

\* Moved house / fire repair

Initial Application Date: 10/29/14

Application # 14-50034850

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: DANNY MOODY Mailing Address: P.O. Box 265  
City: Ferguson Virginia State: NC Zip: 27526 Contact No: 919-434-2603 Email: MDANNY5230 AOL.COM

APPLICANT\*: DANNY MOODY Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Contact No: \_\_\_\_\_ Email: \_\_\_\_\_

\*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: DANNY MOODY Phone # \_\_\_\_\_

PROPERTY LOCATION: Subdivision: \_\_\_\_\_ Lot #: \_\_\_\_\_ Lot Size: 9.14 AC

State Road # 41 State Road Name: Avery Spence Rd Map Book & Page: 615

Parcel: 080644 0014 PIN: 0644-16-0195

Zoning: RA-20M Flood Zone: X Watershed: NA Deed Book & Page: 0681/0010 Power Company\*: Progress

\*New structures with Progress Energy as service provider need to supply premise number \_\_\_\_\_ from Progress Energy.

\* premise #

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 \_\_\_\_\_ x \_\_\_\_\_) # 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: \_\_\_\_\_ 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 16 x 40) Use: Moved house (partial) fire repair 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) LIBRARY

Required Residential Property Line Setbacks:

Front Minimum 35 Actual 450 Y

Rear 25 200 Y

Closest Side 10 100 Y

Sidestreet/corner lot \_\_\_\_\_

Nearest Building on same lot \_\_\_\_\_

Comments:

\* This is the moved section of the house due to fire damage ref # 14-50034852

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**

*Darryl M. Mung*  
Signature of Owner/Contractor/Officer(s) of Corporation

10/29/14  
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 \_\_\_\_\_

Sign w/Title *Darryl M. Mung* Date 10/29/14

\* Moved house / fire repair

09/09/11

Application #

14-50034850

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: Danny Moody, Date: 10/29/14
Site Address: 41 Avery Spence Rd, Phone: 919-434-2603
Directions to job site from Lillington: 401 Nc hwy 101 on Christian Light Rd, 8 miles, hwy 101 on Avery Spence Rd, 1st light pole, left, house behind red
Subdivision: N1 - Lot:
Description of Proposed Work: Move existing app 30 ft. # of Bedrooms: 1
Heated SF: Unheated SF: Finished Bonus Room?: Crawl Space: Slab:

General Contractor Information

Self owner
Building Contractor's Company Name: Telephone:
Address: Email Address:
License #:

Electrical Contractor Information

Description of Work: Self owner - Service Size: Amps T-Pole: Yes No
Electrical Contractor's Company Name: Telephone:
Address: Email Address:
License #:

Mechanical/HVAC Contractor Information

Description of Work: New AC & heat Self owner
Mechanical Contractor's Company Name: Telephone:
Address: Email Address:
License #:

Plumbing Contractor Information

Description of Work: New Addition L.C. Child-Plumber # Baths:
Plumbing Contractor's Company Name: Telephone:
Address: Email Address:
License #:

Insulation Contractor Information

Self owner
Insulation Contractor's Company Name & Address: Telephone:

\*NOTE General Contractor must fill out and sign the second page of this application

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: N 401, REST ON CHRISTIAN HIGH RD  
APX 8 MILES, REST AVEWAY SPENCER, ON 9<sup>th</sup> HIGHWAY -  
SITE BACK OF SIDEAL

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]  
Signature of Owner or Owner's Agent

10/20/14  
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\*\*

10/29/14

NAME: Danny Moody

APPLICATION #: 14-50034850

**\*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 # 006947

**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?

*\* Existing tank repair for new tank due to fire damage*

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.**

Danny Moody  
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

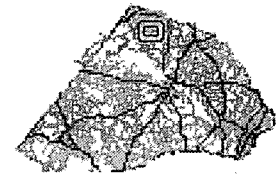
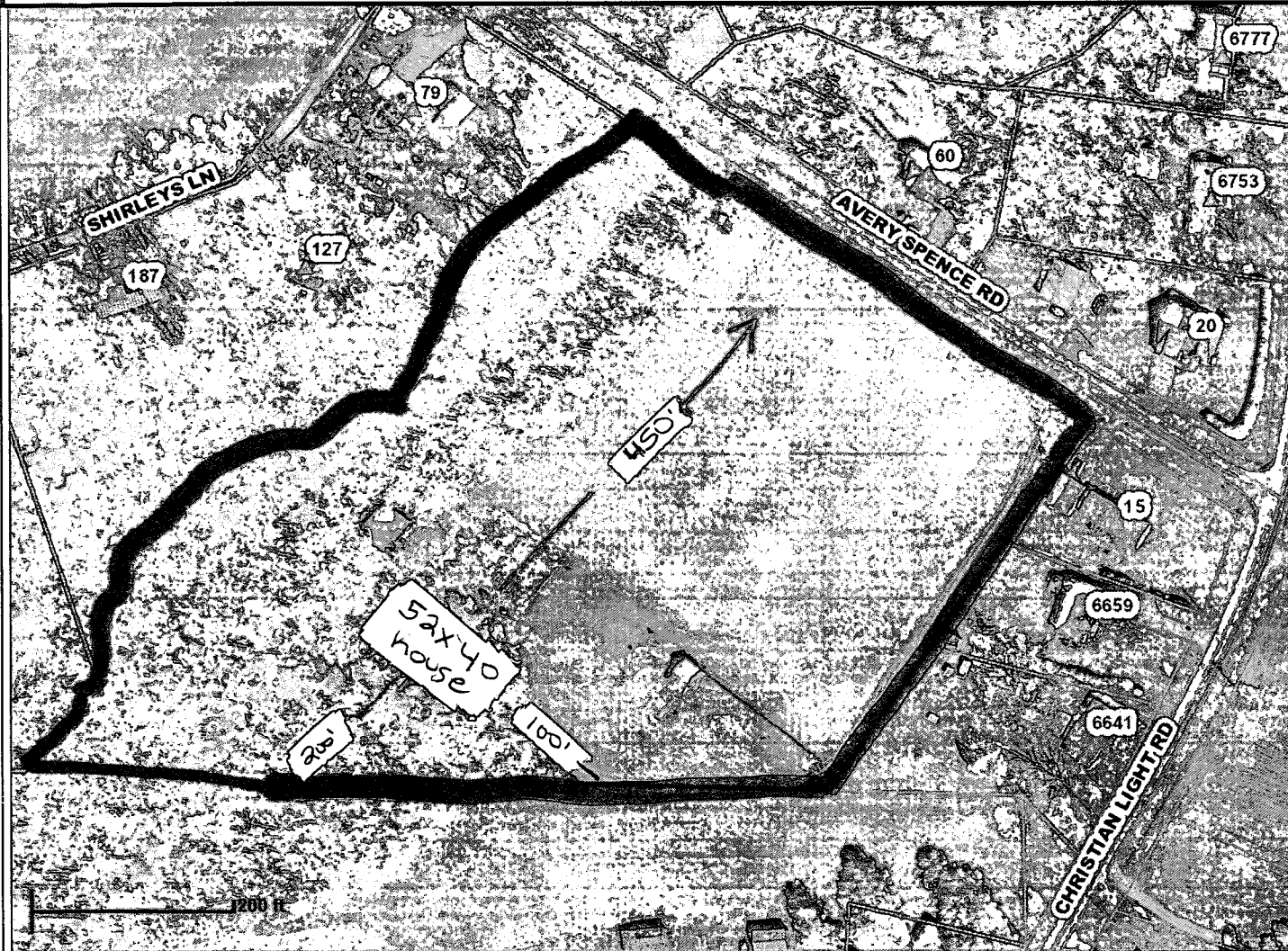
10/29/14  
DATE

\*NOT TO SCALE

>> Fire damage repair; repair of existing tank w/ new tank

>> spoke w/ Graham Byrd regarding this

HARNETT COUNTY, NORTH CAROLINA  
GIS/LAND RECORDS



- AddressPoints
- Road Centerlines
- MajorRoads
- Rivers
- Parcels
- County\_Boundary
- CityLimits
- Harnett\_2013.sid
  - Red: Band\_1
  - Green: Band\_2
  - Blue: Band\_3

Harnett County GIS  
305 W Cornelius Harnett Blvd, Suite 100  
Lillington NC 27546  
Phone: 910-893-7523 www.harnett.org

Any use of this map shall be at the sole risk of the user of this map. Although, all effort has been taken to insure accuracy in the data presented, Harnett County makes no warranty, expressed or implied, as to the accuracy of this information represented herein. Any user of this product shall hold harmless Harnett County, its elected officials, employees and agents from and against any claim, damage, loss, action, cause of action, or liability arising from the use of this GIS product.

SITE PLAN APPROVAL  
Harnett COUNTY  
DISTRICT #A-20A USE

MOVED HOUSE CARE

#BEDROOMS 1 term  
10/29/14  
Dennis Williams  
ZONING ADMINISTRATOR  
RES