

Initial Application Date: 4-10-13

Application # 13-50030691 R

CU# \_\_\_\_\_

**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.harnett.org/permits

LANDOWNER: Silverado Homes, LLC Mailing Address: P.O. Box 727

City: Dunn State: NC Zip: 28335 Contact # 910-892-4345 Email: \_\_\_\_\_

APPLICANT\*: Cumberland Homes, Inc. Mailing Address: P.O. Box 727

City: Dunn State: NC Zip: 28335 Contact # 910-892-4345 Email: joannorris@centurylink.net

\*Please fill out applicant information if different than landowner  
CONTACT NAME APPLYING IN OFFICE: Joan Norris Phone # 910-892-4345

PROPERTY LOCATION: Subdivision: Carolina Seasons Lot #: 115 Lot Size: .34 Acre

State Road # 1201 State Road Name: Ponderosa Rd Map Book & Page: 2009, 96

Parcel: 09956703 000658 PIN: 9556-69-6717.000

Zoning: RA20R Flood Zone: X Watershed: NA Deed Book & Page: 2581, 811 Power Company: CEMC

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

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Take 27 West From Lillington, (TR) on Johnsonville School Road, (TR) on Ponderosa Rd, (R) into S/D; dot on left

**PROPOSED USE:**

SFD: (Size \* x \*) # Bedrooms: \* # Baths: \* # Basement(w/w bath) NA 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/w 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

Structures (existing or proposed): Single family dwellings:  Manufactured Homes: \_\_\_\_\_ Other (specify): \_\_\_\_\_

Required Residential Property Line Setbacks:	Comments:
Front Minimum <u>35</u> Actual <u>60'-0"</u>	_____
Rear <u>25</u> <u>49'-10"</u>	_____
Closest Side <u>10</u> <u>20'-9"</u>	_____
Sidestreet/corner lot <u>20</u> <u>30'-0"</u>	_____
Nearest Building on same lot <u>NA</u> _____	_____

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

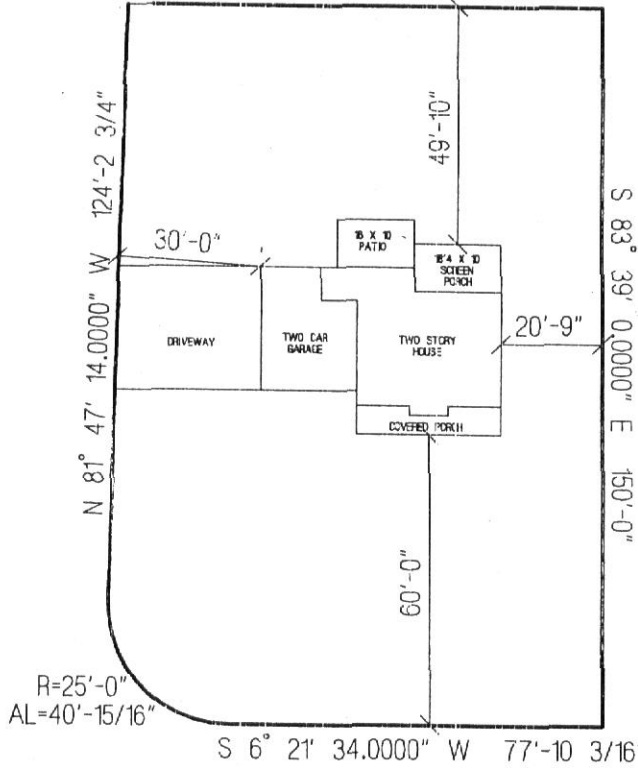
\_\_\_\_\_  
Date

**\*\*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

N 6° 4' 24.0000" E 5'-4 15/16" N 6° 20' 45.0000" E 93'-4 9/16"



R

FINAL APPROVAL

RAZOR USE SED

RECORDED

4-10-13

Zoning Administrator

WILDWOOD WAY

SILVERADO HOMES, LLC.  
LOT # 115 CAROLINA SEASONS  
THE CHARLESTON WITH SCREEN PORCH  
SCALE: 1"=40'

\*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.

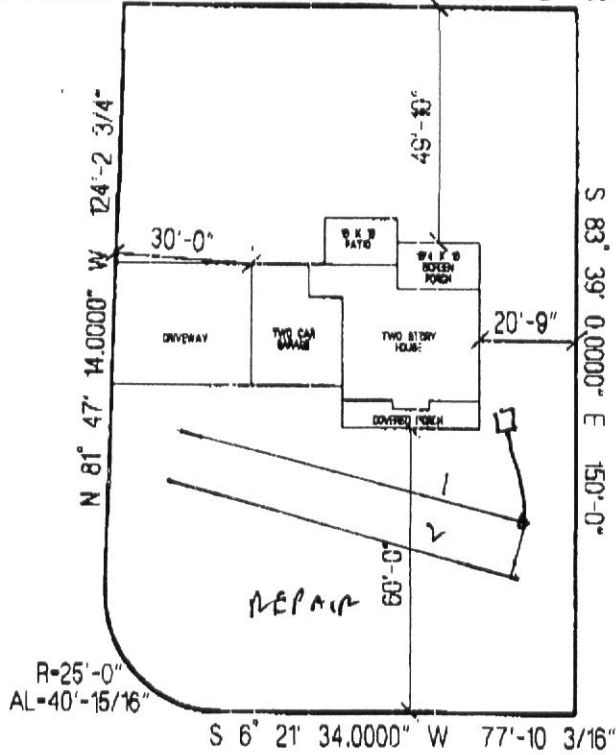
[Signature]  
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

4/8/13  
DATE

*\*Dike Acres' work Attached*



N 6° 4' 24.0000" E 5'-4 15/16" N 6° 20' 45.0000" E 93'-4 9/16"



WILDWOOD WAY

**SILVERADO HOMES, LLC.**  
**LOT # 115 CAROLINA SEASONS**  
**THE CHARLESTON WITH SCREEN PORCH**  
**SCALE: 1"=40'**

## Jennifer Brock

---

**From:** Graham Byrd  
**Sent:** Thursday, April 11, 2013 9:33 AM  
**To:** Jennifer Brock  
**Subject:** Cumberland Homes Re: Lots 10 & 11 Carolina Seasons

Jenifer: I is ok to transfer the fees paid for lots 10 & 11 to lots 89 & 115 for Cumberland Homes per Bryan McSwain. Susan requested that you scan a copy of this e-mail into the new application file. Thanks. GHB.

*Graham H. Byrd R.E.H.S*

Environmental Health Supervisor

Environmental Health Section

Harnett County Department of Public Health

Phone: 910-893-7547

Fax: 910-893-9371

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

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

Application # 13-50030691

**Application for Residential Building and Trades Permit**

Owner's Name: Silverado Homes, LLC Date: 2/18/13  
Site Address: Lot #115 Carolina Seasons Phone: 910-892-4345  
Directions to job site from Lillington: 27 W from Lillington, (TR) on Johnsonville School Rd, (TR) on Panderosa Rd, (TL) into S/D, Lot on Left  
Subdivision: Carolina Seasons Lot: 115  
Description of Proposed Work: NSF # of Bedrooms: 3  
Heated SF: 1979 Unheated SF: 469 Finished Bonus Room? Yes Crawl Space:      Slab:

**General Contractor Information**

Cumberland Homes, Inc. 910-892-4345  
Building Contractor's Company Name Telephone  
P.O. Box 727 Dunn, NC 28335  
Address Email Address joannorris@centurylink.net  
[Signature] 59493  
Signature of Owner/Contractor/Officer(s) of Corporation License #

**Electrical Contractor Information**

Description of Work New Residential Service Size: 200 Amps T-Pole:  Yes  No  
Wester & Pace Electric 919-499-5389  
Electrical Contractor's Company Name Telephone  
546 Leslie Dr. Sanford, NC N/A  
Address Email Address  
William Wester 12007-U  
Signature of Owner/Contractor/Officer(s) of Corporation License #

**Mechanical/HVAC Contractor Information**

Description of Work New Residential  
Integrated Systems of the Triangle, LLC 919-957-1478 Certified Heating & Air  
Mechanical Contractor's Company Name Telephone  
107 ACC Blvd Raleigh, NC 27617  
Address Email Address  
[Signature] 18129  
Signature of Owner/Contractor/Officer(s) of Corporation License #

**Plumbing Contractor Information**

Description of Work New Residential # Baths 2 1/2  
Curtis Faircloth Plumbing 910-531-3111  
Plumbing Contractor's Company Name Telephone  
5056 Elizabethwood Hwy. Roseboro, NC  
Address Email Address  
Curtis Faircloth 7269  
Signature of Owner/Contractor/Officer(s) of Corporation License #

**Insulation Contractor Information**

Tri-City Insulation 418 Person St. 910-486-8855  
Insulation Contractor's Company Name & Address Telephone  
Fay, NC

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

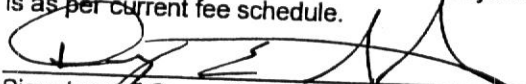
### Homeowners Applying to Build Their Own Home

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.

**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.

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

2/18/13  
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: Cumberland Homes, LLC

Sign w/Title:  (Owner)

Date: 2/18/13



Application # 13-50030691

**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: Silverado Homes, LLC. Phone: 910-892-4345

Owner (s) Mailing Address: P.O. Box 727 Dunn, NC 28335

Land Owner Name (s): Silverado Homes, LLC. Phone: 910-892-4345

Construction or Site Address: Lot #115 Carolina Seasons.

PIN # see land use Parcel # see land use

Job Cost: \_\_\_\_\_ Description of Work to be done \_\_\_\_\_

Mechanical: New Unit With Ductwork  New Unit Without Ductwork \_\_\_\_\_ Gas Piping \_\_\_\_\_ Other \_\_\_\_\_

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

Subdivision: Carolina Seasons. Lot #: 115

I Certified Heating & Air will provide the mechanical labor on this structure.  
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 20012, which entitles me to perform such work on the above structure legally. All work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations.

Certified Heating & Air, LLC  
Contractor's Company Name  
P.O. Box 1071 Hope Mills, NC 28348  
Address  
20012  
License #

910-818-0600  
Telephone  
N/A  
Email Address

Structure Owner / Contractor Signature: [Signature] Date: 4/8/13

By signing this application you affirm that you have obtained permission from the above listed license holder to 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.

\*Company name, address, & phone must match information on license

