nitial Application Date:	2	.2	0	.13
moder repriorition Date.			$\overline{}$	\sim

Residential Land Use Application

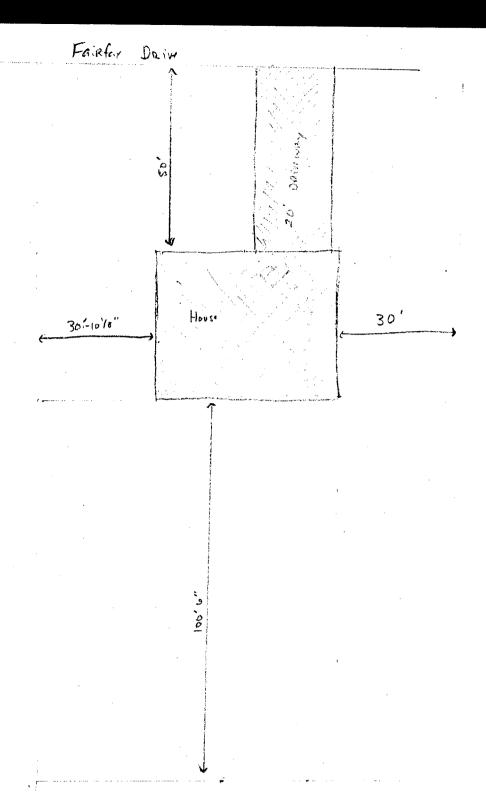
Application # _	13.500	30686
	CU#	

"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION" SOUTHERS FRO PROPERTIES AND
LANDOWNER: OEVELOPMENT COMPANY Mailing Address: 2505 PALRYMPLE ST
City: Sport State: No. Zip: 2 とはContact No: 911-777-284 Email:
APPLICANT*: SAME AS AROYE Mailing Address:
City: State: Zip: Contact No: Email: *Please fill out applicant information if different than landowner
CONTACT NAME APPLYING IN OFFICE: MATT WOOD Phone # 919-935-921
PROPERTY LOCATION: Subdivision: P377mg Cnoscong PMS. 1 Lot #: 6 Lot Size: . 46
State Road # 115 State Road Name: TAJNEAR PARE Map Book & Page: 2011 / 12
Parcel: 03 9588 0003 08 PIN: 9588 -53 - 8092.000
Zoning: Phood Zone: No Watershed: No Deed Book & Page: 28247/10 Power Company*: Process Extra
*New structures with Progress Energy as service provider need to supply premise number from Progress Energy.
PROPOSED USE:
SFD: (Size 46 x 40) # Bedrooms: 4 # Baths: Basement(w/wo bath): Garage: Deck: Crawl Space: Slab:
☐ Mod: (Sizex) # 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:SWDWTW (Sizex) # Bedrooms:Garage:(site built?) Deck:(site built?)
Wallandstared FichiesDWPW (Cize
Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit:
□ Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit: □ Home Occupation: # Rooms: Use: Hours of Operation: #Employees:
□ Home Occupation: # Rooms: Use: Hours of Operation: #Employees:
□ Home Occupation: # Rooms:Use: Hours of Operation:#Employees: □ Addition/Accessory/Other: (Sizex) Use: Closets in addition? () yes () no
□ Home Occupation: # Rooms:Use:Hours of Operation:#Employees: □ Addition/Accessory/Other: (Sizex) Use:Closets in addition? () yes () no Water Supply:CountyExisting Well New Well (# of dwellings using well) *Must have operable water before final
Home Occupation: # Rooms: Use: Hours of Operation: #Employees: Addition/Accessory/Other: (Sizex) 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
Home Occupation: # Rooms:Use:Hours of Operation:#Employees: Addition/Accessory/Other: (Sizex) Use:Closets in addition? () yes () no Water Supply:CountyExisting 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
Home Occupation: # Rooms:

iPECIFIC DIRECTION	S TO THE PROPER $oldsymbol{\Omega} oldsymbol{\mathcal{O}}$	RTY FROM LILLINGTO	N: [n0m	COLLIAN.	arm, Hur, n possen	29/23
BD, SUB	05025>02	D~ [C	F7	Z-14 17 . D	72033676	1 - 2 17 WAY
<u> </u>						
7-17/						
permits are granted I	agree to conformac	all ordinances and law	s of the State of No	th Carolina regulation	such work and the specifi	cations of plans submit
hereby state that foreg	oing statements are	accurate and correct	o the best of my kno	owledge. Permit subje	ect to revocation if false info	ormation is provided.
	Signature	of Owner or Owner's	Agent		2-19-2013 Date	
	Jugilajure	y Owner or Owner s	Agent		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**



DISTRICT LAZOR USE SFD

*BEDROOMS 4

2.20.13 DICULLY ZOHING ADMINISTRATOR

Lot to Pittman Crossing
115 Fairfax Drive
Harnett county Pin # 9588-53-8092.000

South enstern Proporties and Symboline

Stele . erginera 20

Southensten Properties

APPLICATION #: 13.5030680

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 fallure 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 П

- 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.

• 0;	Se Click2GOV	or IVH to near results. Once approved, proceed to Central Permitting for remaining permits.
<u>SEPTIC</u>		-
		on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.
{ ⊻ } Acce	epted	{} Innovative {} Conventional {} Any
{}} Alte	rnative	{}} Other
The applica question. I	ant shall notify f the answer is	the local health department upon submittal of this application if any of the following apply to the property in "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:
{}}YES	{ <u>✓</u> NO	Does the site contain any Jurisdictional Wetlands?
{}}YES	NO 🖳	Do you plan to have an <u>irrigation system</u> now or in the future?
{}}YES		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	{ <u>₩</u> 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	{N 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 Applicati	ion And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And
C14_4_ A 0001-1-	1. 4. 6. 4.	IDI I CAD . TO COLOR TO THE COL

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 Assible So That A Complete Site Evaluation Can Be Performed.

PROPERTY WNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED) 2-18-2013

9-2

Application #

13.50030686

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

	C Data 4/15/2012
Owners Name Southenstein Propenties AND DEVELOPMEN	22 Phone 919-727-2821
Site Address 115 FAIRFAR DA, SAMFORD, NC 273	Phone Tree Tree
Directions to job site from Lillington From Lauranov, 1-	WE 24727 , 123215 ON
BARBECUE CHUNCH ROAD, REGILT ON ROSSE	n , 30/30/1/3/3/200 80
LEF?	Lat 6
Subdivision Patrimon Chossave	
STUGIE FAMILY RESTRIC	# of Bedrooms
Heated SF 2316 Unheated SF 470 Finished Bonus Room?	Crawl Space Slab
SOUTHERSTEIN PROPERTIES AND DEVELOPMEN COMPANY Building Contractor's Company Name	919-777-2826
	<u> ეიყა. ლოო © southerstre</u> k იაოტო აიმა. Email Address
65299	
License # Electrical Contractor Information	
Description of Work SPNCLE FAMELY RESERVICE Size	ROD Amps T-Pole YesNo
	919-770-0143
Electrical Contractor's Company Name	Telephone
Electrical Contractor's Contract AC	
Address	Email Address
1879 8-U	
Lucano H	otion
Mechanical/HVAC Contractor Information	ation
Description of Work STURIE FAMBLY RESSERVERS	2425
CANDLINA HVAC	910-585-2425
Mechanical Contractor's Company Name	Telephone
310 JAMES. H. RUAD, CANTHAGE NC	Email Address
Address	Email Address
23549-112-113	
License # Plumbing Contractor Information	n
Fluinbing Contractor Machine	# Baths 2-5
Description of Work STNELE FAMBLY RESPONDENTERL	919-499-7359
RELINGLE RUMBER	Telephone
Plumbing Contractor's Company Name	
1480 ZJON CHUNCH. RO, SANFOND, NC 27330	Email Address
Address	
7151	
License # Insulation Contractor Information	on
JUSULATING	919-776-4138
Insulation Contractor's Company Name & Address	Telephone
HIMMINDIAN AND THE PROPERTY OF	

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 gurrent fee schedule 4/15/2013 Date Signature of Owner/Contractor/Officer(s) of Corporation 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

Company or Name Southeastern PAUPENTTES AND PENEROPMEN COMPAN

carrying out the work

John (LJ) McCaleb

From:

LiensNC Support <donotreply@ncliens.com>

Sent:

Monday, April 15, 2013 10:22 AM

To:

Undisclosed recipients:

Subject:

LiensNC Notice of Appointment of Lien Agent - Address: 115 Fairfax Dr, Sanford, 27332

A(n) Appointment of Lien Agent was filed on April 15, 2013, 10:24:18 AM using the North Carolina Online Lien Agent System (LiensNC). Details of this filing include:

Project Property

Lot 6, Pittman Crossing Subdivision 115 Fairfax Dr Sanford, NC 27332

Entry Number: 3,399 (entry search, view related filings)

Date of Filing: April 15, 2013, 10:24:18 AM

Lien Agent

Chicago Title Company, LLC 1-888-690-7384

Owner Information

Southeastern Properties and Development 2505 Dalrymple St Sanford, NC 27332

Email: john.mccaleb@gmail.com

Phone: 919-935-3254

Contractor Information

Southeastern Properties and Development 2505 Dalrymple St Sanford, NC 27332

Email: john.mccaleb@gmail.com

Phone: 919-935-3254

Pre-Permit Workers

None

Date of First Furnishing

April 30, 2013

HARNETT COUNTY CENTRAL PERMITTING P.O. BOX 65 LILLINGTON, NC 27546 For Inspections Call: (910) 893-7525 Fax: (910) 893-2793 Bldg Insp scheduled before 2pm available next business day. ______ Application Number 13-50030686 Date 4/22/13 Property Address 115 FAIRFAX DR . . 03-9588- - -0003- -08-PARCEL NUMBER Application type description CP NEW RESIDENTIAL (SFD) Subdivision Name PITTMAN CROSSING PH 1 11LOTS Property Zoning RES/AGRI DIST - RA-20R Contractor Owner ______ ______ SOUTHEASTERN PROPERTIES & DEV MITZI GIZMO HERCULES & ASSOC 2505 DALRYMPLE ST 2505 DALRYMPLE STREE NC 27332 SANFORD NC 27330 SANFORD (919) 777-2826 Applicant _____ SOUTHEASTERN PROPERTIES 2505 DALRYMPLE ST NC 27332 SANFORD (919) 777-2826 Structure Information 000 000 46X40 4 BR ATT GARAGE MONO Flood Zone FLOOD ZONE X 4.00 Other struct info # BEDROOMS PROPOSED USE SFD NEW SEPTIC - EXISTING? WATER SUPPLY ------Permit BLDG, MECH, ELEC, PLB, INSU PERMIT Additional desc . . _____ Special Notes and Comments T/S: 02/20/2013 11:20 AM DJOHNSON --PITTMAN CROSSING PHS 1 LOT 6 FROM LILLINGTON TAKE HWY 27 TO BBQ CHURCH RD RIGHT ON ROSSER PITTMAN RD SUBD ON LEFT.

PERMIT INCLUDES BLDG, ELEC, MECH, PLUMB INSULATION AND LAND USE. Work must conform and comply with the STATE BUILDING CODE and all other State and local laws, ordinances & regulations

HARNETT COUNTY CENTRAL PERMITTING P.O. BOX 65 LILLINGTON, NC 27546

For Inspections Call: (910) 893-7525 Fax: (910) 893-2793 Bldg Insp scheduled before 2pm available next business day.

Page 2 Date 4/22/13 Application Number 13-50030686
Property Address 115 FAIRFAX DR

PARCEL NUMBER . . 03-9588- - -0003- -08-

Application description . . . CP NEW RESIDENTIAL (SFD)

Subdivision Name PITTMAN CROSSING PH 1 11LOTS

Property Zoning RES/AGRI DIST - RA-20R

Permit BLDG, MECH, ELEC, PLB, INSU PERMIT

Additional desc . .

Phone Access Code . 978239

Required Inspections

	Phone Insp#	Insp Code	Description	Initials	Date
10.20	014	7014	APPRICA CONSTRUMENTON		, , ,
10-30	814	A814	ADDRESS CONFIRMATION		/,/,
10-999	309	P309	R*PLUMB UNDER SLAB		/,/,
10-999	205	E205	R*ELEC UNDER SLAB		//
20-999	114	B114	R*BLDG MONO SLAB/TEMP SVC POLE		/ /
30-50	129	I129	R*INSULATION INSPECTION		//_
30-60	425	R425	FOUR TRADE ROUGH IN		
30-60	125	R125	ONE TRADE ROUGH IN		_/_/_
30-60	325	R325	THREE TRADE ROUGH IN		//_
30-60	225	R225	TWO TRADE ROUGH IN		/_/_
40-60	429	R429	FOUR TRADE FINAL		_/_/_
40-60	131	R131	ONE TRADE FINAL		//
40-60	329	R329	THREE TRADE FINAL		
40-60	229	R229	TWO TRADE FINAL		_/_/_
999		H824	ENVIR. OPERATIONS PERMIT		_/_/_

PREPARED 4/24/13, 13:54:13 INSPECTION TICKET INSPECTOR: IVR Harnett County

DATE 4/25/13

PAGE

ADDRESS . : 115 FAIRFAX DR SUBDIV: PITTMAN CROSSING PH 1 11LOTS

CONTRACTOR : SOUTHEASTERN PROPERTIES & DEV PHONE : (919) 777-2826

OWNER . . : MITZI GIZMO HERCULES & ASSOC PHONE : PARCEL . . : 03-9588- - -0003- -08-

APPL NUMBER: 13-50030686 CP NEW RESIDENTIAL (SFD)

DIRECTIONS: T/S: 02/20/2013 11:20 AM DJOHNSON --

PITTMAN CROSSING PHS 1 LOT 6

FROM LILLINGTON TAKE HWY 27 TO BBQ CHURCH RD RIGHT ON ROSSER PITTMAN RD

SUBD ON LEFT.

STRUCTURE: 000 000 46X40 4 BR ATT GARAGE MONO

FLOOD ZONE . . . : FLOOD ZONE X

PROPOSED USE SFD # BEDROOMS 4.00 SEPTIC - EXISTING? . . . : NEW WATER SUPPLY : COUNTY

PERMIT: CPSF 00 CP * SFD

P309 01

4/25/13

REQUESTED INSP DESCRIPTION

TYP/SQ COMPLETED RESULT RESULTS/COMMENTS

R*PLUMB UNDER SLAB VRU #: 002371917

_____ COMMENTS AND NOTES -----

COUNTY OF HARNETT Building Inspections Department Planning Services Certificate of Compliance: Occupancy: Certificate issued pursuant to the requirements of North Carolina General Statute 153A-363 and Harnett County Zoning Ordinances. This certifies at the time of issuance, this structure was in compliance with the various ordinances of the County of Harnett and the North Carolina State Building Codes. For the following: Use Classification: _ **Permit Numbers** Building: Electrical: Address: // Insulation: Plumbing: _ Mechanical: ,MFG Home: > Date: 12.30 **Building Official:**

PREPARED 12/27/13, 14:09:01

INSPECTION TICKET

PAGE

DATE | 12/30/13

INSPECTOR: IVR Harnett County

SUBDIV: PITTMAN CROSSING PH 1 11LOTS

ADDRESS . : 115 FAIRFAX DR

PHONE: (919) 777-2826

CONTRACTOR : SOUTHEASTERN PROPERTIES & DEV

PHONE :

PARCEL . : 03-9588- - -0003- -08-

OWNER . . : MITZI GIZMO HERCULES & ASSOC

APPL NUMBER: 13-50030686 CP NEW RESIDENTIAL (SFD)

DIRECTIONS: T/S: 02/20/2013 11:20 AM DJOHNSON --

PITTMAN CROSSING PHS 1 LOT 6

FROM LILLINGTON TAKE HWY 27 TO BBO CHURCH RD RIGHT ON ROSSER PITTMAN RD

SUBD ON LEFT.

T/S: 06/06/2013 04:18 PM DJOHNSON --

PREMISE NUMBER 58663351

STRUCTURE: 000 000 46X40 4 BR ATT GARAGE MONO

FLOOD ZONE . . . : FLOOD ZONE X

BEDROOMS 4.00 PROPOSED USE : SFD

SEPTIC - EXISTING? . . . : NEW WATER SUPPLY : COUNTY

PERMIT: CPSF 00 CP * SFD REQUESTED INSP DESCRIPTION COMPLETED RESULT RESULTS/COMMENTS TYP/SO ______ 4/25/13 FS R*PLUMB UNDER SLAB VRU #: 002371917 P309 01 AP T/S: 04/25/2013 02:16 PM FSPIVEY -------4/25/13 B114 01 FS R*BLDG MONO SLAB/TEMP SVC POLE VRU #: 002374882 5/01/13 T/S: 05/01/2013 03:06 PM FSPIVEY ------5/01/13 AP 7/29/13 FS FOUR TRADE ROUGH IN VRU #: 002416329 R425 01 T/S: 07/29/2013 03:46 PM FSPIVEY -----7/29/13 AP ADDRESS CONFIRMATION TIME: 17:00 VRU #: 002417079 A814 01 7/29/13 TW 115 FAIRFAX DR SANFORD 27332 8/02/13 AP T/S: 08/02/2013 09:41 AM TWARD ------R*INSULATION INSPECTION VRU #: 002419127 I129 01 8/01/13 FS T/S: 08/01/2013 01:58 PM FSPIVEY ------8/01/13 AΡ JB FOUR TRADE FINAL VRU #: 002477032 R429 01 12/18/13 CA called & left message - no op permit form eh 12/17/13 ENVIR. OPERATIONS PERMIT TIME: 17:00 VRU #: 002479947 12/23/13 OT H824 01 T/S: 12/23/2013 09:14 AM SSTEWART ------12/23/13 AP T/S: 12/23/2013 09:15 AM SSTEWART ------R429 02 FOUR TRADE FINAL VRU #: 002480358

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

8665555/ 9:40 1230-13