

Initial Application Date: 2/22/13

DATE

Application # 1350030742

11-12-15

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: STANCIL BUILDERS, INC. Mailing Address: 466 STANCIL Rd.
City: ANGIER State: NC Zip: 27501 Contact No: _____ Email: _____

APPLICANT: STANCIL BUILDERS, INC. Mailing Address: 466 STANCIL Rd.
City: ANGIER State: NC Zip: 27501 Contact No: _____ Email: _____

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Richard DENNING Phone # 919-291-6240

PROPERTY LOCATION: Subdivision: PATTON'S POINTE Phase II Lot #: 137 Lot Size: 1.03
State Road # _____ State Road Name: 130 Humvec Ct. Map Book & Page: 2008, 150
Parcel: 039597 0225 1B PIN: 9597-52-3052.000
Zoning: RA20R Flood Zone: X Watershed: NA Deed Book & Page: 2271 / 860 Power Company*: CENTRAL ELECT.

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

PROPOSED USE:

SFD: (Size 45 x 42) # 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

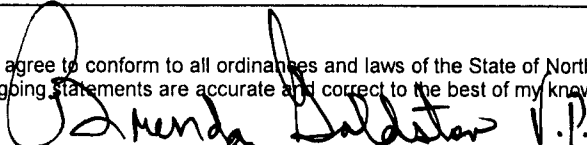
Does the property contain any easements whether underground or overhead () yes no

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

Required Residential Property Line Setbacks: Comments: Revision - NO Fee, moved house
Front Minimum 35 Actual 48 36+
Rear 25 45 25+
Closest Side 10 27 28+
Sidesreet/corner lot _____
Nearest Building on same lot _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: _____

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 of Owner or Owner's Agent

4-21-13
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****

CURVE	RADIUS	LENGTH	DELTA	CHORD	CH.BEARING
C-1	50.00'	40.00'	45°50'32"	38.95'	N 20°01'50"W

NOTES

NOT AN ACTUAL SURVEY
 PIN #9597-52-3052.000
 ZONED R-30
 THIS LOT IS NOT LOCATED IN
 A FLOOD HAZARD AREA PER
 F.E.M.A. MAP #3710958600J
 EFF. DATE: 10/3/2006 ZONE X

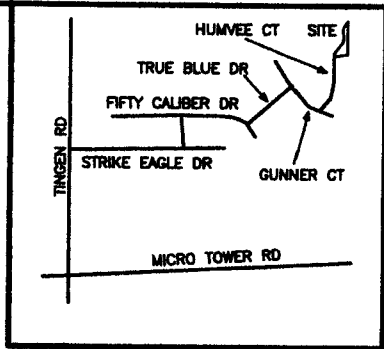
MELVIN MOORE
 D.B. 1076 PG. 827

SETBACKS

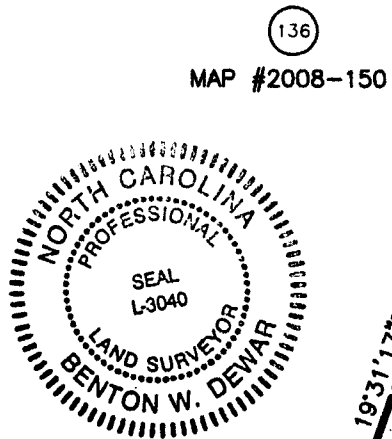
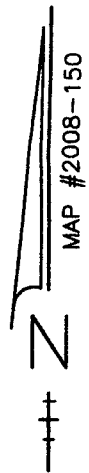
FRONT - 35'
 SIDE - 10'
 REAR - 25'

IMPERVIOUS CALCULATIONS

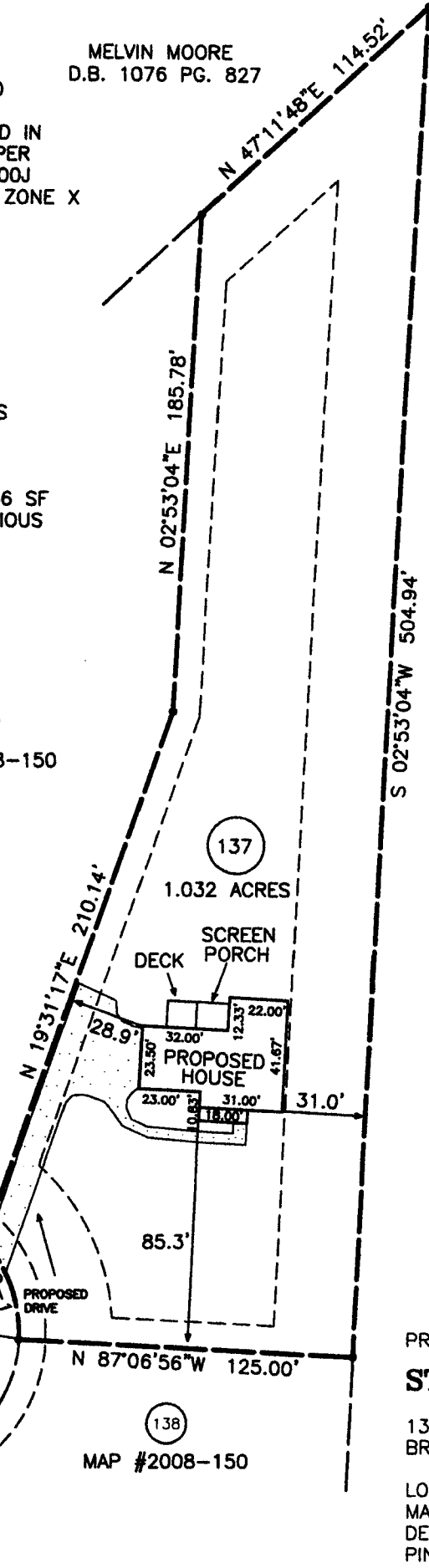
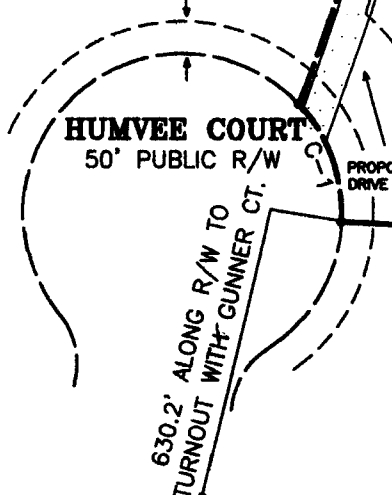
HOUSE - 1,946 SF
 DRIVE - 2,100 SF
 TOTAL PROPOSED - 4,046 SF
 9.00% PROPOSED IMPERVIOUS



VICINITY MAP NTS



10' UTILITY EASEMENT



THOMAS IRWIN
 D.B. 1237 PG. 179

PROPOSED PLOT PLAN FOR:
STANCIL BUILDERS, INC.

130 HUMVEE COURT
 BROADWAY, NC 27505

LOT 137 PATTON'S POINT - PH. 2
 MAP #2008-150
 DEED BOOK 2271 PG. 860
 PIN #9597-52-3052.000
 BARBECUE TOWNSHIP
 HARNET COUNTY - NORTH CAROLINA
 SCALE: 1" = 60' OCT. 8, 2014

I, BENTON W. DEWAR CERTIFY THAT THIS PLAT WAS DRAWN UNDER MY SUPERVISION FROM AN ACTUAL SURVEY MADE UNDER MY SUPERVISION; THAT THE RATIO OF PRECISION IS 1: N/A THAT THE BOUNDARIES NOT SURVEYED ARE SHOWN AS BROKEN LINES PLOTTED FROM INFORMATION FOUND IN BOOK MAP # 2008 PAGE 150; THAT THIS PLAT DOES NOT MEET SIZE REQUIREMENTS

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 Stancil Builders Inc. Date _____
Site Address 130 Hummer Ct. Broadway NC 27505 Phone (919) 639-2073
Directions to job site from Lillington Take Hwy 27W to left on Singer Road
Subdivision down on left.

Subdivision Pattano Point Lot 137
Description of Proposed Work Single Family Dwelling # of Bedrooms 3
Heated SF 1529 Unheated SF _____ Finished Bonus Room? Crawl Space Slab _____

General Contractor Information

Stancil Builders Inc. (919) 639-2073
Building Contractor's Company Name Telephone
466 Stancil Road Angier NC 27501 wendydorman@embargo.com
Address Email Address
34533
License #

Electrical Contractor Information

Description of Work SFD Service Size 200 Amps T-Pole Yes ___ No
Ins Electrical
Electrical Contractor's Company Name Telephone
19655 NC 210 Hwy Angier NC 27501
Address Email Address
13075-L
License #

Mechanical/HVAC Contractor Information

Description of Work SFD
Stephenson Heating & Air Inc. (919) 329-0686
Mechanical Contractor's Company Name Telephone
343 Shipwash Dr. Garner NC 27529
Address Email Address
18644
License #

Plumbing Contractor Information

Description of Work SFD # Baths 2
Barnes Plumbing Inc. (919) 422-2133
Plumbing Contractor's Company Name Telephone
239 Millwood Lane Angier NC 27501
Address Email Address
P17735
License #

Insulation Contractor Information

Latitude Insulation II Inc. (919) 661-0999
Insulation Contractor's Company Name & Address Telephone
519 Old Drug Store Rd., Garner NC 27529

*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

Dorinda Boldston V.P.
Signature of Owner/Contractor/Officer(s) of Corporation

7-14-16
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 Stancil Builders Inc.
Sign w/Title Dorinda Boldston V.P. Date 7-14-16