

Initial Application Date: 5-2-14

Application # 1650038602

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: Larry & Thelma Carroll Mailing Address: 502 Festus Rd  
City: Coats State: NC Zip: 27521 Contact No: \_\_\_\_\_ Email: \_\_\_\_\_

APPLICANT\*: Maynard Wilkins / Clayton Homes Mailing Address: 3912 Fayetteville Rd  
City: Raleigh State: NC Zip: 27603 Contact No: 919-772-5013 Email: 781@claytonhomes.com  
\*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Maynard Wilkins Phone # 919-772-5013

PROPERTY LOCATION: Subdivision: \_\_\_\_\_ Lot #: \_\_\_\_\_ Lot Size: 2.40  
State Road # 175 State Road Name: Old NC 87 Map Book & Page: - 1 -  
Parcel: 039576 0014 PIN: 9576-44-4294.000  
Zoning: RA-20R Flood Zone: X Watershed: - Deed Book & Page: 3316 1972 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 28 x 46) # Bedrooms 3 # Baths 2 Basement (w/wo bath) \_\_\_\_\_ Garage: \_\_\_\_\_ Site Built Deck: 12x14-R 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): Proposed Modular

**Required Residential Property Line Setbacks:**

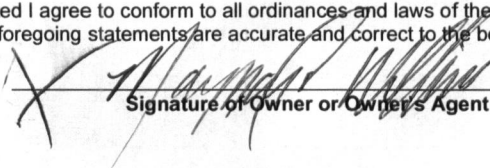
Front Minimum 35 Actual 36.99'  
Rear 25 25'  
Closest Side 10 26.32'  
Sidestreet/corner lot \_\_\_\_\_  
Nearest Building on same lot \_\_\_\_\_

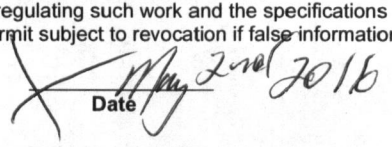
Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:

Turn Left on S. Main  
St. - Turn Right onto W. 8th St - turn left  
onto Old NC 87 - destination on Right

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 of Owner or Owner's Agent

  
Date May 2nd 2016

\*\*\*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: \_\_\_\_\_

APPLICATION #: 1650038602

**\*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    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.**

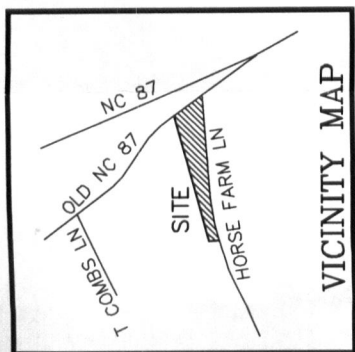
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

DATE

*[Handwritten Signature]*

5/2/2016

Customer: Starke correct scale: 1" = 100'



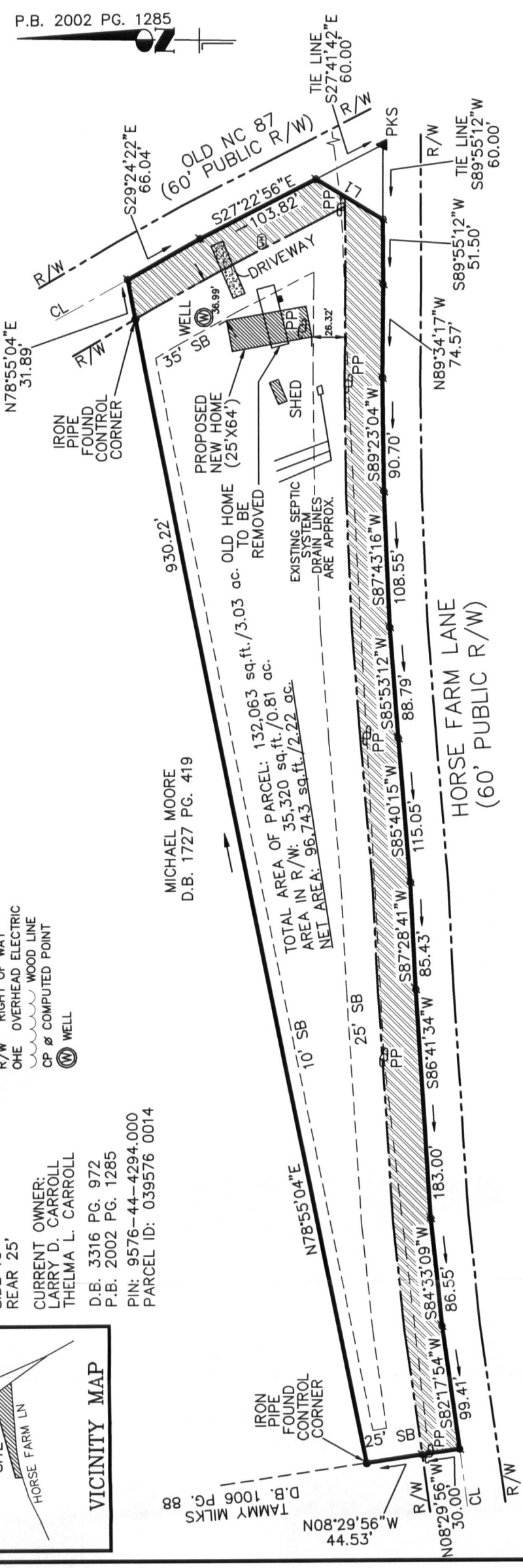
PHYSICAL ADDRESS:  
 175 OLD NC 87  
 CAMERON, NC 28326  
 ZONING: RA-20R  
 SETBACKS:  
 FRONT 35'  
 SIDE 10'  
 REAR 25'  
 CURRENT OWNER:  
 LARRY D. CARROLL  
 THELMA L. CARROLL  
 D.B. 3316 PG. 972  
 P.B. 2002 PG. 1285  
 PIN: 9576-44-4294.000  
 PARCEL ID: 039576 0014

- \* LEGEND
- ISS ● IRON STAKE SET
  - EIP ● EXISTING IRON PIPE
  - PKS ▲ PK NAIL SET
  - PP ○ POWER POLE
  - PED ■ PHONE PEDESTAL
  - WM (M) WATER METER
  - R/W - RIGHT OF WAY
  - OHE - OVERHEAD ELECTRIC
  - CP ∅ COMPUTED POINT
  - WELL (W)

LINE TABLE		
LINE	LENGTH	BEARING
L1	62.15	S31°06'45"W

**Civiltek East**  
 Surveying Planning Subdivision Design  
 FIRM C-2000  
 602 EAST NASH STREET  
 SPRING HOPE, N.C. 27882  
 (252) 478-5005  
 E-Mail: [civiltekeast@embarqmail.com](mailto:civiltekeast@embarqmail.com)  
 FILE: 140630.DWG

P.B. 2002 PG. 1285



MICHAEL MOORE  
 D.B. 1727 PG. 419

TOTAL AREA OF PARCEL: 132,063 sq.ft./3.03 ac.  
 AREA IN R/W: 35,320 sq.ft./0.81 ac.  
 NET AREA: 96,743 sq.ft./2.22 ac.



I, TED S. HOPKINS CERTIFY THAT THIS MAP IS A TRUE REPRESENTATION OF ALL THE PROPERTY DESCRIBED IN DEED BOOK 3316 PAGE 972 AND SHOWN AS ALL OF LOT WITH PIN NUMBER 9576-44-4294.000 IN HARNETT COUNTY REGISTER OF DEEDS, AND THAT ENCROACHMENTS, IF ANY AT THE TIME OF THE SURVEY ARE SHOWN.

*Ted S. Hopkins*  
 TED S. HOPKINS, PROFESSIONAL LAND SURVEYOR L-3976

**PROPOSED SITE PLAN**  
 FOR  
 175 OLD NC 87  
 CAMERON, NC 28326



3-4-16

Scale: 1" = 100'



Barbecue Township  
 Harnett County, North Carolina  
 Deed Recorded In Deed Book 3316 At Page 972.

09/09/11

Application #

1650038602

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 Clayton Homes of Raleigh Date 12/18/15  
Site Address 175 Old NC 87 Cameron, NC 28326 Phone 919-772-5013  
Directions to job site from Lillington take NC 27 W to 875 to right on Old NC 87 to 175 on right

Subdivision N/A Lot \_\_\_\_\_  
Description of Proposed Work New offframe modular home # of Bedrooms 3  
Heated SF 1600 Unheated SF 168 Finished Bonus Room? \_\_\_\_\_ Crawl Space  Slab \_\_\_\_\_

**General Contractor Information**

JMB Services 919-669-7043  
Building Contractor's Company Name Telephone  
105 Aspen Cr. Clayton, NC 27520 N/A  
Address Email Address  
32512  
License # \_\_\_\_\_

**Electrical Contractor Information**

Description of Work Connect to existing Service Size 200 Amps T-Pole  Yes  No  
Glenns Service Co. Inc. 919-779-0849  
Electrical Contractor's Company Name Telephone  
6005 Brack Penny Rd. Raleigh, NC 27603 N/A  
Address Email Address  
12810L  
License # \_\_\_\_\_

**Mechanical/HVAC Contractor Information**

Description of Work New Heat Pump  
Glenns Service Co. Inc. 919-779-0849  
Mechanical Contractor's Company Name Telephone  
6005 Brack Penny Rd. Raleigh NC 27603 N/A  
Address Email Address  
12327H3  
License # \_\_\_\_\_

**Plumbing Contractor Information**

Description of Work connect to county water/septic (existing) # Baths 2  
Priority Plumbing 919-422-4935  
Plumbing Contractor's Company Name Telephone  
P.O. Box 264 Willow Spring NC 27592 N/A  
Address Email Address  
18550 P  
License # \_\_\_\_\_

**Insulation Contractor Information**

N/A  
Insulation Contractor's Company Name & Address Telephone

\*NOTE General Contractor 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

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

Date

5-17-16

**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

JMB Services

Sign w/Title

Wally Barber - owner

Date

5-17-16