Application #		
---------------	--	--

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

Insulation Contractor's Company Name & Address	Telephone
Insulation Contractor Information	<u>on</u>
License #	
	Email Address
Address	Email Address
Plumbing Contractor's Company Name	Telephone
Description of Work	# Baths
Plumbing Contractor Information	
License #	
Address	Email Address
Mechanical Contractor's Company Name	Telephone
Description of Work	
License # Mechanical/HVAC Contractor Inform Description of Work	<u>mation</u>
Address	Email Address
15 FORD CREEK DR SANFORD NC	BATMANDTEXASOGMAZL, COM
Electrical Contractor's Company Name	Telephone
OWNER	(919) 721-7009
Description of Work Service Size:	<u>on</u> :Amps
License #	
Address	PATMAND TEXASO GMAZL, COM Email Address
Building Contractor's Company Name 15 FERN CREAK DR. SANFORD NC	Telephone
DUNER Building Southerton's Southern No.	(919) 721-7009
Heated SF: NA Unheated SF: 6000 Finished Bonus Room? 6 General Contractor Information	N/A Crawl Space: N/A Slab: Ve S
Description of Proposed Work: Detached GARAGE	# of Bedrooms:
Subdivision: Cresturew Estates IV	Lot:
1000 200	
Directions to job site from Lillington:	
Owner's Name: CAMPBELL SCOH A. \$ HNDR Site Address: 15 FERN CREEK DR, SANTA	ORD, NC Phone (9/9) 721-7409
Owner's Name: CAMPBELL SCOTT A. \$ HNDR	EATH, Date: 10MAR ZWIS

*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 <u>by signing below I have obtained all subcontractors permission to obtain these permits</u> and if <u>any</u> 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.

Scotta Cophell	andre Mandel	10 MAR ZOIF
Signature of Owner/Contractor/Office	er(s) of Corporation	Date

Affidavit The undersigned applicant being t		Compensation N.C.G.S. 87-14	
General Contractor	Owner	Officer/Agent of the Contractor or Owner	
Do hereby confirm under penalties set forth in the permit:	s of perjury that th	ne person(s), firm(s) or corporation(s) performing the work	
Has three (3) or more empl	oyees and has ob	btained workers' compensation insurance to cover them.	
Has one (1) or more subco	ntractors(s) and h	nas obtained workers' compensation insurance to cover	
Has one (1) or more subco covering themselves.	ntractors(s) who h	has their own policy of workers' compensation insurance	
Has no more than two (2) e	mployees and no	subcontractors.	
Department issuing the permit ma	y require certificat	s sought it is understood that the Central Permitting ates of coverage of worker's compensation insurance prior e permitted work from any person, firm or corporation	
Company or Name:	·	· ·	
Sign w/Title:		Date:	

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

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

Central Permitting

ANDOWNER: Scott and A	ndrea Campbell	Mailing Address: 15 Fern (Creek Drive
City: Sanford			Email: scott.a.campbell46@gmail.con
PPLICANT*: Salv	Mailing A	Address:	
ity:	State: Zip:	Contact No:	Email:
Please fill out applicant information	on if different than landowner		
ONTACT NAME APPLYING	IN OFFICE: Andrea M. Campbell		Phone # 9197217008
ROPERTY LOCATION: Sub	odivision: Crestview Estates IV		Lot #: 161 Lot Size: 0 35
tate Road # 2441	State Road Name: Fern Creek D	rive	Map Book & Page: 200 / /)
arcel: 03958712 0020 24		PIN: 9587-82-3306.000	
ening: RA-20R Flood Zon	Zone X Watershad: NO Doo	d Book & Book 2359 (508	Power Company*: Central Electric
vew structures with Progress	s Energy as service provider need to su	ipply premise number	from Progress Energy.
ROPOSED USE:			
SED: (Size) # Redrooms: # Baths: Basem	ent/whyo hath): Garage:	Deck: Crawl Space: Slab: Slab:
	(Is the bonus room finished? () yes	• • • • • • • • • • • • • • • • • • • •	
	(Is the second floor finished? () yes	() no Any other site built add	<u> </u>
		<u> </u>	(site built?) Deck:(site built?)
Duplex: (Sizex) No. Buildings: No.	o. Bedrooms Per Unit:	
Home Occupation: # Roo	ms:Use:	Hours of Operation:	#Employees:
Addition/Accessory/Other	: (Size 24_x25_) Use: Detached	Garage	Closets in addition? () yes (
ater Supply: County	Existing Well New Wel	/#.of.dwellings.using.well) *Must have operable water before final
	eptic Tank (Complete Checklist)	/	
		. /	500') of tract listed above? () yes (<u>v</u>) no
es the property contain any	easements whether underground or ov	verhead () yes (/) no	
uctures (existing or propose	d): Single family dwellings:	Manufactured Homes:	Other (specify):
quired Residential Proper		ents:	
ont Minimum 35 ft	Actual 110F7		
ear 5 ft	+++		
osest Side 5ft			
destreet/corner lot 20 ft	<u>45 F</u> +		
earest Building 10 ft			
same lot	Lilian Annihani	Page 1 of 9	03/11

APPLICATION CONTINUES ON BACK

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:	From Lillington, proceed on 27 West for approximately 14 miles;	
	y 1.2 miles; Turn LEFT onto Cresthaven Drive; turn LEFT onto Cliffside Ct;	
turn RIGHT on to Crystal Springs Dr; turn LEFT onto Fern Cri	eek Dr.	
If permits are granted I agree to conform to all ordinances and laws of I hereby state that foregoing statements are accurate and correct to the	f the State of North Carolina regulating such work and the specifications of plans submitted ne best of my knowledge. Permit subject to revocation if false information is provided.	
(Indiea 1). Campul	19mm22018	
Signature of Owner or Owner's Ag	ent • Date	
Otto Couphell		
***It is the owner/applicants responsibility to provibe the county	with any applicable information about the subject property, including but not limited	

It is the owner/applicants responsibility to provite 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

NAME: CAMPBELL, Scott A.

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 # 03 08 32

Environmental Health New Septic SystemCode 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.

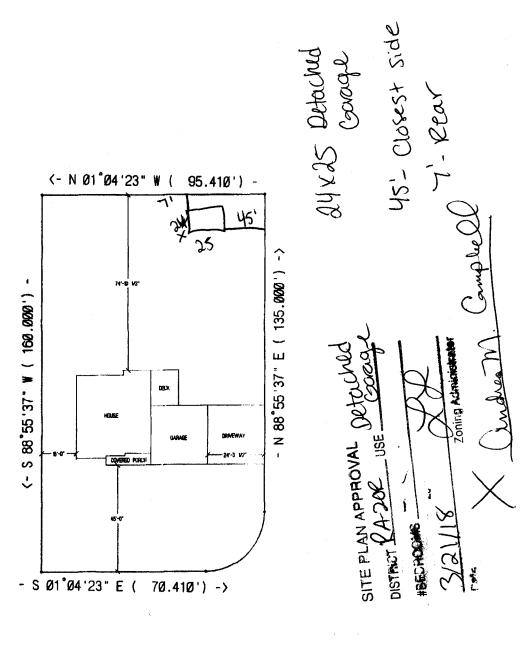
Environmental Health Existing Tank Inspections Code 800

- 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	on 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 local health department upon submittal of this application if any of the following apply to the property in "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:
{}}YES	Does the site contain any Jurisdictional Wetlands?
{}}YES - {} NO	Do you plan to have an <u>irrigation system</u> now or in the future?
{}}YES	Does or will the building contain any drains? Please explain
{}}YES	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
{}}YES	Is any wastewater going to be generated on the site other than domestic sewage?
{}}YES	Is the site subject to approval by any other Public Agency?
{}}YES	Are there any Easements or Right of Ways on this property?
{}}YES	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 Applicat	ion And Certify That The Information Provided Herein Is True, Complete And Correct, Authorized County And

The Site Accessible \$ That & Complete Site Evaluation Can Be Performed. PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

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



CUMBERLAND HOMES INC.

THE NEWPORT

LOT #161 CRESTVIEW

SCALE: 1"=40'

Permit Logy



NOT FOR LEGAL USE

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

	SCANNED	
Application descri	Page 18-50043606 APR 0 6 2018 Date 4/06/1 15 FERN CREEK DR 03-9587-12002024 9587-82-3306.000 ption CP GARAGE/CARPORT RESIDENTIAL DETACHE	
	Required Inspections	
Phone Insp Seq Insp# Code	Description Initials Dat	:e
Permit type	. RESIDENTIAL BUILDING PERMIT	
999 103 B103 999 111 B111 999 101 B101 999 131 R131 999 125 R125 999 229 R229 999 225 R225	ONE TRADE FINAL / ONE TRADE ROUGH IN / TWO TRADE FINAL / /	/
Permit type	. RESIDENTIAL ELECTRICAL PERMIT	
999 211 E211 999 217 E217 999 205 E205 999 215 E215 999 213 E213 999 131 R131 999 125 R125	R*ELEC RECONNECT R*ELEC UNDER SLAB R*ELEC. UND. POOL R*ELECTRICAL UNDERGROUND	
Permit type	. LAND USE PERMIT	
999 818 Z818 999 820 Z820	PZ*ZONING INSPECTION/ PZ*ZONING/FINAL INSPECTION//	./

HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

LILLINGTON, NC 27546

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

Application Number 18-50043606 Date 4/06/18 Property Address 15 FERN CREEK DR Property Zoning RES/AGRI DIST - RA-20R Owner Contractor CAMPBELL SCOTT A & ANDREA M OWNER 15 FERN CREEK DRIVE NC 27332 SANFORD Applicant CAMPBELL ANDREA 15 FERN CREEK DR NC 27332 SANFORD (919) 721-7009 Structure Information 000 000 24X25 DETACHED GARAGE Flood Zone FLOOD ZONE X Other struct info PROPOSED USE GARAGE SEPTIC - EXISTING? EXIST WATER SUPPLY COUNTY WATER SUPPLY RESIDENTIAL BUILDING PERMIT Issue Date . . . 4/06/18 Expiration Date . . 4/06/19 Valuation ______ Permit RESIDENTIAL ELECTRICAL PERMIT Additional desc . . Issue Date . . . 4/06/18 Valuation Expiration Date . . 4/06/19 _______ Permit LAND USE PERMIT Additional desc . . Phone Access Code . 1236900
Issue Date . . . 4/06/18
Expiration Date . . 10/03/18 0 Valuation Special Notes and Comments T/S: 03/21/2018 10:41 AM LLUCAS ----

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

Page 2
Application Number 18-50043606 Date 4/06/18

Special Notes and Comments
15 FERN CREEK DR - CRESTVIEW ESTATES
27 WEST APPROX 14 MILES - TURN LEFT
ONTO BUFFALO LAKES RD AND PROCEED
APPROX 1.2 MILES - TURN LEFT ONTO
CRESTHAVEN DR - TURN LEFT ONTO
CLIFFSIDE CT - TURN RIGHT ONTO CRYSTAL
SPRINGS DR - TURN LEFT ONTO FERN CREEK
DR

HARNETT COUNTY CASH RECEIPTS

*** CUSTOMER RECEIPT ***

Oper: BPETRICH Type: CP Drawer: 1
Date: 4/06/18 51 Receipt no: 313413

Year Number 2018 50043606 15 FERN CREEK DR SANFORD, NC 27330 B1 BP - PERMIT FEES Amount

SFD

\$280.00

SCOTT CAMPBELL

Tender detail CA CASH PAYMENT Total tendered Total payment \$280.00 \$280.00 \$280.00

Trans date: 4/06/18 Time: 16:01:48

** THANK YOU FOR YOUR PAYMENT **