

Initial Application Date: 6-25-13

Application # 1350031593

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: Wynn Construction, Inc. Mailing Address: 2550 Capitol Dr Suite 105
City: Creedmoor State: NC Zip: 27522 Contact No: 919 603-7965 Email: edward@wynnconstruct.com

APPLICANT: Wynn Construction, Inc. Mailing Address: SAME
City: _____ State: _____ Zip: _____ Contact No: SAME Email: SAME

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: J. Edward Avcreth Phone # 919 603-7965

PROPERTY LOCATION: Subdivision: TROTTER'S RIDGE Lot # 67 Lot Size 1.23A

State Road # _____ State Road Name: 44 TRIPLE CROWN COURT Map Book & Page: 2012, 551

Parcel: 030507 0200 56 PIN: 9597-93-1752.000

Zoning: R220B Flood Zone: X Watershed: NA Deed Book & Page: 3106, 374 Power Company: Progress Energy

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

PROPOSED USE:

SFD: (Size: 50' x 58') # Bedrooms: 4 # Baths: 3.5 Basement (w/wo bath): _____ Garage: Y Deck: Y 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/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:

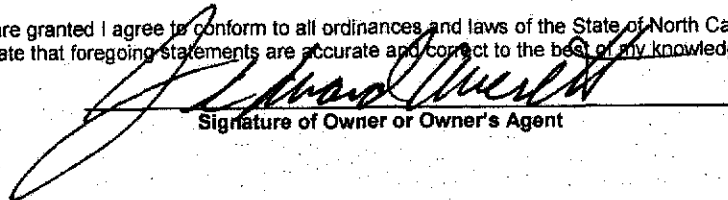
Front Minimum 35 Actual 80
Rear 25 41.6'
Closest Side 10 81.4'
Sidestreet/corner lot _____
Nearest Building on same lot _____

Comments: New Construction

SONDMA HIP

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: HWY 27 W To Doc's Rd.
Left on Doc's Rd SUBDIVISION ON THE 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

6-20-13
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****

NAME: Wynn Construction, Inc

APPLICATION #: _____

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 close back down. (Unless inspection is for a septic tank in a mobile home park)
- 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.

J. Edward Muehle
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

6-20-13
DATE

Sonoma GR

Application # _____

* 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 27548
910-693-7323 Fax 910-693-8793 www.harnett.org/permits

Application for Residential Building and Trades Permit

Owner's Name: Wyan Construction, Inc. Date: _____
Site Address: 44 TREPPE CROWN CT. Phone: 919 603-7965
Directions to job site from Lillington: HWY 27W To Doc's Rd
Left on Doc's Rd Subdivided on RIGHT

Subdivision: TROTTERS RIDGE Lot: 67 50x
Description of Proposed Work: New CONSTRUCTION # of Bedrooms: 4
Heated SF: 3192 Unheated SF: 984 Finished Bonus Room? Y Crawl Space: Slab: _____

General Contractor Information

Wyan Construction, Inc. Telephone: 919 603-7965
Building Contractor's Company Name
2550 CAPITAL DR Email Address: edward@wyancor.com
Address
46295
License # _____

Electrical Contractor Information

Description of Work: New CONSTRUCTION Service Size: 200 Amps T-Pole: Yes No
R. A. Jackson Telephone: 919 750-1251
Electrical Contractor's Company Name
9261 Raleigh Road Benson, NC 27804
Address
21144
License # _____

Mechanical/HVAC Contractor Information

Description of Work: New Construction
Carolina Comfort A/C INC. Telephone: 919 550-7716
Mechanical Contractor's Company Name
5212 US HWY 70 BUS W. CLAYTON, NC Email Address: carolinacomfortair@yahoo.com
Address
29077
License # _____

Plumbing Contractor Information

Description of Work: New Construction # Baths: 3
Thornton's Plumbing Telephone: _____
Plumbing Contractor's Company Name
3160A Omar Rd Clayton NC Email Address: _____
Address
22152
License # _____

Insulation Contractor Information

TATUM INSULATION Telephone: 919 661-0999
Insulation Contractor's Company Name & Address

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

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)

1. Do you own the land on which this building will be constructed? ___ Yes ___ No

2. 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 consecutive months following completion of construction and do you understand that if you do not do so, it creates the presumption under law that you fraudulently secured the permit? ___ Yes ___ 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 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.

J. Edward Averett
Signature of Owner/Contractor/Officer(s) of Corporation

6-20-13
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: *Wyer Construction, Inc.*
Sign w/Title: *J. Edward Averett*

Date: 6-20-13

Designated Lien Agent

Investors Title Insurance Company

Online: www.liensnc.com

Address: 19 W. Hargett St., Suite 507 / Raleigh, NC 27601

Email: support@liensnc.com

Fax: (919) 489-5231

Technical Support Hotline (888) 690-7384

Entry Number: 13809

Filed by: wynnhomes

Payment Amount: \$25.00

Filing Date: 05/28/2013



Owner Information

wynn construction inc

2550 capitol dr., sute 105

creedmoor NC 27522

nancy@wynnconstruct.com 919-528-1347

Project Property

trotters ridge subdivision lot 67

44 triple crown court

lillington

27546

030507020058

Property Type: 1-2 Family Dwelling

Map:

Block:

Lot: 67

Original Contractor

Date of First Furnishing

Pre-Permit Workers

none

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.

Application Number 13-50031593 Date 7/24/13
Property Address 44 TRIPLE CROWN CT
PARCEL NUMBER 03-0507- - -0200- -56-
Application type description CP NEW RESIDENTIAL (SFD)
Subdivision Name TROTTERS RIDGE PHASE2A
Property Zoning RES/AGRI DIST - RA-20R

Owner

WYNN CONSTRUCTION INC
2552 CAPITAL DR SUITE 105
CREEDMOOR NC 27522

Contractor

WYNN CONSTRUCTION, INC.
1696 HAYES RD
CREEDMOOR NC 27522
(919) 528-1347

Applicant

WYNN CONSTRUCTION INC #67
2550 CAPITOL DR STE 105
CREEDMOOR NC 27522
(919) 603-7965

--- Structure Information 000 000 52X58.75 4BDR CRAWL W/ GARAGE & PORCH
Flood Zone FLOOD ZONE X
Other struct info # BEDROOMS 4000000.00
PROPOSED USE SFD
SEPTIC - EXISTING? NEW TANK
WATER SUPPLY COUNTY

Permit BLDG,MECH,ELEC,PLB,INSU PERMIT
Additional desc . . .
Phone Access Code . . . 989954
Issue Date 7/24/13 Valuation 0
Expiration Date . . . 7/24/14

Special Notes and Comments
T/S: 06/25/2013 10:56 AM JBROCK ----
TROTTERS RIDGE #67
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

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.

Application Number	13-50031593	Page	2
Property Address	44 TRIPLE CROWN CT	Date	7/24/13
PARCEL NUMBER	03-0507- - -0200- -56-		
Application description . . .	CP NEW RESIDENTIAL (SFD)		
Subdivision Name	TROTTERS RIDGE PHASE2A		
Property Zoning	RES/AGRI DIST - RA-20R		
Permit	BLDG,MECH,ELEC,PLB,INSU PERMIT		
Additional desc			
Phone Access Code	989954		

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	_____	___/___/___