

Initial Application Date: 3/23/18

Application # 1850043630
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: Leland + Melissa Johnson Mailing Address: 1815 Kenwood Ave
City: Spring Lake State: NC Zip: 28390 Contact No: 919 721 8242 Email: Melissa.Johnson@wo2.com

APPLICANT*: Same Mailing Address: _____
City: _____ State: _____ Zip: _____ Contact No: _____ Email: _____
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Ed Same Phone # _____

PROPERTY LOCATION: Subdivision: Leland Johnson Lot #: 1 Lot Size: 3.61
State Road # NC27W State Road Name: NC 27 W Map Book & Page: 2018, 49
Parcel: 13 0528 0157 03 PIN: 0528 01 9452.000
Zoning: RA3 Flood Zone: X Watershed: NA Deed Book & Page: 340, 34 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 74 x 30) # Bedrooms 3 # Baths 2 Basement (w/wo bath) NA Garage: NA Site Built Deck: N On Frame 15x30 Off Frame 7x28
(Is the second floor finished? () yes () no Any other site built additions? () yes () no Front porch)
- 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: none Manufactured Homes: none Other (specify): _____

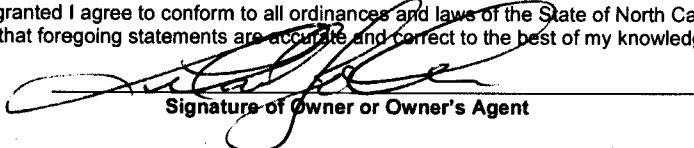
Required Residential Property Line Setbacks:

Front	Minimum	<u>35</u>	Actual	<u>170</u>
Rear		<u>35</u>		<u>170</u>
Closest Side		<u>10</u>		<u>116</u>
Sidestreet/corner lot				
Nearest Building on same lot				

Comments: _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: _____

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

3/23/18
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

* Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address, company name & phone must match information on license.

Application #

436030



Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
Phone 910-893-7525 Fax 910-893-2793 www.harnett.org

Application for Residential Building and Trades Permit

Owner's Name: Leland / Melissa Johnson Date: _____
Site Address: 7695 NC 22 West Lillington Phone: 919-721-8242
Directions to job site from Lillington: _____

Subdivision: _____ Lot: _____
Description of Proposed Work: 30 x 74 ft frame mod 7x28 porch #Bedrooms: 3
Heated SF 2220 Unheated SF 1421 Finished Rec Room? _____ Crawl Space Slab ()

General Contractor Information

TCC Vanderbilt LLC 919-774-6319
Building Contractor's Company Name Telephone
3300 Jefferson Davis Hwy Sanford NC 27332 43964
Address License #
[Signature] Must sign & fill out second page
Signature of Owner/Contractor/Officer(s) of Corporation

Electrical Permit Information

Description of Work _____ Service Size: 200 Amps TPole: yes no
CAROLINA AER INC 910-947-7707
Electrical Contractor's Company Name Telephone
3700 Hwy 15-501 Carthage NC 28327 32340
Address License #
[Signature]
Signature of Officer(s) of Corporation

Mechanical Permit Information

Description of Work _____
CAROLINA AER INC 910-947-7707
Mechanical Contractor's Company Name Telephone
3700 Hwy 15-501 Carthage NC 28327 23549
Address License #
[Signature]
Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work ~~Plumbing~~ # Baths _____
HR Curtis 919-770-0168
Plumbing Contractor's Company Name Telephone
6312 Carboon Rd Sanford NC 27330 10924
Address License #
[Signature]
Signature of Officer(s) of Corporation

Insulation Permit Information

Insulation Contractor's Company Name & Address _____ Telephone _____

Homeowners Applying to Build Their Own Home

Please answer the following questions then see a Permit Technician to determine if you qualify for permit under Owners Exemption. Questionnaire per G.S. 87-14 Regulations as to Issue of Building Permits (Memo available upon request)

- 1. Do you own the land on which this building will be constructed? ___ yes ___ no
- 2. Have you hired or intend to hire an individual to superintend and manage construction of the project? ___ yes ___ no
- 3. Do you intend to directly control & supervise construction activities? ___ yes ___ no
- 4. Do you intend to schedule, contract, or directly pay for all phases of construction work to be done? ___ yes ___ no
- 5. Do you intend to personally occupy the building for at least 12 consecutive months following completion of construction and do you understand that if you do not do so, it creates the presumption under law that you fraudulently secured the permit? ___ yes ___ no

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 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.


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

6/1/18
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: TCC Vanderbrilt LLC

Sign w/Title: Officer Agent Date: 6/1/18

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 859175

Filed on: 05/29/2018

Initially filed by: Burtonbr

Designated Lien Agent

Fidelity National Title Company, LLC

Online: www.liensnc.com (<http://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 (<mailto:support@liensnc.com>)

Project Property

PIN - 0528-01-9452.000 PID - 130528 0157 03
NC Hwy 27
Lillington, NC 27932
Harnett County

Property Type

1-2 Family Dwelling

Print & Post



Contractors:

Please post this notice on the Job Site.

Suppliers and Subcontractors:

Scan this image with your smart phone to view this filing. You can then file a Notice to Lien Agent for this project.

Owner Information

Leland & Melissa Johnson
1850 Kenwood Ave
Spring Lake, NC 28390
United States
Email: none@none.com
Phone: 919-721-8242

Date of First Furnishing

05/29/2018

[View Comments \(0\)](#)

Technical Support Hotline: (888) 690-7384

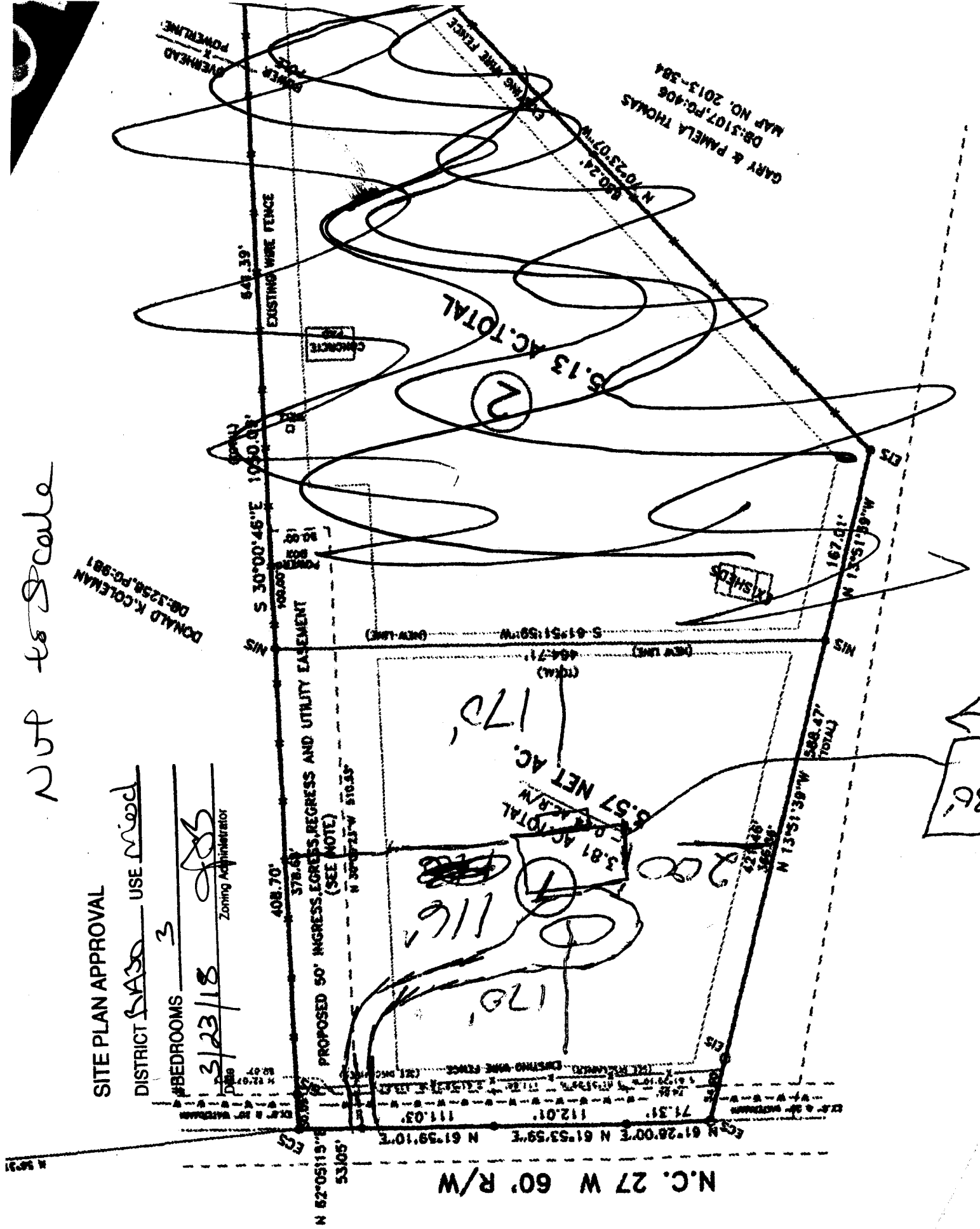
NOT to Scale

SITE PLAN APPROVAL

DISTRICT S-30 USE Med
#BEDROOMS 3
3/23/18
Zoning Administrator

DONALD K. COLEMAN
DB:325A, PC:981

GARY & PAMELA THOMAS
DB:3107, PC:406
MAP NO. 2013-384



NAME: Leland Johnson

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 # _____

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)

3/23/18
DATE

HAL OWEN & ASSOCIATES, INC.

SOIL & ENVIRONMENTAL SCIENTISTS

P.O. Box 400, Lillington NC 27546-0400

Phone (910) 893-8743 / Fax (910) 893-3594

www.halowensoil.com

7 February 2018

Mr. Leland Johnson
1815 Kenwood Avenue
Spring Lake, NC 28390

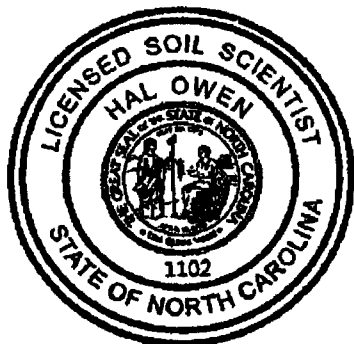
Reference: Preliminary Soil Investigation
Minor Subdivision for Leland Johnson and Melissa Johnson – Lots 1 and 2

Dear Mr. Johnson,

A soil investigation has been conducted at the above referenced property, located on the southern side of NC 27 W in the Upper Little River Township of Harnett County, North Carolina. The purpose of the investigation was to determine the ability of each lot to support a subsurface sewage waste disposal system and repair area for a typical four-bedroom home. All soil ratings and determinations were made in accordance with "Laws and Rules for Sewage Treatment and Disposal Systems, 15A NCAC 18A .1900". It is our understanding that individual septic systems and public water supplies will be utilized at this site. The maximum house footprint used for this evaluation was 50 X 60 feet.

Each lot is dominated by provisionally suitable soils for subsurface sewage waste disposal. These provisionally suitable soils were observed to be friable sandy clay loams to greater than 36 inches and appear adequate to support long term acceptance rates of 0.4 to 0.6 gal/day/sqft. It appears that the soils on each lot are adequate to support a conventional septic system and repair area for at least one residence.

This soil investigation report and map, when provided to the Harnett County Health Department, should allow them to sign the maps for recordation. I appreciate the opportunity to provide this service and hope to be allowed to assist you again in the future. If you have any questions or need additional information, please contact me at your convenience.

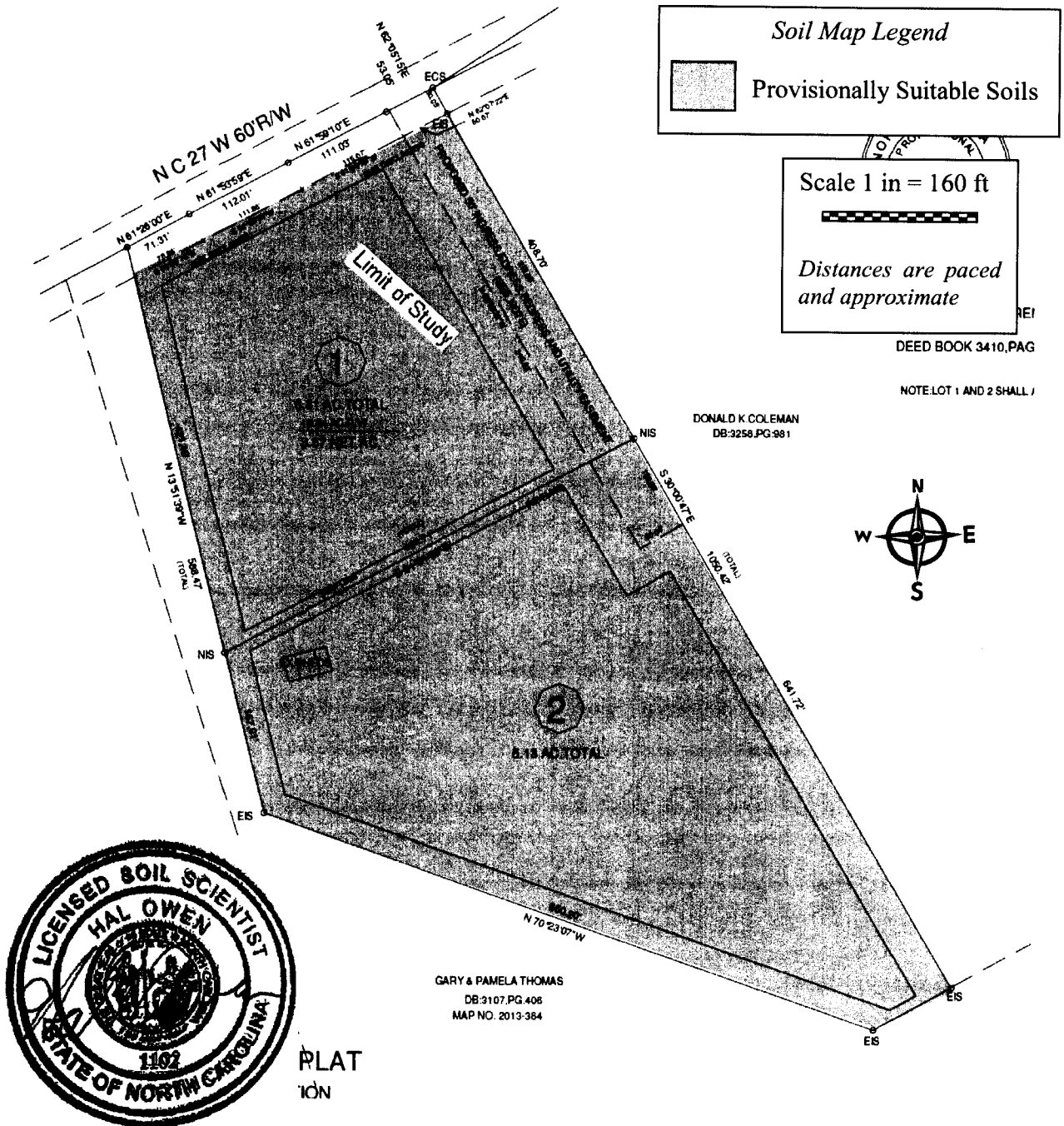


Sincerely,

Hal Owen
Licensed Soil Scientist

Preliminary Soil Investigation
Minor Subdivision for Leland Johnson and Melissa Johnson – Lots 1 and 2
7 February 2018

Soil Map



HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

LILLINGTON, NC 27546

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

Application Number 18-50043630
 Property Address 94842 *UNASSIGNED
 PARCEL NUMBER 13-0528- - -0157- -03-
 Application description CP MODULAR HOME
 Subdivision Name JEFFREY S SMITH
 Property Zoning RES/AGRI DIST - RA-30

Page 3
 Date 6/05/18

SCANNED

Required Inspections

DATE

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	101	B101	R*BLDG FOOTING / TEMP SVC POLE	_____	___/___/___
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	_____	___/___/___
Permit type MODULAR PERMIT					
10	101	B101	R*BLDG FOOTING / TEMP SVC POLE	_____	___/___/___
20	103	B103	R*BLDG FOUND & TEMP SVC POLE	_____	___/___/___
20	814	A814	ADDRESS CONFIRMATION	_____	___/___/___
30-40	119	B119	R*MOD MARRIAGE WALL	_____	___/___/___
40-50	425	R425	FOUR TRADE ROUGH IN	_____	___/___/___
40-50	125	R125	ONE TRADE ROUGH IN	_____	___/___/___
40-50	325	R325	THREE TRADE ROUGH IN	_____	___/___/___
40-50	225	R225	TWO TRADE ROUGH IN	_____	___/___/___
50-60	131	R131	ONE TRADE FINAL	_____	___/___/___
50-60	429	R429	FOUR TRADE FINAL	_____	___/___/___
50-60	329	R329	THREE TRADE FINAL	_____	___/___/___
50-60	229	R229	TWO TRADE FINAL	_____	___/___/___
999		H824	ENVIR. OPERATIONS PERMIT	_____	___/___/___

HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

LILLINGTON, NC 27546

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

Application Number 18-50043630

Page 2
Date 6/05/18

Special Notes and Comments
27 W

HARNETT COUNTY CASH RECEIPTS

*** CUSTOMER RECEIPT ***

Oper: JBROCK Type: CP Drawer: 1
Date: 3/23/18 52 Receipt no: 297666

Year	Number	Amount
2018	50043650	
94842	*UNASSIGNED	
LILLINGTON, NC 27546		
04	BP - ENV HEALTH FEES	\$750.00

NEW TANK

LELAND JOHNSON

Tender detail	
CA CASH PAYMENT	\$800.00
Total tendered	\$800.00
Total payment	\$750.00
Change	\$50.00

Trans date: 3/23/18 Time: 14:31:20

** THANK YOU FOR YOUR PAYMENT **

Application Number 18-50043630 Date 6/05/18
Property Address 94842 *UNASSIGNED
PARCEL NUMBER 13-0528- - -0157- -03-
Application type description CP MODULAR HOME
Subdivision Name JEFFREY S SMITH
Property Zoning RES/AGRI DIST - RA-30

Owner

JOHNSON LELAND & MELISSA
1815 KENWOOD AVE SPRING LAKE
SPRING LAKE NC 28390

Contractor

TCC VANDERBUILT LLC
3300 JEFFERSON DAVIS HWY
SANFORD NC 27332
(919) 774-6319

Applicant

JOHNSON LELAND & MELISSA
1815 KENWOOD AVE
SPRING LAKE NC 28390
(919) 721-8242

--- Structure Information 000 000 30X74 OFF FRAME MOD 3BDR 2BA
Flood Zone FLOOD ZONE X
Other struct info # BATHS 2
BEDROOMS 3.00
SEPTIC - EXISTING? NEW TANK
WATER SUPPLY COUNTY

Permit RESIDENTIAL BUILDING PERMIT

Additional desc . .
Phone Access Code . 1245729
Issue Date 6/05/18 Valuation 0
Expiration Date . . 6/05/19

Permit LAND USE PERMIT

Additional desc . .
Phone Access Code . 1245471
Issue Date 6/05/18 Valuation 0
Expiration Date . . 12/02/18

Permit MODULAR PERMIT

Additional desc . .
Phone Access Code . 1245463
Issue Date 6/05/18 Valuation 0
Expiration Date . . 6/05/19

Special Notes and Comments

T/S: 03/23/2018 02:27 PM JBROCK ----

HARNETT COUNTY CASH RECEIPTS

*** CUSTOMER RECEIPT ***

Oper: LLUCAS Type: CP Drawer: 1
Date: 6/05/18 53 Receipt no: 376971

Year	Number	Amount
2018	50043630	
94842	*UNASSIGNED	
	LILLINGTON, NC 27546	
R1	BP - PERMIT FEES	\$535.00
	BLDNG APP	

TCC VANDERBUILT

Tender detail		
CK CHECK PAYMEN	78131	\$535.00
Total tendered		\$535.00
Total payment		\$535.00

Trans date: 6/05/18 Time: 12:45:13

** THANK YOU FOR YOUR PAYMENT **