

Initial Application Date: 08 MAR 13

Application # 1350030800

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

Owner: Eddle Communities

"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION"

Buyer: UNUSUAL CONTRACT
LANDOWNER: ZANE AND SHEILA KEEN

Mailing Address: _____

City: _____ State: _____ Zip: _____ Contact No: _____ Email: _____

APPLICANT: GUEST DEV. CO./HOWELL EDWARDS Mailing Address: P.O. Box 2121

City: DUNN State: N.C. Zip: 28335 Contact No: 910-591-8703 Email: KE70@INTKSTAR.NET

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: HOWELL EDWARDS Phone # 910-591-8703

PROPERTY LOCATION: Subdivision: ERNESTINE O'QUINN SUITT SUB. Lot #: A Lot Size: 10.01

State Road # 1129 State Road Name: CLARK RD. Map Book & Page 2005 / 951

Parcel: 13 0527 0030 PIN: 0527-08-4477.000

Zoning: RA-30 Flood Zone: NO Watershed: NO Deed Book & Page: 2171, 865 Power Company*: _____

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

PROPOSED USE:

SFD: (Size 110 x 102) # Bedrooms: 4 # Baths: 2 1/2 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 25 40 x _____) Use: Workshop 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:

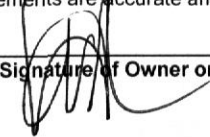
Front	Minimum	<u>35</u>	Actual	<u>170</u>
Rear		<u>25</u>		<u>500</u>
Closest Side		<u>10</u>		<u>80</u>
Sidestreet/corner lot				
Nearest Building on same lot				

Comments: 110 X 102 SIZE INCLUDES WORKSHOP, PARK PAD, FUTURE POOL

REF # 1350030800 Workshop

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: HWY 27 FROM LILL. TURN LEFT
S.R. 1129 CLARK RD., SITE ON RIGHT.

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.



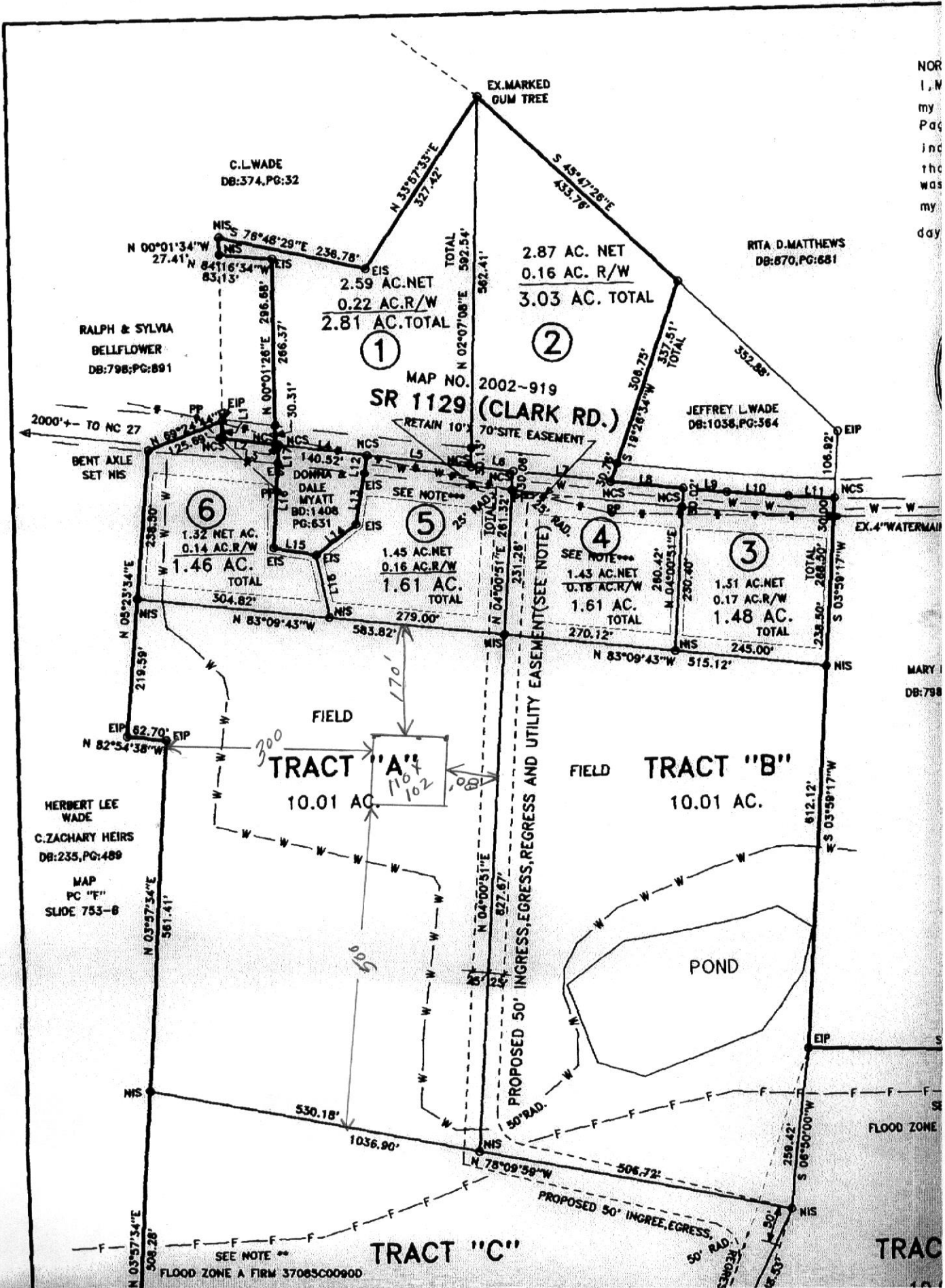
Signature of Owner or Owner's Agent

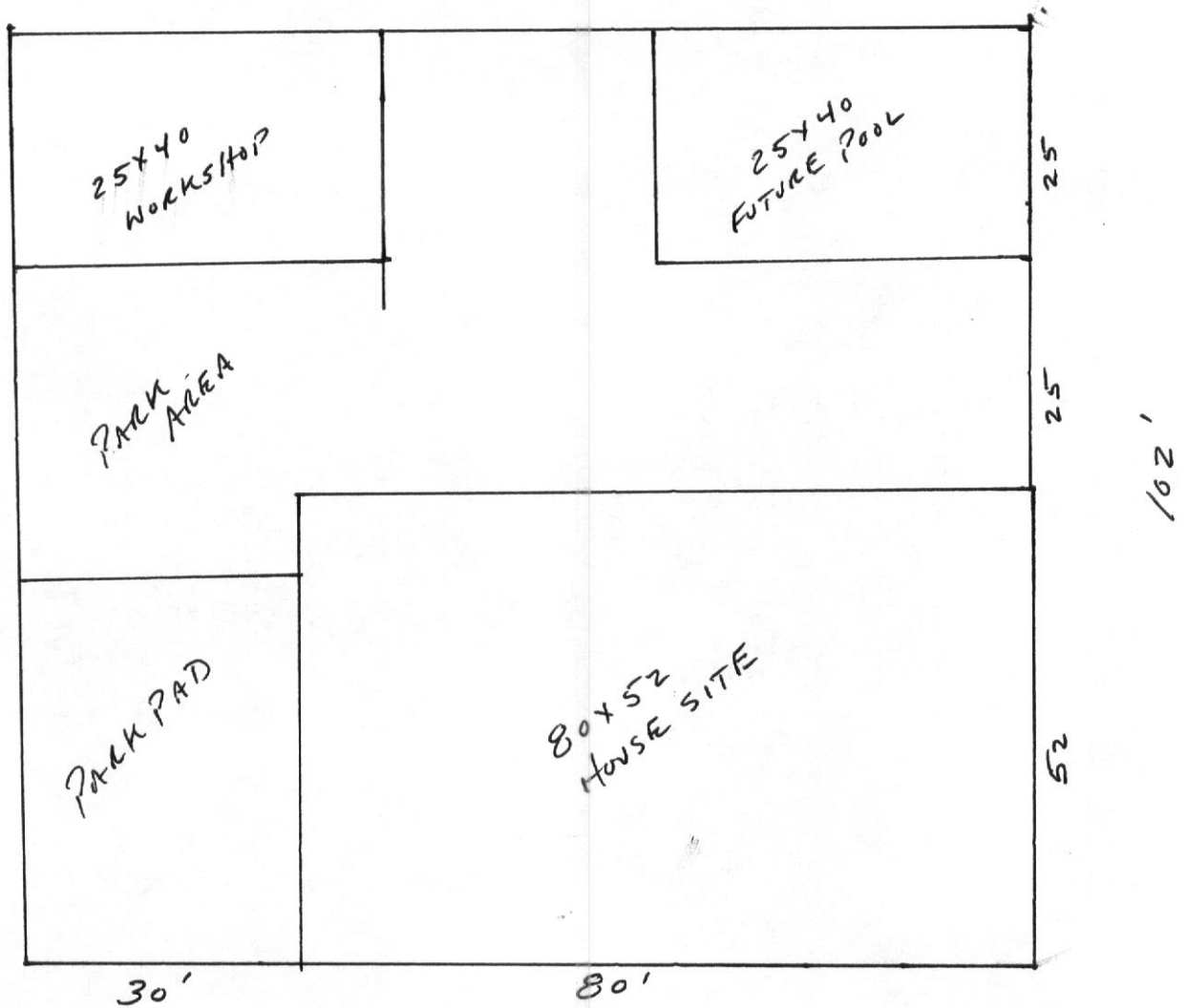
08 MAR 13
Date

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

⊗ SITE DETAIL ON BACK





1" = 20'

QUEST DEVELOPMENT

NAME: HOWELL EDWARDS

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 _____

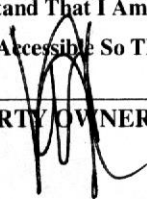
The applicant shall notify the local health department upon submittal of this application if any of the following apply to the property in question. If the answer is "yes", applicant **MUST ATTACH SUPPORTING DOCUMENTATION**:

- 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.

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)



08 MAR 13
DATE

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 ZANE + SHELLA KEEN Date 08 MAR 13

Site Address CLARK RD. LILL. NC. Phone 910-591-8703

Directions to job site from Lillington HWY 27 W TO CLARK RD. TURN LEFT
SITE ON RIGHT

Subdivision N/A Lot TRACT "A"

Description of Proposed Work SINGLE FAML HOME # of Bedrooms 4

Heated SF 3176 Unheated SF 720 Finished Bonus Room? Crawl Space Slab

General Contractor Information

THE QUEST DEVELOPMENT CO. OF DUNN INC.
Building Contractor's Company Name
P.O. 2121 DUNN NC 28335
Address
60521
License #

910-591-8703
Telephone
KE70@INTRSTAR.NET
Email Address

Electrical Contractor Information

Description of Work NEW ELECTRIC Service Size 400 Amps T-Pole Yes No

ADKINS ELECTRIC
Electrical Contractor's Company Name
5819 OLD STAGE RD. RALIEGH NC 27603
Address
206945
License #

919-524-0026
Telephone
N/A
Email Address

Mechanical/HVAC Contractor Information

Description of Work NEW HEAT PUMPS
JAM HEATING + AIR
Mechanical Contractor's Company Name
724 TURLINGTON RD. DUNN NC 28334
Address
17164
License #

910-897-5501
Telephone
N/A
Email Address

Plumbing Contractor Information

Description of Work NEW PLUMB # Baths 2 1/2
STEVEN STANLEY PLUMBING LLC
Plumbing Contractor's Company Name
2287 PARKERTOWN RD. FOUROAKS NC 27254
Address
20013
License #

919-291-5648
Telephone
N/A
Email Address

Insulation Contractor Information

TRI-CITY INSULATION 1643 WILMINGTON RD. FAY N.C.
Insulation Contractor's Company Name & Address

910-486-8855
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

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

Date

08 MAR 13

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 The Quest Development Co. of Duna Inc.

Sign w/Title  PRES. Date 08 MAR 13

ADDRESS : : 378 CLARK RD SUBDIV:
CONTRACTOR : QUEST DEVELOPMENT PHONE : (910) 567-4686
OWNER : CUMMINGS EDD LEWIS PHONE :
PARCEL : 13-0527- - -0030- - -
APPL NUMBER: 13-50030800 CP NEW RESIDENTIAL (SFD)
DIRECTIONS : T/S: 03/08/2013 01:07 PM JBROCK
HWY 27 FROM LILLINGTON L TO CLARK RD
SITE ON R

STRUCTURE: 000 000 110X102 4BDR CRAWL W/ GARAGE & DECK
FLOOD ZONE : FLOOD ZONE X
BEDROOMS : 4000000.00 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	5/03/13 <u>5-3-13</u>	TI <u>AP-MR</u>	R*BLDG FOOTING / TEMP SVC POLE VRU #: 002376618

COMMENTS AND NOTES
