

Initial Application Date: 4/9/13

Application # 1350031062
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: McKEE HOMES LLC Mailing Address: 5112 PINE BIRCH DR.
City: RALEIGH State: NC Zip: 27606 Contact No: 910-322-2016 Email: GEOFF@McKEEHOMESNC.COM

APPLICANT: McKEE HOMES LLC Mailing Address: S.A.A.

City: _____ State: _____ Zip: _____ Contact No: _____ Email: _____
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: GEOFF POTTER Phone # 910-322-2016

PROPERTY LOCATION: Subdivision: OAKMONT Lot #: 21 Lot Size: 1.43 Acres

State Road # 1116 State Road Name: DOC'S ROAD Map Book & Page: 2012 22

Parcel: 0305070046 21 PIN: 0507-33-4568-000

Zoning: DA-20B Flood Zone: X Watershed: NA Deed Book & Page: 2881 / 134 Power Company*: CENTRAL ELECTRIC

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

PROPOSED USE:

SFD: (Size 62 x 53) # Bedrooms: 4 # Baths: 3 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:
Front	Minimum _____ Actual <u>36</u>	_____
Rear	_____ Actual <u>102.69</u>	_____
Closest Side	_____ Actual <u>46.82</u>	_____
Sidestreet/corner lot	_____	_____
Nearest Building on same lot	_____	_____

APPLICATION CONTINUES ON BACK

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: _____

LEFT ON S. MAIN ST.

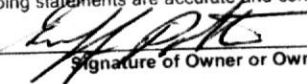
RIGHT ON W. OLD RD.

LEFT ON NC 27 W

LEFT ON DOC'S RD.

LEFT ON EXECUTIVE WAY

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

4/9/13
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

OAKMONT LOT # 21

NAME: McKEE HOMES LLC

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)

4/9/13
DATE

09/09/11

Application #

1350031062

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 McKEE HOMES LLC. Date 4/9/13
Site Address _____ Phone 910-322-2016

Directions to job site from Lillington LEFT ON W. OLD ST.
LEFT ON NC 27 W
LEFT ON DOC'S RD

Subdivision LEFT ON EXECUTIVE WAY Lot 21
Description of Proposed Work SINGLE FAMILY RESIDENTIAL # of Bedrooms 4

Heated SF 2927 Unheated SF 793 Finished Bonus Room? yes Crawl Space _____ Slab

General Contractor Information

GML DEVELOPMENT INC 910-322-2016
Building Contractor's Company Name Telephone
120 NANDINA CT. FAYETTEVILLE, NC 28311 GEOFF@MCKEEHOMESNC.COM
Address Email Address
63970
License #

Electrical Contractor Information

Description of Work SINGLE FAMILY RESIDENTIAL Service Size 200 Amps T-Pole Yes _____ No
SANDY RIDGE ELECTRIC 910-323-2458
Electrical Contractor's Company Name Telephone
454 WHITEHEAD RD. FAYETTEVILLE, NC 28312 KEITH@SANDYRIDGEELECTRIC.COM
Address Email Address
100064
License #

Mechanical/HVAC Contractor Information

Description of Work SINGLE FAMILY RESIDENTIAL
CERTIFIED HEATING & A/C 910-858-0000
Mechanical Contractor's Company Name Telephone
P.O. BOX 1071 HOPE MILLS, NC 28348 CERTIFIEDHEATAIR@EMBAR2
Address Email Address MAIL.COM
20012 H3-1
License #

Plumbing Contractor Information

Description of Work SINGLE FAMILY RESIDENTIAL # Baths 3
DELL HAIRE PLUMBING 910-818-4863
Plumbing Contractor's Company Name Telephone
7612 DOCUMENTARY DR. FAYETTEVILLE, NC DELLHAIREPLUMBING@HOTMAIL.COM
Address 28306 Email Address
24204 PL
License #

Insulation Contractor Information

CUMBERLAND INSULATION 910-484-7118
Insulation Contractor's Company Name & Address 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

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

4/9/13
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 GML DEVELOPMENT INC

Sign w/Title *Glenn Potts* Project Manager Date 4/9/13

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.

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Application Number . . . . . 13-50031062           Date   5/21/13
Property Address . . . . . 58 SANDBURG PL
PARCEL NUMBER . . . . . 03-0507- - -0046- -21-
Application type description  CP NEW RESIDENTIAL (SFD)
Subdivision Name . . . . . OAKMONT PHASE 1 SECT1
Property Zoning . . . . . RES/AGRI DIST - RA-20R

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Owner

Contractor

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OAKMONT DEV PTNRS LLC
5112 PINE BIRCH DRIVE
RALEIGH NC 27606

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GML DEVELOPMENT INC
5112 PINE BIRCH DRIVE
RALEIGH NC 27606
(919) 793-5237

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Applicant

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MCKEE HOMES LLC #21
5112 PINE BIRCH DR
RALEIGH NC 27606
(910) 322-2016

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--- Structure Information 000 000 62X53 4BDR MONO W/ GARAGE & PORCH
Flood Zone . . . . . FLOOD ZONE X
Other struct info . . . . . # BEDROOMS 4000000.00
                           PROPOSED USE SFD
                           SEPTIC - EXISTING? NEW
                           WATER SUPPLY COUNTY

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Permit . . . . . BLDG,MECH,ELEC,PLB,INSU PERMIT
Additional desc . .
Phone Access Code . 983577
Issue Date . . . . . 5/21/13           Valuation . . . . . 0
Expiration Date . . 5/21/14

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Special Notes and Comments

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NC 27 W LEFT ON DOCS RD LEFT ON
EXECUTIVE WAY ONTO SANDBURG PL LOT 21
T/S: 04/12/2013 09:11 AM JBROCK ----
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
PERMIT INCLUDES BLDG,ELEC,MECH,PLUMB
INSULATION AND LAND USE.
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
Work must conform and comply with the
STATE BUILDING CODE and all other State
and local laws, ordinances & regulations

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_____
_____

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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
Date 5/21/13

Application Number 13-50031062
Property Address 58 SANDBURG PL
PARCEL NUMBER 03-0507- - -0046- -21-
Application description . . . CP NEW RESIDENTIAL (SFD)
Subdivision Name OAKMONT PHASE 1 SECT1
Property Zoning RES/AGRI DIST - RA-20R

Permit BLDG,MECH,ELEC,PLB,INSU PERMIT

Additional desc . . .
Phone Access Code 983577

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
10-999	114	B114	R*BLDG MONO SLAB/TEMP SVC POLE	_____	___/___/___
20-30	814	A814	ADDRESS CONFIRMATION	_____	___/___/___
20-999	309	P309	R*PLUMB UNDER SLAB	_____	___/___/___
20-999	205	E205	R*ELEC UNDER SLAB	_____	___/___/___
30	104	B104	R*FOUND & SETBACK VERIF SURVEY	_____	___/___/___
40-50	129	I129	R*INSULATION INSPECTION	_____	___/___/___
40-60	425	R425	FOUR TRADE ROUGH IN	_____	___/___/___
40-60	125	R125	ONE TRADE ROUGH IN	_____	___/___/___
40-60	325	R325	THREE TRADE ROUGH IN	_____	___/___/___
40-60	225	R225	TWO TRADE ROUGH IN	_____	___/___/___
50-60	429	R429	FOUR TRADE FINAL	_____	___/___/___
50-60	131	R131	ONE TRADE FINAL	_____	___/___/___
50-60	329	R329	THREE TRADE FINAL	_____	___/___/___
50-60	229	R229	TWO TRADE FINAL	_____	___/___/___
999		H824	ENVIR. OPERATIONS PERMIT	_____	___/___/___

COUNTY OF HARNETT
Building Inspections Department
Planning Services

Certificate of Compliance: X **Occupancy:** X

Certificate issued pursuant to the requirements of North Carolina General Statute 153A-363 and Harnett County Zoning Ordinances. This certifies at the time of issuance, this structure was in compliance with the various ordinances of the County of Harnett and the North Carolina State Building Codes. For the following:

Use Classification: R-3

Name: GML Development Inc.

Address: 58 Sandburg Pl.

Permit Numbers

Building: 13-50031062

Electrical: "

Insulation: "

Plumbing: "

Mechanical: "

MFG Home:

Date: 9.26-13

Building Official: T. Michael Reiser

ADDRESS : 58 SANDBURG PL SUBDIV: OAKMONT PHASE 1 SECT1
 CONTRACTOR : GML DEVELOPMENT INC PHONE : (919) 793-5237
 OWNER : OAKMONT DEV PTNRS LLC PHONE :
 PARCEL : 03-0507- - -0046- -21-
 APPL NUMBER: 13-50031062 CP NEW RESIDENTIAL (SFD)
 DIRECTIONS : NC 27 W LEFT ON DOCS RD LEFT ON
 EXECUTIVE WAY ONTO SANDBURG PL LOT 21
 T/S: 04/12/2013 09:11 AM JBROCK ----

STRUCTURE: 000 000 62X53 4BDR CRAWL W/ GARAGE & PORCH
 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	5/28/13	DT	R*BLDG FOOTING / TEMP SVC POLE VRU #: 002387462
	5/28/13	AP	T/S: 05/28/2013 12:19 PM DETAYLOR -----
A814 01	6/04/13	TW	ADDRESS CONFIRMATION TIME: 17:00 VRU #: 002390995
	6/05/13	AP	58 SANDBURG PL LOT 21 LILLINGTON 27546--- .S: 06/05/2013 12:18 PM TWARD -----
B103 01	6/04/13	DT	R*BLDG FOUND & TEMP SVC POLE TIME: 17:00 VRU #: 002391324
	6/04/13	AP	
B104 01	6/04/13	DJ	R*FOUND & SETBACK VERIF SURVEY TIME: 17:00 VRU #: 002391001
	6/03/13	CA	T/S: 06/03/2013 02:31 PM DJOHNSON ----- CENTRAL PERMITTING SCHEDULES AND RESULTS THE FOUNDATION AND SETBACK VERIFICATION SURVEY ONCE CUSTOMER SUBMITS IT.
B105 01	6/06/13	MR	R*OPEN FLOOR VRU #: 002392454
	6/06/13	AP	T/S: 06/06/2013 01:18 PM MREARIC -----
B104 02	7/12/13	JB	R*FOUND & SETBACK VERIF SURVEY. TIME: 17:00 VRU #: 002409571
	7/12/13	AP	
R425 01	7/15/13	MR	FOUR TRADE ROUGH IN TIME: 17:00 VRU #: 002409589
	7/15/13	DA	T/S: 07/15/2013 12:32 PM MREARIC ----- strap break in top plate in garage/house wall add receipt in kitchen nook at end wall space (spacing too far) ok to side and insul.
I129 01	7/17/13	DT	R*INSULATION INSPECTION VRU #: 002410821
	7/17/13	AP	T/S: 07/17/2013 10:19 AM DETAYLOR -----
R425 02	7/18/13	DT	FOUR TRADE ROUGH IN TIME: 17:00 VRU #: 002411692
	7/18/13	AP	T/S: 07/17/2013 02:27 PM VBROWN ----- T/S: 07/18/2013 10:55 AM DETAYLOR -----
E209 01	8/20/13	MR	R*ELEC TEMP POWER CERT TIME: 17:00 VRU #: 002428019
	8/20/13	CA	T/S: 08/20/2013 12:53 PM MREARIC -----
E209 02	8/22/13	MR	R*ELEC TEMP POWER CERT TIME: 17:00 VRU #: 002429678
	8/22/13	DA	T/S: 08/22/2013 01:49 PM MREARIC ----- install an outlet at rear accessible from grade install outlet by meter secure #6/2 by ac in attic the bonding screw in mail panel is not secure to bar, if you push in on bar it moves
E209 03	8/23/13	MR	R*ELEC TEMP POWER CERT TIME: 17:00 VRU #: 002430262
	8/23/13	AP	T/S: 08/23/2013 01:56 PM MREARIC -----
H824 01	9/05/13	OT	ENVIR. OPERATIONS PERMIT TIME: 17:00 VRU #: 002436350

ADDRESS : 58 SANDBURG PL
CONTRACTOR : GML DEVELOPMENT INC
OWNER : OAKMONT DEV PTNRS LLC
PARCEL : 03-0507- - -0046- -21-
APPL NUMBER: 13-50031062 CP NEW RESIDENTIAL (SFD)

SUBDIV: OAKMONT PHASE 1 SECT1
PHONE : (919) 793-5237.
PHONE :

TYP/SQ	REQUESTED COMPLETED	INSP RESULT	DESCRIPTION RESULTS/COMMENTS
	9/05/13	AP	T/S: 09/06/2013 10:07 AM SSTEWARD ----- T/S: 09/06/2013 10:07 AM SSTEWARD -----
R429 01	9/18/13	MR	FOUR TRADE FINAL VRU #: 002440683
	9/18/13	CA	T/S: 09/18/2013 01:02 PM MREARIC ----- vent screens
R429 02	9/26/13	TI	FOUR TRADE FINAL VRU #: 002444560

----- COMMENTS AND NOTES -----