Information | 0341 |
| Durham Bullaing & Electric | 1919)422-1549 |
| Building Contractor's Company Name | Telephone |
| Address Clayton, NC 27920 | RADURHAM 10 gmai). Co |
| <u> 31647</u> | Email Address |
| License # | |
| Description of Work Wire detached garage Service Size | 200_Amps T-PoleYesNo |
| ACA Electric, Inc. | (919)422-7349 |
| 1 | Telephone |
| 4967 Cittle Creek Church Rd Clayton, NC Address 27520 | RADURHAMI @ gmail-com |
| Address 27SZO | Email Address |
| 17243-6 | |
| License # | ation |
| Mechanical/HVAC Contractor Inform | |
| Description of Work | |
| Name Name | Telephone |
| Mechanical Contractor s Company Name | releptione |
| Address | Email Address |
| Address | |
| License # | |
| Plumbing Contractor Information | <u>n</u> |
| Description of Work | # Baths |
| Description of view | |
| Plumbing Contractor's Company Name | Telephone |
| | |
| Address | Email Address |
| License # | |
| Insulation Contractor Information | <u>n</u> |
| Norman Maria & Address | Telephone |
| Insulation Contractor's Company Name & Address | i elephone |

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 bysigning 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 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 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

LILLINGTON, NC 27546 For Inspections Call: (910) 893-7525 Fax: (910) 893-2793 Bldg Insp scheduled before 2pm available next business day. Application Number 17-50040679
Property Address 411 WILLOWCROFT CT Date 2/22/17 PARCEL NUMBER .. 02-1518- - -0099- -23Application type description CP GARAGE/CARPORT RESIDENTIAL DETACHED
Subdivision Name LEIGH LAUREL Property Zoning PENDING Contractor Owner -----DURHAM BUILDING & ELECTRIC FRONT PORCH BUILDING CO LLC RANDELL COYE DURHAM, T/A 136 STARMONT RD 4567 LITTLE CREEK CHURCH RD. CLAYTON NC 27520 CLAYTON NC 27520 (919) 422-7349 Applicant DURHAM RANDELL (919) 422-7349 Structure Information 000 000 24X24 DETACHED GARAGE Flood Zone FLOOD ZONE X
Other struct info # BEDROOMS
PROPOSED USE 3000000.00 GARAGE SEPTIC - EXISTING? NEW TANK
WATER SUPPLY COUNTY WATER SUPPLY Permit RESIDENTIAL BUILDING PERMIT Additional desc . . Phone Access Code . 1177781
Issue Date . . . 2/22/17 Value Expiration Date . . . 2/22/18 Valuation 0 Permit RESIDENTIAL ELECTRICAL PERMIT Additional desc . . Phone Access Code . 1179753 Issue Date . . . 2/22/17 Valuation . . . 0
Expiration Date . . 2/22/18 Permit LAND USE PERMIT Additional desc . . Phone Access Code . 1179571 Issue Date . . . 2/22/17
Expiration Date . . 8/21/17 Valuation 0 _____ Special Notes and Comments 411 WILLOWCROFT CT DUNN/ LEIGH LAUREL ______

HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

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 17-50040679

Page 2 Date 2/22/17

MARNETT COUNTY CENTRAL PERMITTING P.O. BOX 65

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 17-9 Property Address 411 PARCEL NUMBER | WILLOWCROFT CT 1518009923- GARAGE/CARPORT RESIDENTIAL DETACHED SH LAUREL | | | |
|---|---|--|--|--|
| Required Inspections | | | | |
| Phone Insp Seq Insp# Code Description | Initials Date | | | |
| Permit type RESIDENTIAL BU | ILDING PERMIT | | | |
| 999 103 B103 R*BLDG FOUND & T 999 111 B111 R*BLDG SLAB INSF 999 101 B101 R*BLDG FOOTING / 999 429 R429 FOUR TRADE FINAL 999 425 R425 FOUR TRADE ROUGH 999 131 R131 ONE TRADE FINAL 999 125 R125 ONE TRADE ROUGH 999 329 R329 THREE TRADE FINA 999 325 R325 THREE TRADE FINAL 999 229 R229 TWO TRADE ROUGH 999 229 R229 TWO TRADE ROUGH Permit type RESIDENTIAL EL | TEMP SVC POLE | | | |
| 999 211 E211 R*ELEC ABOVE CEI 999 217 E217 R*ELEC RECONNECT 999 205 E205 R*ELEC UNDER SLAM 999 215 E215 R*ELEC. UND. POOR 999 213 E213 R*ELECTRICAL UND 999 131 R131 ONE TRADE FINAL 999 125 R125 ONE TRADE ROUGH Permit type LAND USE PERMIT | LING B L ERGROUND IN | | | |
| 999 818 Z818 PZ*ZONING INSPECT 999 820 Z820 PZ*ZONING/FINAL I | | | | |