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Initial Application Date:	\supset	'd	1-	1.2

Application #	1350031090	0

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

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" _____ Mailing Address:_____ Kennebec Road LANDOWNER: Fish Brothers Developers Willow Springs APPLICANT*: Comfort Homes, Inc.

Mailing Address: P O Box 369

City: Clayton State: NC Zip: 27528 Contact No: 919 553 3242 Email: comfrthomes@aol.com

*Please fill out applicant information if different than landowner CONTACT NAME APPLYING IN OFFICE: Lee Stewart Phone # 919 669 7259 PROPERTY LOCATION: Subdivision: Stetson State Road # 1448 State Road Name: Rawls Church Road Map Book & Page: 2008/193-200 Parcel: 040674004633 PROPOSED USE: SFD: (Size 53'4" x 54'8") # Bedrooms: 3 # Baths: 2 Basement(w/wo bath): Garage: ✓ Deck: ✓ Crawl Space: ✓ Slab: Monoliti (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 (\(\frac{\sqrt}{\sqrt}\) no Does the property contain any easements whether underground or overhead () yes (__) no Structures (existing or proposed): Single family dwellings: proposed Manufactured Homes: Other (specify): Required Residential Property Line Setbacks: Comments: Minimum 35 Front 25' 860 50' 10 Closest Side n/a Sidestreet/corner lot

> Page 1 of 2 **APPLICATION CONTINUES ON BACK**

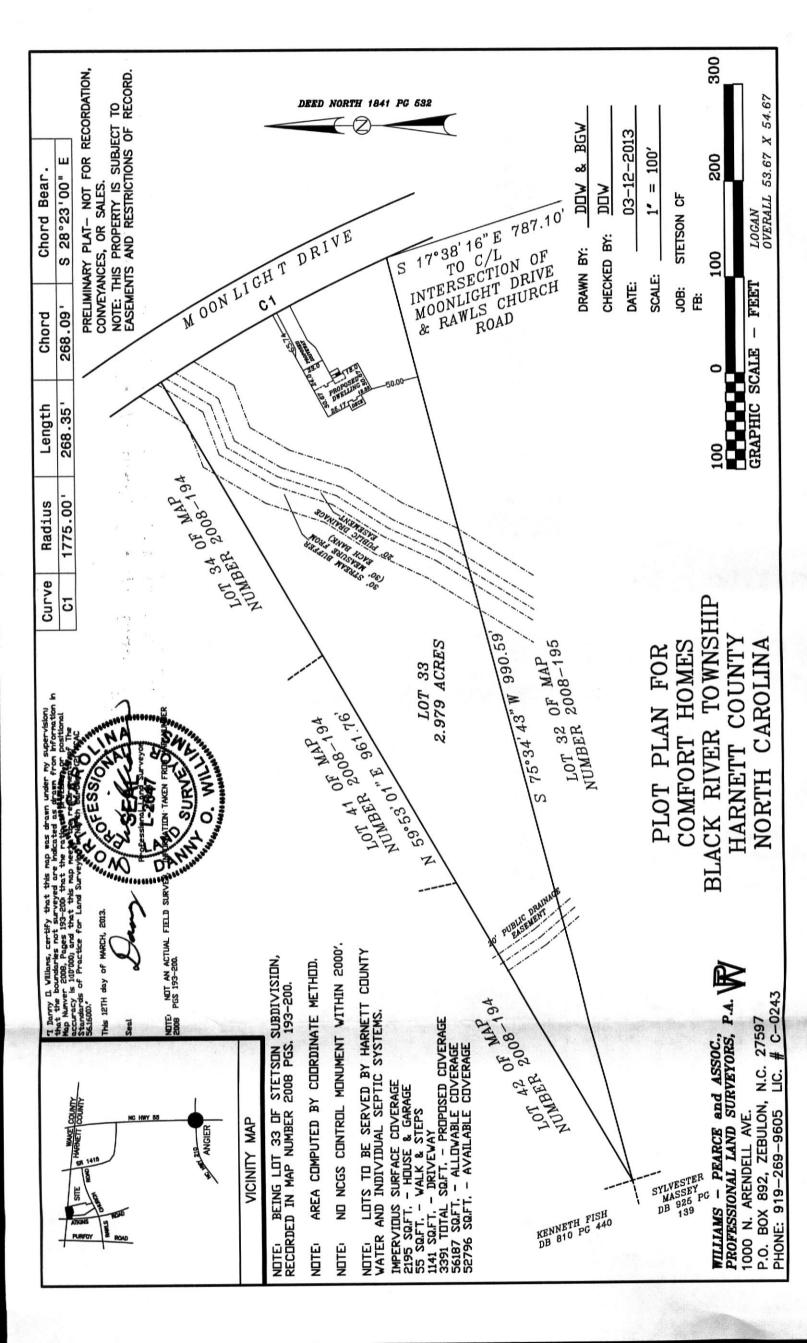
Nearest Building on same lot

SPECIFIC DIRECTION	IS TO THE PROPERTY FR	ROM LILLINGTON: 401 N,	right on Rawls Churc	ch Rd, left on Atkins roa	d, subdivision on right
	ā				
			The state of the s		
-					

		inances and laws of the State ate and correct to the best of			specifications of plans submitted.
Thereby state that love,	20/10/20	20	my mioritedge. Term	3-20-13	oo momanan to promaca.
=	Signature of Ow	ner or Owner's Agent		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



NAME: Contact Horses, Irc

APPLICATION #:	
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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 SystemCode 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.

TY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE

- 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.

 Us 	e Click2Gov	or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.
SEPTIC If applying t	for authorizatio	on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.
{} Acce		{} Innovative {
{_}} Alter		{}} Other
The application. If	nt shall notify the answer is	the local health department upon submittal of this application if any of the following apply to the property in "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:
{_}}YES	{_}} NO	Does the site contain any Jurisdictional Wetlands?
{_}}YES	(<u>X</u> } №	Do you plan to have an <u>irrigation system</u> now or in the future?
{_}}YES	$\{\underline{X}\}$ NO	Does or will the building contain any drains? Please explain
{}}YES	$\{\underline{X}\}$ NO	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
{_}}YES	ON K	Is any wastewater going to be generated on the site other than domestic sewage?
{_}}YES	$\{X\}$ NO	Is the site subject to approval by any other Public Agency?
(X)YES	{_}} NO	Are there any Easements or Right of Ways on this property?
{_}}YES	NO I	Does the site contain any existing water, cable, phone or underground electric lines? - only Street right
		If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service.
I Have Read	This Application	on And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And
State Official	s Are Granted	Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules.
I Understand	That I Am So	lely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making

10/10

Comfort Homes, Inc. has an option to purchase Lots 33 and 49 in Stetson Subdivision, recorded in Map Book 2008, Pages 193-200, Harnett County Register of Deeds.



I, Patricia F. Waite, do hereby certify that Julian R. Stewart, President of Comfort Homes, Inc., personally appeared before me this day and acknowledged the due execution of the foregoing instrument.

Witness my hand and Notarial Seal, this 20th day of March 2013.

Notary Public

My commission expires 4/2/17.



P10-040674004633 P1N-0664-19.8855,000

HARNETT COUNTY OPTIONS FOR BUILDING

Building Code 12

SUBDIVISION:	STET-33		
ADDRESS:	416 MOONL	IGHT DRIVE	
CITY/STATE:	FUQUAY-VA	ARINA, NC 27526	
PLAN NUMBER/NAMI	E: 1549GG	LOGAN	
SUPERINTENDENT:			
PRE-APPROVED STA	ATUS:		
	I I		
PROGRESS ENERGY PREMISE:	87901129		
DATE:	3/201/13		
10 X 12 D 2 CAR G N B N S N S Y E	FIREPLACE BAY WINDOW(S) DECK BARAGE BONUS CATHEDRAL CEILING(S BUNKEN ROOM BTORAGE CRAWL ELEVATION REVERSED		

HARNETT COUNTY OPTIONS FOR BUILDING

RoBuilding Code 12

SUBDIVISION:		STET-33			
ADDRESS:		416 MOONLI	GHT DRI	VE	
CITY/STATE:		FUQUAY-VAI	RINA, NO	27526	
PLAN NUMBER/NAM	ЛЕ :	1549GG		LOGAN	
SUPERINTENDENT					
PRE-APPROVED ST	TATUS:				
PROGRESS ENERGY PREMISE:		87901129			
DATE:	। १५	3/201/13	The State of the S	-	
DIRECT VENT GAS	FIREPLACE BAY WINDO				
10 X 12 2 CAR	DECK GARAGE				
N	BONUS				
N N Y	CATHEDRA SUNKEN R STORAGE CRAWL	AL CEILING(S) OOM			
	ELEVATION REVERSED	N Doğumlar	i ja h (d.)		

com

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

<u>Application for Residential Building and Trades Permit</u>

	accent and an extension of
Owners Name Fish Brothers Deselope	Date 3-30-13
Site Address 416 Maraliant Trive	Phone 919-553-3243
Directions to job site from Lillington 401 North Ria	ntan Rauls Church
	Hair no noisivib
	9
Subdivision Stetson	Lot33
Description of Proposed Work Construction of Single	Coming of Bedrooms 3
Heated SF 1549 Unheated SF 552 Finished Bonus Room?	O Crawl Space V Slab
General Contractor Information	
Building Contractor's Company Name	<u>919-553-3343</u> Telephone
20 Sox 369 Clauby NC 2058	Confithones @ad.
Address	Email Address
33184	
License #	
Description of Work Rough in + Trimout Service Size	ion 200Amps T-PoleYesNo
Summerfield Electric	919-975-0599
Electrical Contractor's Company Name	Telephone
705 Thunksgiving Vol. Fire Ded. Rd. Seina NC	
Address	Email Address
<u> 22825 </u>	
,_ License # Mechanical/HV/\(\sigma\) Contractor Info	mation
Description of Work Rough in + trimout + other Ventali	
Stephenson Heating + Air	919-329-0686
Mechanical Contractor's Company Name	Telephone
343 Shipwash Dr. Garner NC. 27529	
Address	Email Address
18644	
License # Plumbing Contractor Information	on_
Description of Work Rough in + Trimouts	# Baths
Ambit Plymbins	919-934-1379
Plumbing Contractor's Company Name	Telephone
755 Rock Pillan Rd. Clayton NC 27520	2
Address	Email Address
<u> 20823 </u>	
License # Insulation Contractor Information	on
Tatum Insulation - 519 old Drugsine Rd. Garner	919-661-0999
Insulation Contractor's Company Name & Address	Telephone

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 bysigning-below-I have obtained all subcontractors-bermission to obtain these permits and if 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 Affidavit for Worker's Compensation N C G S 87-14 The undersigned applicant being the Officer/Agent of the Contractor or Owner Owner General Contractor 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 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

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LIEN AGENT INFORMATION

Effective April 1, 2013

In accordance with North Carolina General Assembly Session Law 2012-158, Inspection Departments are not allowed to issue any permit where the project cost is \$30,000 or more unless the application is for improvements to an existing dwelling that the applicant uses as a residence **OR** the property owner has designated a lien agent and provided the inspections office with the information below:

Name of Lien Agent WFG Dational Title Insurance Company
Mailing address of Agent 1350 Sunday Drive Suite 19 Raleigh, NC 27607
Physical address of Agent Some as above
Telephone (919)277-0123 Fax 888-378-9124 Email Orders @ trystille. Con

The information will be attached to the permit record and a copy provided to the applicant. The applicant is required to post a copy on the construction site.

Excerpt from North Carolina G.S. 160A-417:

"(Effective April 1, 2013) No permit shall be issued pursuant to subdivision (1) of subsection (a) of this section where the cost of the work is thirty thousand dollars (\$30,000) or more, other than for improvements to an existing single-family residential dwelling unit as defined in G.S. 87-15.5(7) that the applicant uses as a residence, unless the name, physical and mailing address, telephone number, facsimile number, and electronic mail address of the lien agent designated by the owner pursuant to G.S. 44A-11.1(a) is conspicuously set forth in the permit or in an attachment thereto. The building permit may contain the lien agent's electronic mail address. The lien agent information for each permit issued pursuant to this subsection shall be maintained by the inspection department in the same manner and in the same location in which it maintains its record of building permits issued."

County of Harnett Building Inspections Department Planning Services

Certificate of Compliance: ___ 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: SFD
 Permit Numbers

 Name: Comfort Homes Inc.
 Building: 13-50031096

 Electrical: 13-50031096
 Electrical: 13-50031096

 Address: 416 Moonlight Drive
 Insulation: 13-50031096

 Fuguay Varina NC 27526
 Plumbing: 13-50031096

 Mechanical: 13-50031096

MFG Home: NANANANANANA

Date: 08-08-2013 Building Official: BSutton

PREPARED 8/07/13, 14:15:02
Harnett County Harnett County

INSPECTION TICKET

PHONE :

PAGE

16 DATE 8/08/13

INSPECTOR: IVR

ADDRESS . : 416 MOONLIGHT DR SUBDIV: STETSON 53LOTS CONTRACTOR : COMFORT HOMES INC PHONE: (919) 553-3242

OWNER . . : FISH BROTHERS INC

PARCEL . . : 04-0674- - -0046- -33-

APPL NUMBER: 13-50031096 CP NEW RESIDENTIAL (SFD) DIRECTIONS: T/S: 04/17/2013 01:43 PM JBROCK ----

STETSON #33

STRUCTURE: 000 000 53.4X54.8 3BDR CRAWL W/ GARAGE & DECK

FLOOD ZONE . . . : FLOOD ZONE X

PROPOSED USE SFD # BEDROOMS : 3000000.00 SEPTIC - EXISTING? : NEW TANK

WATER SUPPLY : COUNTY

PERMIT:	CPSF 00 CP *	SFD	
	REQUESTED	INSP	DESCRIPTION
TYP/SQ	COMPLETED	RESULT	RESULTS/COMMENTS
B101 01	5/23/13	KS	R*BLDG FOOTING / TEMP SVC POLE VRU #: 002386028
	5/23/13	AP	T/S: 05/23/2013 01:19 PM KSLATTUM
B103 01	5/31/13	BS	R*BLDG FOUND & TEMP SVC POLE VRU #: 002389436
	5/31/13	AP	T/S: May 31, 2013 10:21 AM BSUTTON
B105 01	6/05/13	BS	R*OPEN FLOOR VRU #: 002391815
	6/05/13	AP	T/S:_June_05, 2013 01:14 PM BSUTTON
A814 01	6/05/13	TW	ADDRESS CONFIRMATION TIME: 17:00 VRU #: 002389445
	6/05/13	AP (416 MOONLIGHT DR) FUQUAY VARINA 27526
			T/S: 06/05/2013 01:17 PM TWARD
R425 01	6/20/13	BS	FOUR TRADE ROUGH IN TIME: 17:00 VRU #: 002399855
	6/20/13	AP	T/S: 06/20/2013 07:59 AM VBROWN
			T/S: June 20, 2013 11:35 AM BSUTTON
I129 01	6/24/13	BS	R*INSULATION INSPECTION TIME: 17:00 VRU #: 002400745
	6/24/13	AP	T/S: 06/21/2013 07:57 AM VBROWN
			T/S: June 24, 2013 12:25 PM BSUTTON
E209 01	7/24/13	BS	R*ELEC TEMP POWER CERT TIME: 17:00 VRU #: 002414027
	7/24/13	AP	T/S: 07/23/2013 08:51 AM VBROWN
	•		T/S: July 24, 2013 02:33 PM BSUTTON
H824 01	7/26/13	JM . /	ENVIR. OPERATIONS PERMIT TIME: 17:00 VRU #: 002417343
	7/26/13	AP 🗸	T/S: 07/29/2013 10:53 AM SSTEWART
			T/S: 07/29/2013 10:53 AM SSTEWART
M305 01	7/30/13	BS	R*PLUMB SEWER CONNECTION TIME: 17:00 VRU #: 002417145
	7/30/13	AP	T/S: 07/29/2013 08:38 AM VBROWN
			T/S: July 30, 2013 12:04 PM BSUTTON
P307 01	7/30/13	BS	R*PLUMB WATER CONNECTION TIME: 17:00 VRU #: 002417152
	7/30/13	AP	T/S: 07/29/2013 08:38 AM VBROWN
			T/S: July 30, 2013 12:04 PM BSUTTON
R429 01	8/08/13		FOUR TRADE FINAL VRU #: 002422417
	<u>8.8.13</u>	21101	
		. ,	

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

PREPARED 5/22/13, 14:17:38 INSPECTION TICKET PAGE Harnett County INSPECTOR: IVR DATE 5/23/13 ADDRESS . : 416 MOONLIGHT DR SUBDIV: STETSON 53LOTS CONTRACTOR : COMFORT HOMES INC PHONE: (919) 553-3242 OWNER . . : FISH BROTHERS INC PHONE : PARCEL . . : 04-0674- - -0046- -33-APPL NUMBER: 13-50031096 CP NEW RESIDENTIAL (SFD) DIRECTIONS: T/S: 04/17/2013 01:43 PM JBROCK ----STETSON #33 STRUCTURE: 000 000 53.4X54.8 3BDR CRAWL W/ GARAGE & DECK FLOOD ZONE . . . : FLOOD ZONE X # BEDROOMS 3000000.00 PROPOSED USE SFD SEPTIC - EXISTING? . . . : NEW TANK WATER SUPPLY : COUNTY PERMIT: CPSF 00 CP * SFD

R*BLDG FOOTING / TEMP SVC POLE VRU #: 002386028

DESCRIPTION

REQUESTED INSP

B101 01 5/23/13 TIA

TYP/SQ

COMPLETED RESULT RESULTS/COMMENTS