

Initial Application Date: 5/14/13

Application # 135-00-313-06

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: Israel Lucas Const. Mailing Address: 4432 Fox Run Rd  
City: SANFORD State: NC Zip: 27330 Contact No: 919 970 0902 Email: Lucas5@windstream.net

APPLICANT\*: Israel Lucas Mailing Address: same  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Contact No: \_\_\_\_\_ Email: \_\_\_\_\_

\*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Israel Lucas Phone # 919 970 0902

PROPERTY LOCATION: Subdivision: Pattors Point, 231 Fifty Caliber, Broadway Lot #: 75 Lot Size: 347  
State Road # 1139 State Road Name: Tingen Rd Map Book & Page: 2005, 905  
Parcel: 039597 0039 70 PIN: 9597-30-1672.000  
Zoning: RA20R Flood Zone: X Watershed: NA Deed Book & Page: 2929, 53 Power Company\*: CEMC

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

**PROPOSED USE:**

- SFD: (Size 66 x 52) # Bedrooms: 3 # Baths: 2 Basement(w/w bath): \_\_\_\_\_ Garage:  Deck:  Crawl Space:  Slab: \_\_\_\_\_ 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/w 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:**

	Minimum	Actual
Front	<u>35</u>	<u>40</u>
Rear	<u>25</u>	<u>60</u>
Closest Side	<u>10</u>	<u>20</u>
Sidestreet/corner lot	_____	_____
Nearest Building on same lot	_____	_____

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Left on Tingen Rd, left into  
Pattons Point, left onto Bunker Buster, right onto  
Fifty Caliber, Right onto Eisenhower

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.

Israel Lunn  
Signature of Owner or Owner's Agent

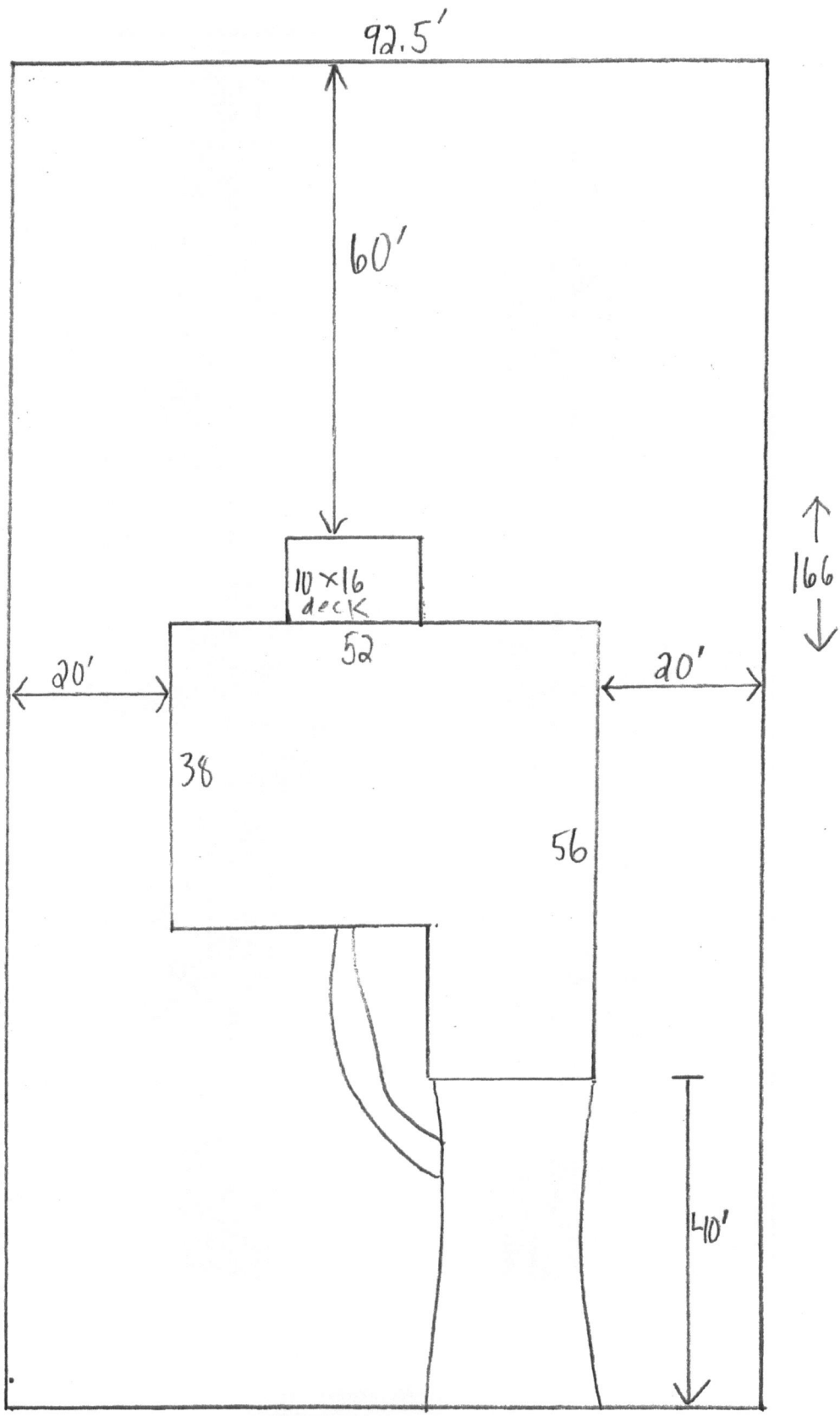
5/14/13  
Date

\*\*\*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\*\*

1"=20'

SITE PLAN APPROVAL  
DISTRICT RA20 USE SFA  
#BEDROOMS 3  
5-15-13 V.C.P.H.  
Date Zoning Administrator



lot 75 Pattons Point, 231 Fifty Caliber, Broadway 27505  
Parcel Id# 9597-30-1672.000  
Israel Lucas 919 770 0902

NAME: Israel Lucas

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.**

Israel Lucas  
 \_\_\_\_\_  
 PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

5/14/13  
 \_\_\_\_\_  
 DATE

Harnett County Central Permitting

PO Box 85 Lillington NC 27548

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 Israel Lucas Const. Date 9/22/13
Site Address 231 Fifty Caliber Dr. Broadway 27505 Phone 919 770 0902
Directions to job site from Lillington 27 W, left on Tingen Rd, Rt into Pattons Point Subdivision, 3rd right

Subdivision Pattons Point Lot 75
Description of Proposed Work new const. single fam. # of Bedrooms 3
Heated SF 2000 Unheated SF 510 Finished Bonus Room? Yes Crawl Space Slab

General Contractor Information

Israel Lucas Const. Inc. 919 770 0902
Building Contractor's Company Name Telephone
4432 Fox Run Rd, Sanford NC 27330 Lucas 5 @ windstream.net
Address Email Address
53247

Electrical Contractor Information

Description of Work new const. Service Size 200 Amps T-Pole X Yes No
SECS Electric 919 718-1156
Electrical Contractor's Company Name Telephone
6630 Muscat Rd Hope Mills, 28349 SECS @ aol.com
Address Email Address
18002 L

Mechanical/HVAC Contractor Information

Description of Work new const.
Stephenson Heating & Air 919 329-0686
Mechanical Contractor's Company Name Telephone
343 Shipwash Dr., Garner 27529 StephensonHVAC @ aol.com
Address Email Address
18644

Plumbing Contractor Information

Description of Work new const. # Baths 2
Cox Bros Plumb 919 258-3622
Plumbing Contractor's Company Name Telephone
985 Thomas Kelly Rd.
Address Email Address
08644

Insulation Contractor Information

Tatum Insulation II, 519 Old Drug Store Rd 919 661-0999
Insulation Contractor's Company Name & Address Telephone
Garner 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

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

9/22/13  
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 Israel Lucas Const. Inc.

Sign w/Title Israel Lucas Owner Date 9/22/13

**Martha Lucas**

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**From:** noreply@egov.com  
**Sent:** Wednesday, August 21, 2013 10:18 PM  
**To:** Undisclosed recipients:  
**Subject:** Liens NC

## Payment Receipt Confirmation

Your payment was successfully processed.

### Transaction Summary

Description	Amount
Liens NC	\$25.00
<b>Total Amount Paid</b>	<b>\$25.00</b>

Customer Information		Payment Information	
Customer Name	Israel Lucas	Payment Type	Credit Card
Local Reference ID	20883	Credit Card Type	VISA
Receipt Date	8/21/2013	Expiration Date	07 / 2016
Receipt Time	07:17:28 PM PDT	Credit Card Number	*****6949
		Order ID	3837234
		Billing Name	Israel Lucas Const

Billing Information			
Billing Address	Fox Run Road	Phone Number	919-776-1071
Billing City, State	Sanford, NC	Fax Number	919-776-1071
ZIP/Postal Code	27330	This receipt has been emailed to the address below.	
Country	US	Email Address	<a href="mailto:lucas5@windstream.net">lucas5@windstream.net</a> <a href="mailto:lucas5@windstream.net">lucas5@windstream.net</a>

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 . . . . .	13-50031306	Date	8/27/13
Property Address . . . . .	231 FIFTY CALIBER DR		
PARCEL NUMBER . . . . .	03-9597- - -0039- -70-		
Application type description	CP NEW RESIDENTIAL (SFD)		
Subdivision Name . . . . .	PATTONS POINT		
Property Zoning . . . . .	RES/AGRI DIST - RA-20R		

Owner	Contractor
-----	-----
ISRAEL LUCAS CONST	ISRAEL LUCAS CONSTRUCTION INC
4432 FOX RUN RD	4432 FOX RUN RD
SANFORD NC 27330	SANFORD NC 27330
	(919) 770-0902

Applicant

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ISRAEL LUCAS CONST #75

--- Structure Information 000 000 66X52 3BDR 2BATH SFD W GAR DECK CRAWL

Flood Zone . . . . .	FLOOD ZONE X	
Other struct info . . . . .	# BEDROOMS	3.00
	PROPOSED USE	SFD
	SEPTIC - EXISTING?	NEW TANK
	WATER SUPPLY	COUNTY

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Permit . . . . .	BLDG, MECH, ELEC, PLB, INSU PERMIT		
Additional desc . . . . .			
Phone Access Code . . . . .	998989		
Issue Date . . . . .	8/27/13	Valuation . . . . .	0
Expiration Date . . . . .	8/27/14		

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Special Notes and Comments

T/S: 05/15/2013 10:31 AM VBROWN ----

231 FIFTY CALIBER, PATTONS POINT #75.

27W LEFT ON TINGEN RD, LEFT ON PATTONS POINT, LEFT ON BUNKER BUSTER, RIGHT ON FIFTY CALIBER, RIGTH ON EISENHOWER.

XX

PERMIT INCLUDES BLDG, ELEC, MECH, PLUMB INSULATION AND LAND USE.

XX

Work must conform and comply with the STATE BUILDING CODE and all other State and local laws, ordinances & regulations

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\_\_\_\_\_

\_\_\_\_\_



HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

LILLINGTON, NC 27546

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Application description . . .	CP NEW RESIDENTIAL (SFD)		
Subdivision Name . . . . .	PATTONS POINT		
Property Zoning . . . . .	RES/AGRI DIST - RA-20R		
Permit . . . . .	BLDG,MECH,ELEC,PLB,INSU PERMIT		
Additional desc . . . . .			
Phone Access Code . . . . .	998989		

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
10	101	B101	R*BLDG FOOTING / TEMP SVC POLE	_____	___/___/___
20	103	B103	R*BLDG FOUND & TEMP SVC POLE	_____	___/___/___
20-30	814	A814	ADDRESS CONFIRMATION	_____	___/___/___
30-999	105	B105	R*OPEN FLOOR	_____	___/___/___
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	_____	___/___/___