

Initial Application Date: _____

Application # 1550036348

CU# _____ **SCANNED**

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" **DATE**

LANDOWNER: Phillip Thomas Mailing Address: 2112 Thompson Rd
City: Bunnlevel State: NC Zip: 28323 Contact No: _____ Email: _____

APPLICANT: Jessica Cummings Mailing Address: 432 Mason Hill Ln
City: Lillington State: NC Zip: 27546 Contact No: 919-632-3128 Email: _____
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Sam Phone # _____

PROPERTY LOCATION: Subdivision: Phil Cummings Lot #: 1 1/2 Lot Size: 3.72Ac
State Road # 1257 State Road Name: South River Rd Map Book & Page: 99 1421
Parcel: 13 0021 008703 PIN: 0021-65-2060.000
Zoning: R36 Flood Zone: X Watershed: IV Deed Book & Page: 1912, 751 Power Company*: _____

*New structures with Progress Energy as service provider need to supply premise number OTP 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 25 x 68) # Bedrooms 3 # Baths 2 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: _____ 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: _____ Manufactured Homes: _____ Other (specify): 2 barns

Required Residential Property Line Setbacks:

Front Minimum 35 Actual 125
Rear 25
Closest Side 10 86
Sidestreet/corner lot _____
Nearest Building on same lot _____

Comments: _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Turn right on South River rd.
Drive 6.7 miles on the left.

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.

Jessica Cummings
Signature of Owner or Owner's Agent

6/5/15
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

NAME: Jessica Cummings

APPLICATION #: 1550036348

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 # _____

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**:

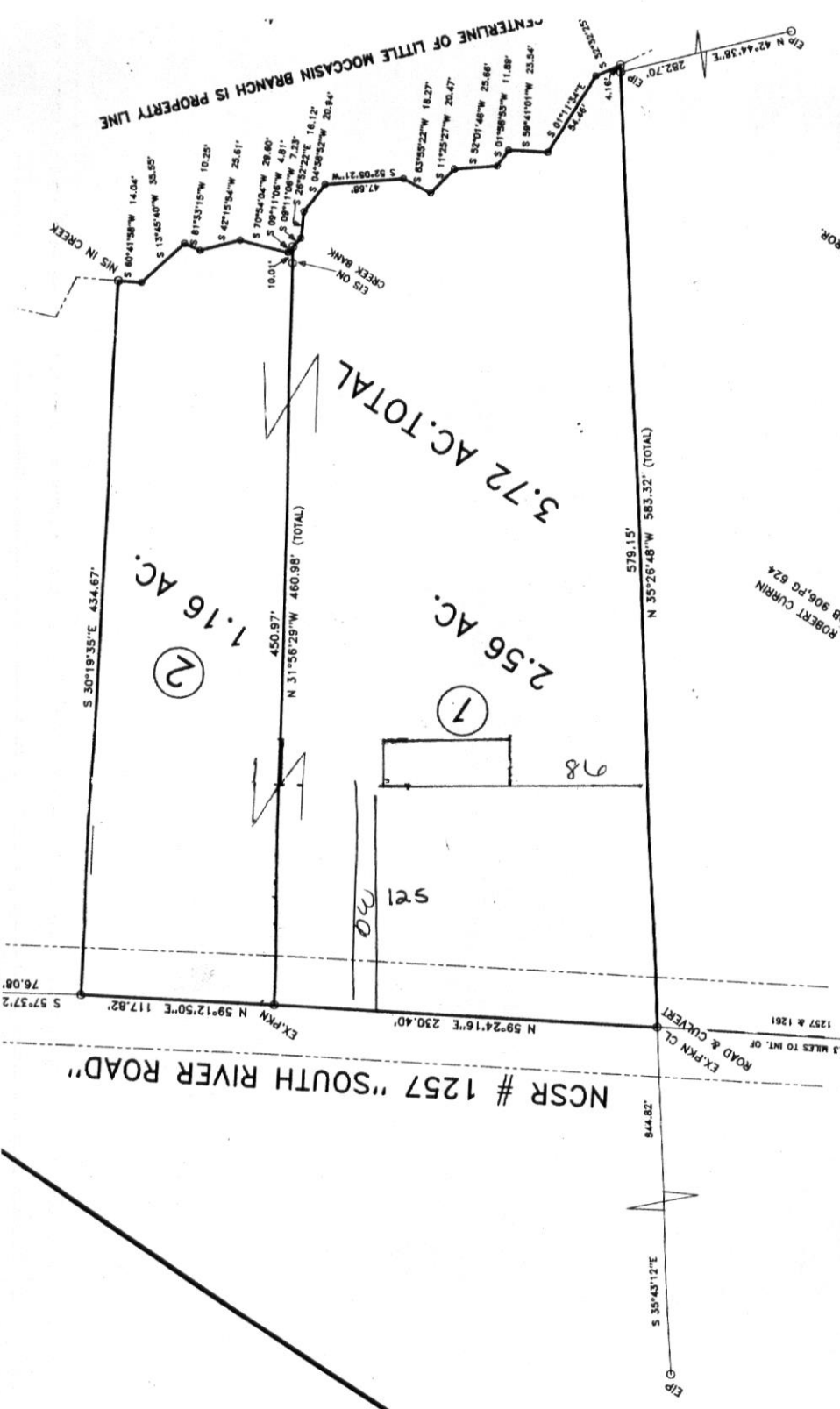
- { } YES { } NO ~~NO~~ Does the site contain any Jurisdictional Wetlands?
- { } YES NO Do you plan to have an irrigation system now or in the future?
- { } YES { } NO ~~NO~~ Does or will the building contain any drains? Please explain. _____
- { } YES { } NO ~~NO~~ Are there any existing wells, springs, 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 ~~NO~~ Is the site subject to approval by any other Public Agency?
- { } YES { } NO ~~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.

Jessica Cummings
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

10-5-15
DATE

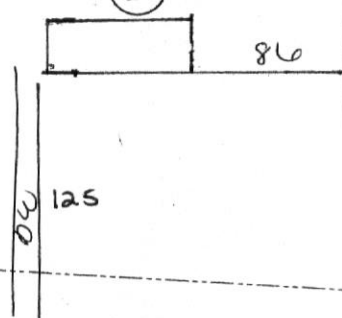


LOT RECOMP. SURV. PH. TOWNSHIP

NOTE: TRACT-1 IS A REVISION OF A SURVEY DONE ON JANUARY 28, 1989 AND RECORDED IN MAP NO. 88-97 OF HANNETT COUNTY REGISTER OF DEEDS. THAT WAS DONE IN ERROR.

ROBERT CURRIN DB 906, PG 624

3.72 AC. TOTAL
2.56 AC. (1)
1.16 AC. (2)



NCSR # 1257 "SOUTH RIVER ROAD"

IS EXEMPT FROM SUBDIVISION REGULATIONS

125-65

Jessica Cummings

I & Adam Edwards ~~are~~ to put a deposit of \$100.00 on

4/2/15 - to Phil Cummings for land sale

of 5 acres, the balance of \$22,900.00 to
be paid 5/2/15. If not paid in full - will

lose the deposit of \$100.00.

Buyer X Jessica Cummings

~~Seller~~ Buyer X

~~Buyer~~ Seller X Phil Cummings

Seller X Shelly Thomas

not married

Phil Cummings
Phillip Thomas

is he married? wife name

Everyone name on land

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

Owner's Name Jessica Cummings Date 8-20-15
Site Address 6703 South River Rd., Bunnlevel 28323 Phone 919 935-9961
Directions to job site from Lillington _____

Subdivision _____ Lot _____

Description of Proposed Work 1700sq ft off frame mod # of Bedrooms 3
Heated SF 1700 Unheated SF _____ Finished Bonus Room? _____ Crawl Space _____ Slab _____

General Contractor Information

Goldshore Homes LLC 919 778-5477
Building Contractor's Company Name Telephone
4112 US Hwy 70 E., Goldsboro NC goldshorohomes@hotmail.com
Address 27534 Email Address
4974
License #

Electrical Contractor Information

Description of Work wire home Service Size _____ Amps T-Pole _____ Yes _____ No
J D Capps 919 524-1393
Electrical Contractor's Company Name Telephone
202 Mill Run Pl., Goldsboro NC
Address 27534 Email Address
13444-L
License #

Mechanical/HVAC Contractor Information

Description of Work install HP
Balance Heating & Air 919 921-2810
Mechanical Contractor's Company Name Telephone
P.O Box 968, Pikeville NC 27863
Address _____ Email Address
19840
License #

Plumbing Contractor Information

Description of Work Plumb home to water source # Baths 3
Thigpen's Plumbing & Repair 919 252-0316
Plumbing Contractor's Company Name Telephone
1197 W. Wards Bridge Rd.
Address Warsaw NC Email Address
24198
License #

Insulation Contractor Information

NA
Insulation Contractor's Company Name & Address 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

Jessica Williams
Signature of Owner/Contractor/Officer(s) of Corporation

8-20-15
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 Goldshoro Homes LLC

Sign w/Title *Jessica S. Williams* G.M. Date 8-20-15

**NORTH CAROLINA MODULAR BUILDING
SET-UP CONTRACTOR LICENSE BOND**

LSM0769478

WE, Goldsboro Homes
as principal, located at 4112 Hwy. 70 East Goldsboro, NC 27534
and RLI Insurance Company (surety) of Peoria, IL 61612-3967 (address) a corporation incorporated under the laws of the State of
Illinois and duly licensed to transact a surety business in the State of North Carolina as surety, are indebted and
bound to the County of Harnett (city or county inspection
department) in the sum of Five Thousand and 00/100
(\$ 5,000.00) dollars for which payment we bind ourselves and our legal representatives jointly and severally.

THE CONDITION OF THIS OBLIGATION IS SUCH, that whereas the principal has entered into a contract for the set-up and
installation of the modular building described herein;

NOW, THEREFORE, if the principal and all his agents and employees shall set-up and install said modular building in compliance
with the regulations of the North Carolina State Building Code governing installation of modular buildings, then this obligation shall be null
and void; otherwise, it shall be in full force and effect.

It is expressly provided that:

1. This bond is executed by the said principal and surety to enable the principal to set-up one North Carolina labeled modular building.
2. This bond is in full force and effect as to the above State Building Code obligations of the principal for the set-up of one North Carolina labeled modular building at the following address:
Street 6703 South River Road
City Bunnlevel, North Carolina
3. This bond will remain in full force and effect for one year following the issuance of the certificate of compliance for the modular building.
4. The bond must remain on file with the County of Harnett (city or county inspection dept.).
5. The owner of the modular building described in paragraph 2, who sustains any loss or damage by reason of any act or omission covered by this bond may, in addition to any other remedy that he may have, bring an action in his own name on this bond for the recovery of damages sustained by him.
6. It is further understood and agreed that his bond shall be open to successive claims up to the face value of the bond. The surety shall not be liable for successive claims in excess of the bond amount, regardless of the number of claims made against the bond.

In Witness Whereof, the above bounden parties have executed this instrument under their several seals, this the 11th
day of August, 2015, the name and corporate seal of each corporate party being hereto affixed and
these presents duly signed to be its undersigned representative, pursuant to authority of its governing body.

Goldsboro Homes

Signature of Principal

Title

RLI Insurance Company

Surety by 
(signature)

Bonnie B. Higgins
(printed name)

Title Attorney In Fact

Address P.O. Box 3967
Peoria, IL 61612-3967

N.C. Resident Agent Towne Insurance Agency LLC

4515 Falls of Neuse Rd Ste 300
Raleigh, NC 27619

Address



Power of Attorney Attached

R3200507-50,0



RLI Insurance Company
 P.O. Box 3967 Peoria IL 61612-3967
 Phone: (309)692-1000 Fax: (309)683-1610

POWER OF ATTORNEY

RLI Insurance Company

Bond No. LSM0769478

Know All Men by These Presents:

That the RLI Insurance Company, a corporation organized and existing under the laws of the State of Illinois, and authorized and licensed to do business in all states and the District of Columbia does hereby make, constitute and appoint: Bonnie B. Higgins in the City of Raleigh, State of North Carolina, as Attorney In Fact, with full power and authority hereby conferred upon him/her to sign, execute, acknowledge and deliver for and on its behalf as Surety, in general, any and all bonds, undertakings, and recognizances in an amount not to exceed Ten Million and 00/100 Dollars (\$10,000,000.00) for any single obligation, and specifically for the following described bond.

Principal: Goldsboro Homes
Obligee: County of Harnett
Type Bond: Modular Building, Setup and Installation Contractor
Bond Amount: \$ 5,000.00
Effective Date: August 11, 2015

The RLI Insurance Company further certifies that the following is a true and exact copy of a Resolution adopted by the Board of Directors of RLI Insurance Company, and now in force to-wit:

"All bonds, policies, undertakings, Powers of Attorney or other obligations of the corporation shall be executed in the corporate name of the Company by the President, Secretary, any Assistant Secretary, Treasurer, or any Vice President, or by such other officers as the Board of Directors may authorize. The President, any Vice President, Secretary, any Assistant Secretary, or the Treasurer may appoint Attorneys in Fact or Agents who shall have authority to issue bonds, policies or undertakings in the name of the Company. The corporate seal is not necessary for the validity of any bonds, policies, undertakings, Powers of Attorney or other obligations of the corporation. The signature of any such officer and the corporate seal may be printed by facsimile."

IN WITNESS WHEREOF, the RLI Insurance Company has caused these presents to be executed by its Vice President with its corporate seal affixed this 11th day of August, 2015.

ATTEST:

Cynthia S. Dohm
 Cynthia S. Dohm Assistant Secretary



Barton W. Davis
 Barton W. Davis Vice President

On this 11th day of August, 2015 before me, a Notary Public, personally appeared Barton W. Davis and Cynthia S. Dohm, who being by me duly sworn, acknowledged that they signed the above Power of Attorney as Vice President and Assistant Secretary respectively, of the said RLI Insurance Company, and acknowledged said instrument to be the voluntary act and deed of said corporation.

Jacqueline M. Bockler
 Jacqueline M. Bockler Notary Public



[Print](#)[Close](#)

LiensNC Notice of Appointment of Lien Agent - Address: 6703 South River Rd., Bunnlevel, 28323

From: **LiensNC Support** (donotreply@liensnc.com)

Sent: Thu 8/20/15 10:52 AM

To:

A(n) Appointment of Lien Agent was filed on August 20, 2015, 10:52:35 AM using the North Carolina Online Lien Agent System (LiensNC). Details of this filing include:

Project Property

Jessica Cummings
6703 South River Rd.
Bunnlevel, NC 28323
Harnette County

Entry Number: [341711 \(entry search, view related filings\)](#)

Date of Filing: August 20, 2015, 10:52:35 AM

Lien Agent

Investors Title Insurance Company

Online: www.liensnc.com

Address: 19 W. Hargett St., Suite 507 / Raleigh, NC 27601

Phone: 888-690-7384

Fax: 913-489-5231

Email: support@liensnc.com

Owner Information

Goldbsoro Homes LLC
4112 US Hwy 70 E
Goldsboro, NC 27534
United States Email: goldsborohomes@hotmail.com
Phone: 919-778-5477

Design Professionals

Date of First Furnishing

August 27, 2015

[Click to view full filing details](#)

Scan for instant access on your mobile phone



[Unsubscribe](#)