Initial Application Date: 4/8/13 Application # 35003 05
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.barnett.org/permitting
Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/perm "A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION**
BUYER. LANDOWNER SILLOWING HOMES, L.C. Mailing Address: Same as below
City: // State: _/ Zip: _/' _ Contact No: // Email: //
APPLICANT*: Cuulberland Hours Inc. Mailing Address: P.O. Box 727 City: State: OC 710-28335 Contact No. 910 - 807 - 4345 Front Inc. 910 - 807
City:State:Zip:Zip:Zip:
CONTACT NAME APPLYING IN OFFICE: Linda or Cloan Phone # 910-892-4345
11 11 100 11 1 1 1
111707 211 1
State Road # 1431 State Road Name: Dallard Koad Map Book & Page: 2008; 359 Parcel: 080652 0089 01 PIN: 0652-20-1130, 000
Zoning: 2A - 30 Flood Zone: X Watershed: NA Deed Book & Page: 3067 / 45 Power Company*:
*New structures with Progress Energy as service provider need to supply premise number
PROPOSED USE: 18' 74
SFD: (Size 48 x 74) # Bedrooms: 3 # Baths Basement(w/wo bath) A Garage Peck: Crawl Space: Slab: Monolithi Slab: Sl
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
(to the second hoof limitation?) yes no yes no
Manufactured Home:SWDWTW (Sizex) # Bedrooms: Garage:(site built?) Deck:(site built?)
Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit:
□ Home Occupation: # Rooms: Use: Hours of Operation: #Employees:
Addition/Accessory/Other: (Sizex) Use:Closets in addition? () yes ()
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 (V) no
Structures (existing or proposed): Single family dwellings: Manufactured Homes: Other (specify):
Required Residential Property Line Setbacks: Comments:
Front Minimum 35 Actual 36'-0"
Rear 25 75'-0'
Closest Side
Sidestreet/corner lot
Nearest Building A/A on same lot
Residential Land Use Application Page 1 of 2 03/11

SPECIFIC DIRECTIONS TO THE PRO	DERTY FROM LILLINGTON: Take	· 401 N mit	of Tillians
(R) on Balla	perty from Lillington: Jake	iNto 5/D. , Ze	t on Right
*	×		·
Thereby state that foregoing statement	m to all ordinances and laws of the State of sare accurate and correct to the best of muture of Owner or Owner's Agent	of North Carolina regulating such work and by knowledge. Permit subject to revocation Date	the specifications of plans submitted if false information is provided.

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

Permit Copy S 65° 17' 56.0000" E 18 X 12 PATID 211'-3 15/16 21'-10" TWO CAR 36'-0" SITE PLAN APPROVAL AL=80'-4 9/16" R=286'-4 1/16" #BEDROOMS

JOSEPH ALEXANDER DRIVE

MILLENNIUM HOMES, LLC.
THE AVALON
LOT # 109 BALLARD WOODS
SCALE: 1"=40'

NAME:	MII (CNN)	un	Troues,	ac.	APPLICATION #:	
	•	*This	application to be fi	lled out when applying fo	r a septic system inspection.*	
Count	y Health D	epar	tment Application	on for Improvement F	ermit and/or Authoriza	tion to Construct
IF THE INF	ORMATION II	N THIS	S APPLICATION IS FA	ALSIFIED, CHANGED, OR T	THE SITE IS AT TERED THEN T	THE IMPROVEMENT
PERMIT OF	RAUTHORIZA	MOITA	TO CONSTRUCT SH	ALL BECOME INVALID. T	he permit is valid for either 60 mo	onths or without expiration
depending up	pon documentat 0-893-7525	tion sub	bmitted. (Complete site	e plan = 60 months; Complete	plat = without expiration)	
			n ı <u>New Septic Syste</u> i		CONFIRMATION #	
• Al	I property i	rone	must be made vi	<u>m</u> Code 800 eible Place "pink prene	rty flags" on each corner ir	
iin	es must be c	clearly	y flagged approxima	ately every 50 feet betwe	en corners.	
• Pla	ace "orange	house	e corner flags" at ea	ach corner of the proposi	ed structure. Also flag drive	ways, garages, decks,
• Pla	ace orange F	Enviro	ning pools, etc. Pia	ace flags per site plan de	veloped at/for Central Permi y viewed from road to assist	tting.
• if ;	property is th	nickly v	wooded, Environm	ental Health requires that	it you clean out the underg	rowth to allow the soil
ev	aluation to b	e perf	formed. Inspectors	should be able to walk f	reely around site. Do not gr	ade property.
• <u>Al</u>	l lots to be	<u>addre</u>	ssed within 10 bu	isiness days after conf	irmation. \$25.00 return trip	fee may be incurred
• Aff	r railure to u	Incov	er outlet lid, mark	house corners and pro	perty lines, etc. once lot	confirmed ready.
80	0 (after select	cting r	notification permit i	oice permitting system at if multiple permits exist) : cording for proof of reque	910-893-7525 option 1 to s for Environmental Health ins	chedule and use code spection. <u>Please note</u>
• Us	e Click2Gov	or IVI	R to verify results	Once approved proceed	to Central Permitting for pe	rmite
□ Enviro	onmental He	alth E	Existina Tank Insu	pections Code 800	Tio Central Lenning for pe	minis.
• Fo	llow above in	nstruc	tions for placing fla	gs and card on property.		
Pre	epare for ins	pection	on by removing so	il over outlet end of tar	nk as diagram indicates, an	d lift lid straight up (if
po	ssible) and th	nen pi	ut lid back in plac	e. (Unless inspection is f	or a septic tank in a mobile i	home park)
			OFF OF SEPTIC TA			
if r	er uncoverin multiple pern	g out	hen use code 800	to permitting system at	910-893-7525 option 1 & se lth inspection. <u>Please note</u>	lect notification permit
gìv	en at end of	record	ding for proof of red	ouest	un inspection. Please note	confirmation number
• Us	e Click2Gov	or IVF	R to hear results. C	nce approved, proceed t	to Central Permitting for rem	aining permits
SEPTIC						
				,	n be ranked in order of preferenc	e, must choose one.
{}} Accep				⟨✓⟩ Conventional	{}} Any	
{}} Altern			Other		-	
The applicar	nt shall notify	the loc	cal health department	t upon submittal of this app	lication if any of the following	apply to the property in
question. II	the answer is	"yes",	, applicant MUST A	TTACH SUPPORTING I	OCUMENTATION:	
}YES	(N) NO	Does	the site contain any.	Jurisdictional Wetlands?		
_}YES	(NO	Do yo	ou plan to have an <u>irr</u>	igation system now or in th	e future?	
}YES	NO	Does	or will the building	contain any drains? Please	explain	
}YES	{ \L },NO	Are th	here any existing wel	lls, springs, waterlines or W	astewater Systems on this prop	perty?
}YES	(T) NO	Is any	y wastewater going to	be generated on the site of	her than domestic sewage?	
}YES	NO	Is the	site subject to appro	val by any other Public Age	ency?	
}YES	(A) NO	Are th	here any Easements o	or Right of Ways on this pro	operty?	
_}YES	{ ▼ } NO	Does	the site contain any e	existing water, cable, phone	or underground electric lines?	
		If yes	s please call No Cuts	at 800-632-4949 to locate t	the lines. This is a free service.	
Have Read	This Application	on And	d Certify That The Inf	formation Provided Herein Is	s True, Complete And Correct.	Authorized County And
					etermine Compliance With App	
Understand	That I Am Sol	lely Re	sponsible For The Pro	oper Identification And Labe	eling Of All Property Lines And	Corners And Making
			mplete Site Evaluation			
	22		///	1		4/8/13
KOPERT	OWNERS (OR OV	WNERS LEGAL RI	EPRESENTATIVE SIGN	ATURE (REQUIRED)	'DATE

Wike Acres work attached







Southeastern Soil & Environmental Assoc., Inc PO Box 9321 Fayetteville, NC 28311

910-822-4540 Fax Number

www.southeasternsoil.com Email: Mike@southeasternsoil.com

FAX TRANSMITTAL FORM

TO: PANNY NOBIZIS

Name:

CC:

Phone:

Fax:

From: MIKE EAKER

Date Sent: 2

Number of Pages:

Message:

DANNY

I OURMAID THE AUGUEN (48'X72'). THE JOILS

AND HEAVY CLAY. IT MAY FIT (BUT IT IS

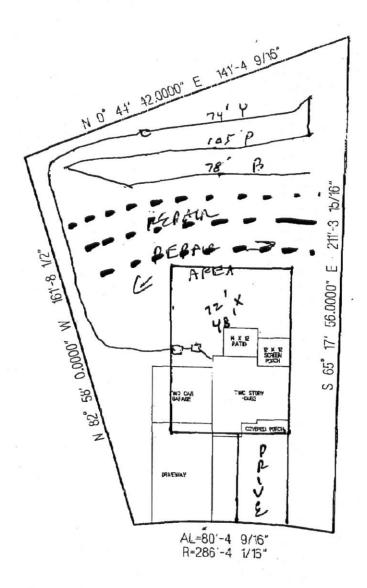
PLAKEY TIGHT). I MAY NEED TO PUT JOME

PRETREATMENT ON THE REPAIR. YOU CAN PROPOSE

IT & UST MG LAYOUT AFTER THE HOUSE H

(TAKED AND LOT IS CLEANED!

MIKEE



JOSEPH ALEXANDER DRIVE

TOM NELSON & DANNY NORRIS THE CAPE WITH SCREEN PORCH LOT # 109 BALLARD WOODS SCALE: 1"=40' SOUTHEASTERN SOIL & ENVIRONMENTAL ASSOC., INC.

PROPOSED SUBSURFACE WASTE DISPOSAL SYSTEM DETAIL SHEET

	SUBDIVISION BALLMA WOODS INITIAL SYSTEM PUMP TO APPROVED DISTRIBUTION SEALAL BENCHMARK 100.0 NO. BEDROOMS 3 LINE FLAG COLOR E	LEVATION	LOT (69 REPAIR T80 DISTRIBUTION T80 LOCATION (700 LINE PROPOSED LTAR 0,35 400/F74 LENGTH (FT)
nital spoken	\(\frac{1}{2} \frac{1}{3} \fr	100.25	74' (165' 78' 257'
	BY M FOKE- TYPICAL PROFILE 0-12 LS /VF- wg-) 12-40+ Schy (F., wbk) C1 2 736" 1W-TAC AT 18"		DATE 3/8/13

Southeastern Soil & Environmental Associates, Inc.

Fayetteville, NC 28311 Phore/Fax (910) 822-4540 Email mike @southeasternsoil.com

MEMO (3/12/2013)

To: Danny Norris

From: Mike Eaker

Re: Ballard Woods Evaluations (Lots 1, 109, 144, 150 & 152)

I have evaluated the lots and existing consultant septic proposals as you requested. Recommendations are as follows:

- 1) Lot 1 appears to have sufficient space to support a 3 bedroom home (typical 40' x 60' box). We will need to complete a septic design once you decide on a house plan and get the lot surveyed (I could not find any corners). The health department has not previously evaluated this lot.
- 2) Lot 144 will work with the Brentwood II. I agree with the design and refreshed the flagging provided by Central Carolina soil.
- 3) Lot 150 will not work with the Avalon (it is too deep). The maximum house depth for this lot is 50 feet (width wont really matter). I agree with the design and refreshed the flagging provided by Central Carolina soil. Please submit a plot plan with a house no deeper than 50 feet.
- 4) Lot 152 will work with the Manchester II (as long as it fits in the sketch shown by Central Carolina; there was no plot plan attached from you). I agree with the design and refreshed the flagging provided by Central Carolina soil.

5) Lot 109 will work with the Cape. I have amended the design and refreshed the flagging provided by Chandler soil (see attached).

Let me know if you have questions!

	CONTRACT TO PURCHASE
	This contract, made and entered into this 15 day of warch 1013 by and between Took as SELLER, and will environ Joseph as BUYER.
	WITNESSETH
	THAT SELLER hereby contracts to sell and convey to BUYER, and BUYER hereby contracts to purchase from SELLER, the following described residential building lot/s, to wit:
	Being all of LOT/S 109 144, 150, 2 152 of the Subdivision known as 2009 a map of which is duly recorded in Book of Plats Map 2009 Page 285, Harnett County Registry.
	Price is \$ 21,000, payable as follows:
	Down Payment (payable upon execution of this contract): \$
	Balance of Sale Price (payable at closing): \$21,000
	1. The LOT/S shall be conveyed by SELLER to buyer by a General Warranty Deed free of all encumbrances other than taxes for the current year, which shall be prorated as of closing. The Deed shall be subject to all Restrictive Covenants, Utility Easements and applicable zoning ordinances on record at the time of closing.
	 Buyer acknowledges inspecting the property and that no representations or inducements have been made by SELLER, other than those set forth herein, and that the Contract contains the entire agreement between the parties.
	3. Closing (Final Settlement) is to take place not later than: the offices of Should BUYER fail to close, the SELLER, at his option, may retain the sum paid as a Down Payment upon the Purchase Price as liquidated damages and declare this Contract null and void and may proceed to resell the LOT/S to a subsequent Buyer.
	4. Other Conditions:
	Restrictive Covenants for subdivision are recorded in the Office of the Register of Deeds for County in Book or or a copy of which has been provided to Buyer.
	Building side lines shall be per plat unless otherwise controlled by governmental authority. Property has been surveyed by
	Buyer must submit house plans to SELLER for architectural conformity and Covenant approval prior to breaking ground.
	Additionally: will be closed when sediment ponds and/or dirt storage are removed
	IN WITNESS WHEREOF the parties have executed this contract this day 15 th of 2013.
_	To delay ()
2	BUYER

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

Application # _

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

Owner's Name: Villending Lones XIC	1/0/12
Site Address Sof # 109 Ballard 1 land	Date: 4/8//3
Maria Maria	Phone: 4/0-891-4345
Directions to job site from Lillington: 401 West out	at Zillington TR ON
Sollard Rd; (R) into S/D; 26	t on Richt
1	0
Subdivision: Baland Woods	Lot: 109
Description of Proposed Work:	
Heated SF: 2 532 Unheated SF: 19/ Finished Daws 5	# of Bedrooms: 3
Heated SF: 4 Sinished Bonus Room?	Crawl Space: Slab:
Lumberland Louis luc	
Building Contractor's Company Name	<i>910-892-4345</i> Telephone
P.O. Box 727 Durn, NC 28335	Joannorris Centurylink. net
Address	Smail Address
I Z	59493
Signature of Owner/Contractor/Officer(s) of Corporation	License #
Description of Work New Xesidestral Service Size:	
lelasta in Division dizer	Amps T-Pole: YesNo
Electrical Contractor's Company Name	919-499-5389
546 Leslie Dr. Saxford NC	Telephone
Address /	Email Address
When Wonder	13007-//
Signature of Owner/Contractor/Officer(s) of Corporation	License #
Mechanical/HVAC Contractor Inform	nation
Description of Work New Sincle Family Re	Sidentia.
Certified Heating & Air 110	910-818-11-00
Mechanical Contractor's Company Name	Telephone//
P.O. Box 1071 Hope Wills. NC 28348	N/A
Addresa	Email Address
Lary Parker	20012
Signature Contractor/Officer(s) of Corporation	License #
Description of Work New Residential	- 11/.
	# Baths 2 2
Plumbing Contractor's Company Name	910-531-3111
	Telephone
5056 Elizabethtown May, Raseboro, NC	Farail Add
Lustis Fainclothe	Email Address
Signature of Owner/Contractor/Officer(s) of Corporation	License #
Insulation Contractor Information	
	910-486-8855
Insulation Contractor's Company Name & Address	Telephone
	1000

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

Homeowners Applying to Build Their Own					
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)					
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?	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 consemonths following completion of construction and do you understand the you do not do so, it creates the presumption under law that you fraudule secured the permit?	at if				
·	res 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 Date					
Affidavit for Worker's Compensation N.C.G. The undersigned applicant being the:	S. 87-14				
General Contractor Owner Officer/Agent of the C	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:					
set forth in the permit:	oration(s) performing the work				
set forth in the permit: Has three (3) or more employees and has obtained workers' compensat					
out is a full discount.	tion insurance to cover them.				
Has three (3) or more employees and has obtained workers' compensate Has one (1) or more subcontractors(s) and has obtained workers' compensate.	tion insurance to cover them.				
Has three (3) or more employees and has obtained workers' compensate them. Has one (1) or more subcontractors(s) and has obtained workers' compensate them. Has one (1) or more subcontractors(s) who has their own policy of workers covering themselves. Has no more than two (2) employees and no subcontractors.	tion insurance to cover them. ensation insurance to cover ers' compensation insurance				
Has three (3) or more employees and has obtained workers' compensate them. Has one (1) or more subcontractors(s) and has obtained workers' compensate them. Has one (1) or more subcontractors(s) who has their own policy of worker 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 Department issuing the permit may require certificates of coverage of worker's for issuance of the permit and at any time during the permitted work from any pecarrying out the work.	ensation insurance to cover them. ensation insurance to cover ers' compensation insurance				
Has three (3) or more employees and has obtained workers' compensate them. Has one (1) or more subcontractors(s) and has obtained workers' compensate them. Has one (1) or more subcontractors(s) who has their own policy of workers 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 Department issuing the permit may require certificates of coverage of worker's for issuance of the permit and at any time during the permitted work from any permi	ensation insurance to cover them. ensation insurance to cover ers' compensation insurance				

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 13-50031057 Date 4/29/13 Property Address 238 JOSEPH ALEXANDER DR PARCEL NUMBER . . 08-0652- - -0089- -01-Application type description CP NEW RESIDENTIAL (SFD) Subdivision Name BALLARDS WOODS PH 4A Property Zoning RES/AGRI DIST - RA-30 Owner Contractor ______ ______ NELSON THOMAS W CUMBERLAND HOMES INC NELSON LORRAINE B WIFE 3075 AB CARTER ROAD PO BOX 727 DUNN NC 28335 FAYETTEVILLE NC 28312 (910) 892-4345 Applicant -----CUMBERLAND HOPMES #109 PO BOX 727 DUNN NC 28335 (910) 892-4345 --- Structure Information 000 000 48X74 3BDR SLAB W/ GARAGE Flood Zone FLOOD ZONE X Other struct info # BEDROOMS PROPOSED USE 3000000.00 SFD SEPTIC - EXISTING? NEW TANK WATER SUPPLY ______ Permit BLDG, MECH, ELEC, PLB, INSU PERMIT Additional desc . . 977595 Phone Access Code . Issue Date . . . 4/29/13 Valuation 209728 Expiration Date . . 4/29/14 ______ Special Notes and Comments T/S: 04/12/2013 08:43 AM JBROCK ----

HARNETT COUNTY CENTRAL PERMITTING

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
Application Number 13-50031057

Date 4/29/13

Permit BLDG, MECH, ELEC, PLB, INSU PERMIT

Additional desc . .

Phone Access Code . 977595

Required Inspections

Seq	Insp#	Code	Description	Initials	Date
10 20 20-30 30-999 30 40-50 40-60	101 103 814 111 104 129 425 125	B101 B103 A814 B111 B104 I129 R425 R125	R*BLDG FOOTING / TEMP SVC POLE R*BLDG FOUND & TEMP SVC POLE ADDRESS CONFIRMATION R*BLDG SLAB INSP/TEMP SVC POLE R*FOUND & SETBACK VERIF SURVEY R*INSULATION INSPECTION FOUR TRADE ROUGH IN ONE TRADE ROUGH IN		
40-60 40-60 50-60 50-60 50-60 999	325 225 429 131 329 229	R325 R225 R429 R131 R329 R229 H824	THREE TRADE ROUGH IN TWO TRADE ROUGH IN FOUR TRADE FINAL ONE TRADE FINAL THREE TRADE FINAL TWO TRADE FINAL ENVIR. OPERATIONS PERMIT		

