

Initial Application Date: 2-6-13

Application # 1350030574

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: Bernard F. Young Mailing Address: 3485 Johnson County Rd
City: Angier State: NC Zip: 27501 Contact No: _____ Email: _____

APPLICANT*: L M Langdon Mailing Address: _____
City: _____ State: _____ Zip: _____ Contact No: 9194226946 Email: _____

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: _____ Phone # _____

PROPERTY LOCATION: Subdivision: Cathy P. McLamb Lot #: 1A Lot Size: 69
State Road # 1516 State Road Name: Sheriff Johnson Rd Map Book & Page: 2012 1138
Parcel: 07 0680 0153 09 PIN: 61080-56-9436-000
Zoning: RA30 Flood Zone: X Watershed: IV Deed Book & Page: 2744/862 Power Company*: _____

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

PROPOSED USE:

☒ SFD: (Size 642336) # Bedrooms: 3 # Baths: 2 Basement(w/wo bath): _____ Garage: ☒ Deck: ☒ Crawl Space: ☒ Slab: _____ Monolithic 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 _____ 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: 1 Manufactured Homes: _____ Other (specify): _____

Required Residential Property Line Setbacks:

	Minimum	Actual
Front	<u>35</u>	<u>70</u>
Rear	<u>25</u>	<u>195</u>
Closest Side	<u>10</u>	<u>10</u>
Sidestreet/corner lot	_____	_____
Nearest Building on same lot	_____	_____

Comments: _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: _____

off of Sheriff Johnson Rd @ Old
stage Rd N

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.

Bernard F. Young
Signature of Owner or Owner's Agent

2-6-17
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****

SITE PLAN APPROVAL

DISTRICT BA30 USE SFD

#BEDROOMS 3

Date 2/6/13

Zoning Administrator

Bernard Young

100' R/W N.C. 27 E

Deed Book 1181, Page 470

Cathy P. McLamb

"Rufus Edwin
Plot Cabinet

Edwin
Deed Book

N.C.S.R. 1006
Existing 6" Hornet County Water Line

"Old Stage Road N"

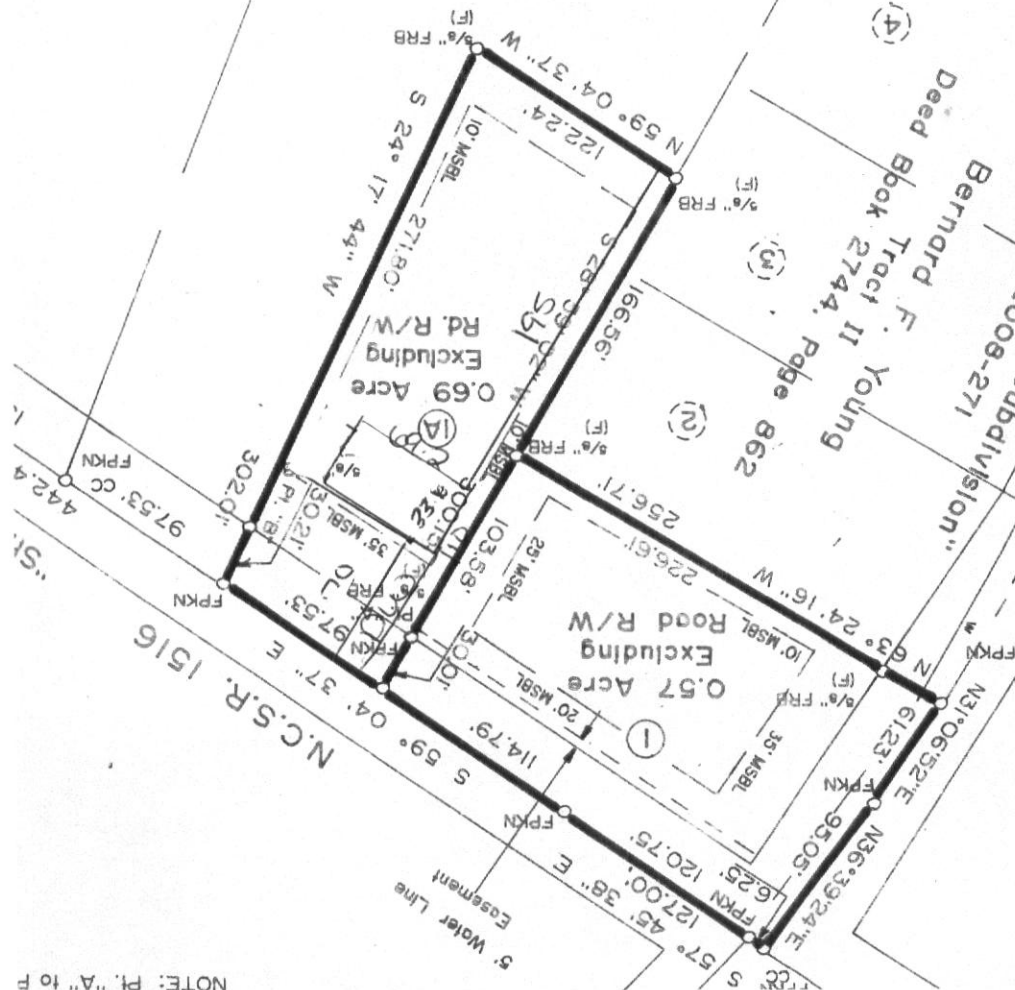
60' R/W

"Cathy P. McLamb Subdivision"

Map # 2008-271

Bernard F. Young

Deed Book 2744, Page 862



NOTE: Pl. "A" to F

NAME: Bernard F. Young

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.

Bernard F. Young
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

2-6-13
DATE

09/09/11

Harnett County Central Permitting
PO Box 65 Lillington NC 27546
910 893 7525 Fax 910 893 2793 www.harnett.org/permits

Application #

1350030574

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 Bernard F. Young Date _____
Site Address 146 Old Stage Road Lillington NC Phone 919 639 2934
Directions to job site from Lillington 210 East Rouschiff Road TO
Old Stage Road Go Right House on Left

Subdivision Cathy McLamb Lot 2
Description of Proposed Work SPICE # of Bedrooms 2
Heated SF _____ Unheated SF _____ Finished Bonus Room? _____ Crawl Space ☒ Slab _____

General Contractor Information

L M Langdon 919-422-6946
Building Contractor's Company Name Telephone
150 Lansing Dr. Benson NA
Address Email Address
55716
License #

Electrical Contractor Information

Description of Work SPICE House Service Size _____ Amps T-Pole ☒ Yes _____ No _____
R.A. Jackson Electric Inc 919 894 5367
Electrical Contractor's Company Name Telephone
9261 Raleigh Road Benson NC 27504
Address Email Address
21144
License #

Mechanical/HVAC Contractor Information

Description of Work New House
Bearley Heat & Air Inc 919 894 4248
Mechanical Contractor's Company Name Telephone
57 W. Lane Coats NC 27521
Address Email Address
9497
License #

Plumbing Contractor Information

Description of Work New House # Baths 2
Mike Smith Plumbing 919 639-3117
Plumbing Contractor's Company Name Telephone
109 AdLit 20 Lane Angier, NC 27501
Address Email Address
18200
License #

Insulation Contractor Information

Insulation Inc Raleigh NC 919 772 9000
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

Bernard F. Young
Signature of Owner/Contractor/Officer(s) of Corporation

8/13/12
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 Bernard F. Young

Sign w/Title _____ Date 8/13/12

PREPARED 2/19/13, 15:19:00
Harnett County

INSPECTION TICKET
INSPECTOR: IVR

PAGE 1
DATE 2/20/13

ADDRESS : 92330 *UNASSIGNED SUBDIV:
CONTRACTOR : L M LANGDON AND ASSOCIATES INC PHONE : (919) 422-6946
OWNER : YOUNG BERNARD & PHONE : (919) 422-6946
PARCEL : 07-0680- - -0153- -09-
APPL NUMBER: 13-50030574 CP NEW RESIDENTIAL (SFD)


DIRECTIONS : T/S: 02/06/2013 01:46 PM JBROCK ----
OFF OF SHERIFF JOHNSON RD @ OLD STAGE
RD N

STRUCTURE: 000 000 69.2X33.6 3BDR CRAWL W/ GARAGE & DECK
FLOOD ZONE : FLOOD ZONE X
BEDROOMS : 3000000.00 PROPOSED USE : SFD
SEPTIC - EXISTING? : NEW WATER SUPPLY : COUNTY

PERMIT: CPSF 00 CP * SFD

	REQUESTED	INSP	DESCRIPTION	
TYP/SQ	COMPLETED	RESULT	RESULTS/COMMENTS	
B101 01	2/20/13 <u>2.20.13</u>	TI <u>APB</u>	R*BLDG FOOTING / TEMP SVC POLE	TIME: 17:00 VRU #: 002341022

----- COMMENTS AND NOTES -----

*I think he
needs this* 

PREPARED 4/02/13, 14:33:37
Harnett County

INSPECTION TICKET
INSPECTOR: IVR

PAGE 43
DATE 4/03/13

ADDRESS : 207 SHERIFF JOHNSON RD SUBDIV:
CONTRACTOR : L M LANGDON AND ASSOCIATES INC PHONE : (919) 422-6946
OWNER : YOUNG BERNARD & PHONE : (919) 422-6946
PARCEL : 07-0680- - -0153- -09-
APPL NUMBER: 13-50030574 CP NEW RESIDENTIAL (SFD)
DIRECTIONS : T/S: 02/06/2013 01:46 PM JBROCK ----
OFF OF SHERIFF JOHNSON RD @ OLD STAGE
RD N
T/S: 03/06/2013 12:33 PM VBROWN ----
PREMIS NUMBER 01516609

STRUCTURE: 000 000 69.2X33.6 3BDR CRAWL W/ GARAGE & DECK

FLOOD ZONE : FLOOD ZONE X

BEDROOMS : 3000000.00

PROPOSED USE : SFD

SEPTIC - EXISTING? : NEW

WATER SUPPLY : COUNTY

PERMIT: CPSF 00 CP * SFD

TYP/SQ	REQUESTED COMPLETED	INSP RESULT	DESCRIPTION RESULTS/COMMENTS
B101 01	2/20/13	BS	R*BLDG FOOTING / TEMP SVC POLE TIME: 17:00 VRU #: 002341022
	2/20/13	AP	T/S: February 20, 2013 01:23 PM BSUTTON ----- No premise number on card or ticket. T pole is ok
A814 01	3/05/13	TW	ADDRESS CONFIRMATION TIME: 17:00 VRU #: 002346781
	3/06/13	AP	207 Sheriff Johnson Rd Coats, NC 27521 T/S: 03/06/2013 11:49 AM TWARD -----
B103 01	3/05/13	DT	R*BLDG FOUND & TEMP SVC POLE TIME: 17:00 VRU #: 002346773
	3/06/13	AP	T/S: 03/06/2013 11:28 AM DETAYLOR -----
B105 01	3/12/13	DT	R*OPEN FLOOR TIME: 17:00 VRU #: 002350452
	3/12/13	AP	T/S: 03/11/2013 12:50 PM VBROWN ----- T/S: 03/11/2013 12:50 PM VBROWN ----- REQUEST AM INSP. T/S: 03/12/2013 10:32 AM DETAYLOR -----
B104 01	3/14/13	JB	R*FOUND & SETBACK VERIF SURVEY TIME: 17:00 VRU #: 002352250
	3/14/13	AP	T/S: 03/14/2013 01:44 PM JBROCK -----
R425 01	4/03/13	TI	FOUR TRADE ROUGH IN TIME: 17:00 VRU #: 002360451

4-3

AP

----- COMMENTS AND NOTES -----