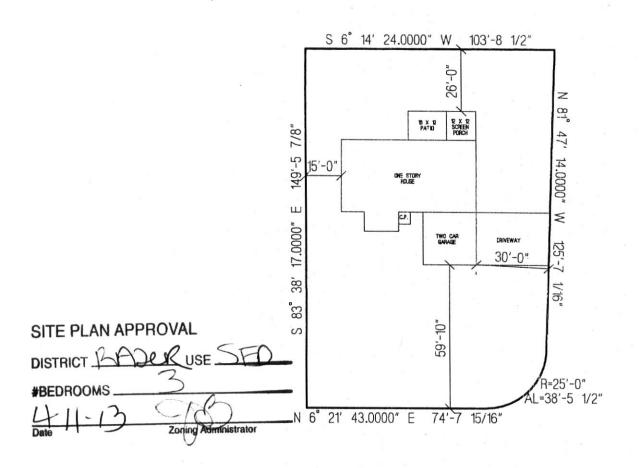
Initial Application Date: 4/8/13  Application # 13-500306891
COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION  Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 Fax: (910) 893-2793 www.hamett.org/permits
LANDOWNER: Craffsmen Construction Mailing Address: 10. Box 727
City: <u>Dunn</u> State: C zip 28335 Contact # 910-892-4345 Email:
APPLICANT : Lunberland Stanles St. Mailing Address: P.O. Box 727
City: Dun State: NC Zip: 28335 Contact # 910-892-4345 Email: joannorris Clentury links *Please fill out applicant information if different than landowner
CONTACT NAME APPLYING IN OFFICE: Joan Nogris Phone # 910-892-4345
PROPERTY LOCATION: Subdivision:
State Road # 1201 State Road Name: Ponderosa 2d Map Book&Page: 2009, 96
Parcel: 09956703, 0006 PIN: 9556-69-6913.000
Zoning #4301 Flood Zone: X Watershed: NA Deed Book&Page: 2581/81/ Power Company*: EFUC
*New structures with Progress Energy as service provider need to supply premise number from Progress Energy.
SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Take It was I Tran Zillington,
(TR) on Johnsonville, School Land, (TR) on Ponderosa
Id. (Z) isto S/D; Lot on Right
Patio
PROPOSED USE:
SFD: (Size 56x 64) # Bedrooms: 3 # Baths: 2 Basement(w/wo bath) 4 Garage: 2 Deck: 2 Crawl Space: Slab: Slab:
SFD: (Size 56x 64 # Bedrooms: 3 # Baths: 2 Basement(w/wo bath) 4 Garage: 4 Deck: 4 Crawl Space: Slab:
SFD: (Size 56x 64 # Bedrooms: 3# Baths: 2 Basement(w/wo bath): A Garage: 5 Deck: 2 Crawl Space: Slab: 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
SFD: (Size 56x 64 # Bedrooms: 3 # Baths: 2 Basement(w/wo bath) 4 Garage: 5 Deck: 2 Crawl Space: Slab:
SFD: (Size 56x 64 # Bedrooms: 3 # Baths: 2 Basement(w/wo bath) Garage: 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:SWDWTW (Size x) # Bedrooms: Garage: (site built?) Deck: (site built?)
SFD: (Size 56x 64 # Bedrooms: 3 # Baths: 2 Basement(w/wo bath): Garage: Deck: 2 Crawl Space: Slab: Sla
SFD: (Size 56x 64 # Bedrooms: 3 # Baths: 2 Basement(w/wo bath)
SFD: (Size 56x 64 # Bedrooms: 3 # Baths: 2 Basement(w/wo bath): Garage: Deck: Crawl Space: Slab: 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: #Employees: Addition/Accessory/Other: (Size x) Use: Closets in addition? (_) yes (_) no
SFD: (Size 56x 64 # Bedrooms: 3 # Baths: 2 Basement(w/wo bath)
SFD: (Size 56x 64 # Bedrooms: 3 # Baths: 2 Basement(w/wo bath) Garage: 2 Deck: 2 Crawl Space: Slab: Sl
SFD: (Size 56x 64 # Bedrooms: 3 # Baths: 2 Basement(w/wo bath)
SFD: (Size 56x 64) # Bedrooms: 3# Baths: 2 Basement(w/wo bath) Garage: 2 Deck: 2 Crawl Space: Slab: Sl
SFD: (Size 50x 64 # Bedrooms: 3# Baths: 2 Basement(w/wo bath)
SFD: (Size 56x 64) # Bedrooms: 3# Baths: Basement(w/wo bath) Garage: Deck: 2 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?   De
SFD: (Size 56x 6/4 # Bedrooms: 3 # Baths: 2 Basement(w/wo bath)
SFD: (Size 56x 64) # Bedrooms: 3# Baths: Basement(w/wo bath) Garage: Deck: Crawl Space: Slab: Sl
SFD: (Size 56x 64) # Bedrooms: 3 # Baths: 2 Basement(w/wo bath) Garage: 3 Deck: 2 Crawl Space: Slab: S
SFD: (Size 56x 6 # Bedrooms: 3# Baths: 2 Basement(w/wo bath) Garage: DecK: Crawl Space: Slab: Slab: Slab: Slab: (Is the bonus room finished? ) yes (Ino w/ a closet? yes (Ino (if yes add in with # bedrooms)      Mod: (Sizex ) # Bedrooms# BathsBasement (w/wo bath)Garage: Site Built Deck:On FrameOff Frame (Is the second floor finished? () yes () noAny other site built additions? () yes () no
SFD: (Size 56x 64) # Bedrooms: 3 # Baths: 2 Basement(w/wo bath) Garage: 3 Deck: 2 Crawl Space: Slab: S

\*\*This application expires 6 months from the initial date if permits have not been issued\*\*
A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION

Permit Copy



WILDWOOD WAY

CRAFTSMEN CONSTRUCTION
LOT # 1 CAROLINA SEASONS
THE BRENTWOOD WITH SCREEN PORCH
SCALE: 1"=40'

NAME	: Cratts	WED	Construction	7	APPLICATION #: <u>/3-500.3068</u>	9
3		*This	application to be filled ou	t when anniving fo	or a sentic system inspection #	
Cor	ınty Health l	Debari	ment Application for	mnrovement	Downit and/ 1-41	
		411011	IO CONSTRUCT SHALL RE	I I IMAH IN VALUE	The manual is sull' I feet to the	n
dependin	910-893-7525	THE PARTY	initied. (Complete site plan =	60 months; Complete	te plat = without expiration)	
☑ En	vironmental H	lealth N	<i>lew Septic System</i> Code	800	CONFIRMATION #	_
•	All property	irons t	nust be made visible.	Place "pink prope	erty flags" on each corner iron of lot. All prope	
		Cicarry	nagged approximately ev	rery ou reer nerwa	een corners	
•	Place "orange	e house	corner flags" at each cou	ner of the propos	sed structure. Also flog driveweys	KS.
	out buildings,	SAAIIIIIII	ing pools, etc. Place flac	is per site plan de	eveloped at/for Central Pormitting	
•	If property is t	thickly v	vooded. Environmental E	lealth requires the	ily viewed from road to assist in locating property.  nat you clean out the <u>undergrowth</u> to allow the s	
	CAMINETION TO F	DC DCIII	nineu, inspectors snouic	I be able to walk	treely around site. Do not and a new	
•	All lots to be	auures	ssea witnin 10 business	davs after conf	firmation \$25.00 roturn trin for many by	ed
	TOT TUTTOTO	MIICUYE	a vullet ilu, mark noust	e corners and nr	conerty lines etc ance let confirmed medic	
	Aite preparing	y propo	seu site call the voice be	rmitting system a	at 910-893-7525 option 1 to schedule and use cool for Environmental Health inspection. Please no	de
	committation n	unibei	given at end of recording	for proof of reque	ect	<u>te</u>
•	Use Click2Gov	v or IVF	I to verify results. Once a	approved, procee	ed to Central Permitting for permits.	
LIIV	ii Oninentai ne	eann E	xisting lank inspection	<b>s</b> Code 800		
:	Prepare for in	Instructi	ions for placing flags and	card on property	<i>1</i> .	
-	possible) and t	then <b>n</b> u	it lid back in place (Uni	outlet end of ta	nk as diagram indicates, and lift lid straight up for a septic tank in a mobile home park)	(if
1. A. M.	DO MOL LEWAL	E LIDS (	OFF OF SEPTIC TANK			
•	After uncoverir	ng outle	et end call the voice per	mitting system at	910-893-7525 option 1 & select notification perm	nit
	i mulliple per	mus, u	ien use code <b>buu</b> for Ei	nvironmental Hea	alth inspection. Please note confirmation number	er
	given at end of	record	ing for proof of request.		to Central Permitting for remaining permits.	
If applying	ng for authorizati	ion to co	astruct please indicate desire	system type(s): ca	an be ranked in order of preference, must choose one.	
{}} Ac	cepted	{}}		Conventional	{}} Any	
{}} Al	ternative	{}}	Other			
The appli	cant shall notify				— plication if any of the following apply to the property i	
question.	If the answer is	s "yes",	applicant MUST ATTACE	SUPPORTING I	DOCUMENTATION:	n
}YES	1/100	Does t	he site contain any Jurisdic	tional Wetlands?		
}YES	(A) NO	Do yo	u plan to have an irrigation	system now or in th	he future?	
_}YES	NO	Does o	or will the building contain	any drains? Please	explain	
}YES	(),NO				Vastewater Systems on this property?	
_}YES	1_1)NO				other than domestic sewage?	
_}YES	(N) NO		site subject to approval by a			
_}YES	(_ <b>1</b> ) yo	Are the	ere any Easements or Right	of Ways on this pro	roperty?	
_}YES	{_ <b>v</b> } NO	Does th	ne site contain any existing	water, cable, phone	e or underground electric lines?	
		If yes	please call No Cuts at 800-	532-4949 to locate	the lines. This is a free service.	
Have Rea	d This Applicati				Is True, Complete And Correct. Authorized County And	d
					Determine Compliance With Applicable Laws And Rules	
Understa	nd That I Am So	olely Res	ponsible For The Proper Ide	ntification And Lab	peling Of All Property Lines And Corners And Making	
he Site A	ccessible So That	t A Com	plete Ste Evaluation Can Be	Performed.	1/1/	

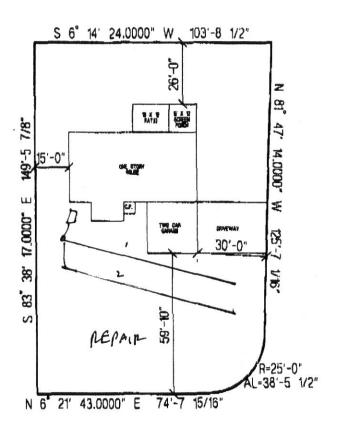
Mike Acres' work attached

10/10

SOUTHEASTERN SOIL & ENVIRONMENTAL ASSOC., INC.

## PROPOSED SUBSURFACE WASTE DISPOSAL SYSTEM DETAIL SHEET

SUBDIVISION CHICARA SEAS	<u> </u>	LOT /
INITIAL SYSTEM APPROVER 2	5% REPUETION	REPAIR TOO
DISTRIBUTION D-BOX	<u> </u>	DISTRIBUTION TRO
BENCHMARK 100.0		LOCATION TOPOF WV MARKER
NO. BEDROOMS 3	9	PROPOSED LTAR O. 8 GPO/FT
LINE FLAG COLOR	ELEVATION	LENGTH (FT)
1 P	100.84	75'
BY M Eaker		DATE 603/2013
TYPICAL PROFILE  0-48 LS/SC VFr, ms  C/ 2 748"  INSTANCAT 24"		



WILDWOOD WAY

CRAFTSMEN CONSTRUCTION
LOT # 1 CAROLINA SEASONS
THE BRENTWOOD WITH SCREEN PORCH
SCALE: 1"=40'

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

## Application # <u>13-50030689</u>

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

## Application for Residential Building and Trades Permit

1	74) 10000 00 4000 10 4	
Owner's Name: Jaksuer Con	Mr. Since	
	0	Date:07/18/13
		Phene: 910-891-4345
Directions to job site from Lillington: 27 U	frail dill	1.61 (50)
School Id TR ON Pande	rosa Id P	on consonville
1 0		15) INO 3/10
Subdivision: Carolina Seas	er on right	* Back Section*
, , , , , , , , , , , , , , , , , , , ,	ens	Lot: /
Description of Proposed Work: \\ \ 5\forall \]		# of Bedrooms: 3
Heated SF: 1794 Unheated SF: 4847 Fir	nished Bonus Room?	A/: 0 10
286 Bonus General	Contractor Informati	<u>∕∕o_</u> Crawl Space: Slab: <u></u>
LUMBERIAND HOMES VIC		910-892-4345
Building Contractor's Company Name		Telephone
1.0. Box 727 Dund 1	C 28335	20 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Address	· COUNT	mail Address
2		59493
Signature of Owner/Contractor/Officer(s) of Corp	oration	license #
Description of Work New Resident	Contractor Informati	on
Description of Work West Residents	Service Size	Amps T-Pole: YesNo
Wester & Pace Elec	tric	919-499-5389
Electrical Contractor's Company Name	1 1 1	Telephone
546 Leslie Dr. Santo	rd NC	NA
Address		Email Address
Willia Waster		12007-11
Signature of Owner/Contractor/Officer(s) of Corpo	oration	License #
	AC Contractor Inform	nation
Description of Work New Residentia	al	1.0+1+10
Interrated DISTERNS of the Trian	de LLC	Telephone  Email Address  TSAT
Mechanical Contractor's Company Name		Telephone
101 ACC Blid Rafeit AC	22617	Heating
Address		Email Address
Todal 6		18429
Signature of Own Contractor/Officer(s) of Corpo	ration	icense #
Plumbing C	ontractor Informatio	<u>n</u>
Description of Work New Residen	Hial	_# Baths
Curtis Faircloth Plumbing	× ×	910-531-3111
Plumbing Contractor's Company Name		Telephone
5056 Elizabethour Hur.	Passaro, NC	*
Address	10,00	Email Address
Centis Fainclothe		7169
Signature of Owner/Contractor/Officer(s) of Corpor	ation	License #
Insulation Co	ontractor Information	1
101-City Wouldtim 418	Person St.	910-486-8855
nsulation Confractor's Company Name & Address	Tax NC	Telephone
,	7/	21 88

Homeowners Applying to Build Their Own U
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.
Have you hired or intend to hire an individual to superintend and     manage construction of the project?
3. Do you intend to directly control & supervise and to directly c
Do you intend to schedule, contract, or directly pay for all phases of construction work to be done?  Yes No
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
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 Floatiest St.
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 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.
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
Has three (3) or more employees and has obtained workers' compensation insurance to cover them.
them. Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover
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: Lumberland Apres Pur
Sign w/Title

Application #_	
pp	

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 910-893-2793 - www.harnett.org/permits
Certification of Work Performed By Owner/Contractor (Individual Trade Application)

Owner (s	) of Structure:Phone: 910 - 892 - 0	4345
Owner (s	) Mailing Address: P.O. Box 727 Dunn, NC 28.	335
Land Ow	ner Name (s):Phone:Phone:	2-439
Construct	tion or Site Address Not # Carolina Seasons.	
ا <b>ک</b> # PIN	ee land use Parcel# See land use	
Job Cost:	Description of Work to be done	
Mechanic	cal: New Unit With Ductwork New Unit Without Ductwork Gas Piping Ot	her
Electrical	*: 200 Amp <200 Amp Service Change Service Reconnect Other * For Progress Energy customers we need the premise number	
Plumbing	: Water/Sewer Tap Number of Baths Water Heater	
Specific [	Directions to Job from Lillington:  See land use	
Cubdivisi	on: Carolina Seasons. Lot#:	
Certi	And Lating Mill provide the Africal (Trade)	ture.
	building owner or my NC state license number is 200/2, which entitles m	
	such work on the above structure legally. All work shall comply with the State Building (	Code and
other app	olicable State and local laws, ordinances and regulations.	
Contractor P.O. 2 Address Address	Telephone  Sex 1071 Hope XI:lls, NC 28348  Email Address	20
	Owner / Contractor Signature:	8/13
By signin	g this application you affirm that you have obtained permission from the above listed lic	ense hold

purchase permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or sell the listed property for 12 months after completion of the listed work.

13 500 30689 SEMETT SUNCEYS
1602 CARE BLALLELINGUALING. 27046 8 0514'14'W 09.82 "PONDEROSA TRAIL" 50' R/W 1 SLIF H SPECIET JG costing House Foundation FOURDATION LOCKTON SURVEY — LOT — 1 CAROLINA SEUGONS SYD,PHASE—2, SECTION—2 JUNE TO 2013 0 OATE 0.35 AC. 4pplication - 13500 30889 Ī "YAW GOOWQJIW" OF RECORDER SEPTION TOOK CASTER MAP NO. 2009-458-440