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Initial Application Date:	\smile	α	
initial Application Date		<u> </u>	

Application #	1350031603)
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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: Waype Campbell Mailing Address: 231 Stonebrian Cir. Apt. 104 Pring Lake State: NCZip: 283 90 Contact No: Email: APPLICANT*: Malle Homes LL Mailing Address: 5112 Pine Birch De. City: Raleigh State NC Zip: 276 6 Contact No: 910-322-2016 Email: geoff Enckel himes No. com CONTACT NAME APPLYING IN OFFICE: Ges ff fo ther Phone # 910-322-2016 PROPERTY LOCATION: Subdivision: 108 MUDICES Chapel Rd Lot #: / Lot Size: 4.29 AC State Road Name: Mores Chapel Pd Map Book & Page: 2013, 169 Parcel: 13 0529 0078 PIN: 0529-30-5310.000 Zoning: RA30 Flood Zone: X Watershed: A Deed Book & Page: 3098/111 Power Company*: *New structures with Progress Energy as service provider need to supply premise number ______ PROPOSED USE: SFD: (Size 63 x 44) # Bedrooms: 5 # Baths: Basement(w/wo bath): Garage: Deck: Crawl Space: Slab: Slab: Slab: Gisthe bonus room finished? (V) 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: 1 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 Manufactured Homes: Other (specify): Structures (existing or proposed): Single family dwellings: Required Residential Property Line Setbacks: Comments: Actual Front Rear Closest Side Sidestreet/corner lot

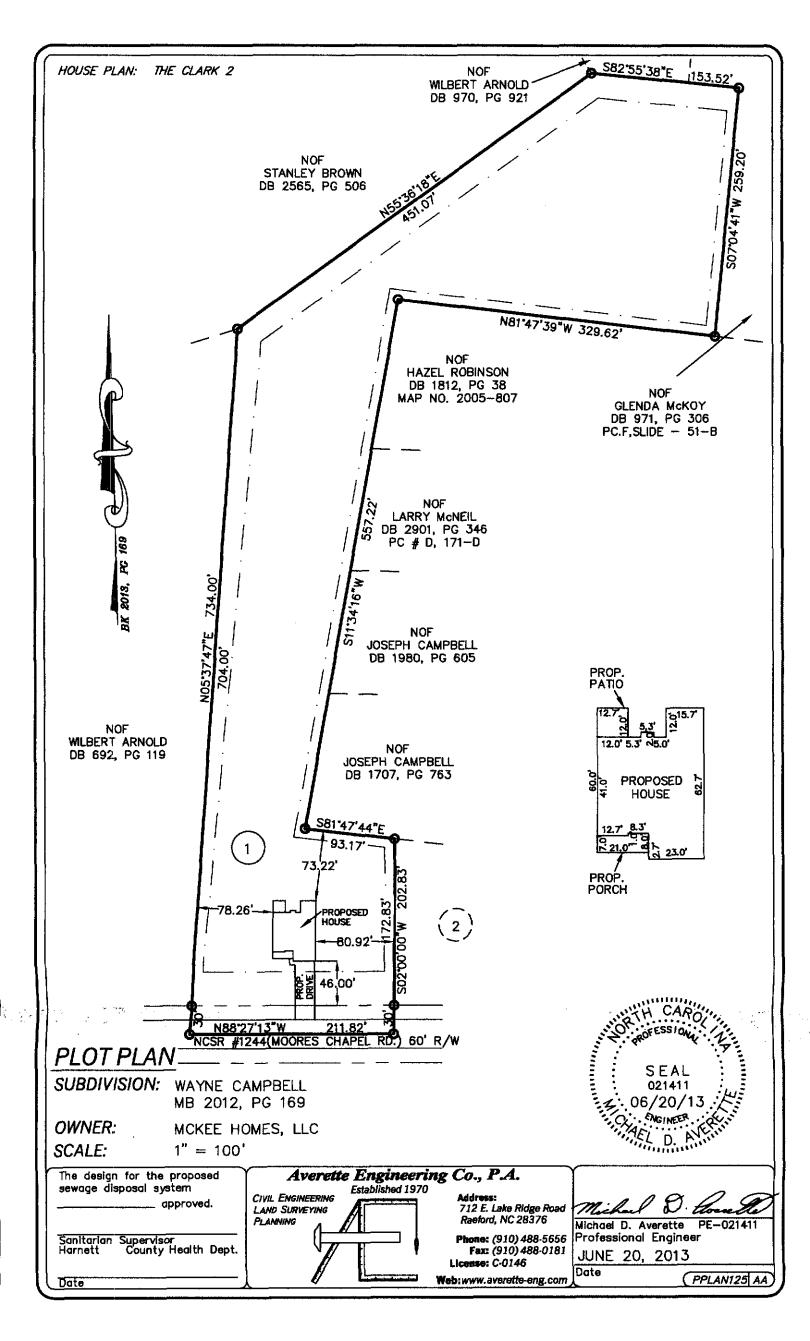
03/11

Nearest Building on same lot

SPECIFIC DIRECTIONS	THE PROPERTY FROM LILLINGTON:
	5 on 5 Main St
	Right on wold Rd.
	It on NC27
	Right on Tim Currie
	eft on Moures Chapel
If permits are granted I ag I hereby state that foregoi	to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans sub- tatements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided
	6/22/13
	Signature of Owner 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**



108 Moores Chapel Rd

-		_		
n-100	16 me	1.10	APPLICATION #:	

NA	ME:	Inc	Ree	Home, LLC APPLICATION #.	
			*	*This application to be filled out when applying for a septic system inspection.*	
	Con	ntv H	anish Da	enartment Application for Improvement Permit and/or Authorization to Constru	<u>uct</u>
		450514	A COLUMN TO A LINE	A TRUTE A DDI LOATION TO DAT CICIGO CHANGED OR THE SUIT IN ALLERED, I DEN THE DVICTOR	1 4 2
00		OD ATT	THODIZA'	TION TO CONSTRUCT SHALL RECOME INVALID. The permit is valid for entire of months of without expr	ration
dep	endin	g upon d	ocumentat	tion submitted. (Complete site plan = 60 months; Complete plat = without expiration) CONFIRMATION #	
_/	_	-t	93-7525 (option 1	
	Env	All pr	entai ne operty it	rons must be made visible. Place "pink property flags" on each corner iron of lot. All pr	operty
		0		alearly flagged approximately every 50 feet between comers.	
	•	Olege	"aranga	bouse corner flags" at each corner of the proposed structure. Also may driveways, garages,	decks,
		and but	ildinan o	wimming nools, etc. Place flags per site plan developed ablor Central Fernitting.	
	•	Place	orange E	Environmental Health card in location that is easily viewed from road to assist in locating prophickly wooded, Environmental Health requires that you clean out the <u>undergrowth</u> to allow the undergrowth to allow the undergrowth to allow the undergrowth to allow the undergrowth that you clean out the undergrowth to allow the undergrowth that you clean out the undergrowth to allow the undergrowth that you clean out the undergrowth to allow the undergrowth that you clean out the undergrowth to allow the undergrowth that you clean out the undergrowth the undergrowth that you clean out the undergrowth th	he soil
	•		stinn to h	so portormod. Inspectors should be able to Walk Ifeely afould site. Do not grade property.	
	•	A // 1 - /	h	addressed within 10 business days after confirmation, \$25,00 fetulii trip ice may be in	curred
				A. Mai (id. mark hausa carners and nonnerty lines, etc. Unic (ut cyllining) (vvv	
	•				e couc
		800 (a	after sele	ecting notification permit if multiple permits exist) for Environmental Health inspection. Pleas	1.010
		contir	mation nu	umber given at end of recording for proof of request. v or IVR to verify results. Once approved, proceed to Central Permitting for permits.	
	En	US e U	nental He	ealth Existing Tank Inspections Code 800	
u	<u></u>			in the religion of the plantage and card on property	
	•	D		reportion by removing soil over outlet end of lank as diagram indicates, and the his straigh-	t up (#
		possil	ble) and t	then put lid back in place. (Unless inspection is for a septic tank in a mobile home park)	
	•	66		E LIDS OFF OF SEPTIC TANK ing outlet end call the voice permitting system at 910-893-7525 option 1 & select notification in the confirmation of t	permit
	•	if mul	tiple per	rmits, then use code 800 for Environmental Health inspection. Please note confirmation r	<u>number</u>
		air.com	at and of	of recording for proof of request	
	•		lick2Gov	v or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.	
SI	EPTIC	<u> </u>	outhorizati	tion to construct please indicate desired system type(s): can be ranked in order of preference, must choose or	ne.
				(V) Amer	
			d		
{.	}	Alternat	ive	() Other	narty in
Ti qu	ne app Jestion	olicant s	hall notify answer i	by the local health department upon submittal of this application if any of the following apply to the profix "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:	perty iii
	_}YE		/ NO	Does the site contain any Jurisdictional Wetlands?	
1	_}YE	ES (∠ NO	Do you plan to have an irrigation system now or in the future?	
, -	_, }YE	-	NO	Does or will the building contain any drains? Please explain.	
•		. –	∠ NO	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?	
	_}YI		NO	Is any wastewater going to be generated on the site other than domestic sewage?	
	, }YI	• • •	✓ NO	Is the site subject to approval by any other Public Agency?	
{.	L _Y YI	ES {_	_} NO	Are there any Easements or Right of Ways on this property?	
ſ	}Yi	ES (r	NO	Does the site contain any existing water, cable, phone or underground electric lines?	
١-	_,	\-		If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service.	
	Tlana	Dand Ti	hia Annlia	ration And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized Cou	inty And
. I	nave	ce -:	his Applica	ted Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws An	ıd Rules.
31	tate O Under	rstand T	hat I Am	Solely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And M	laking
T	he Sit	e Access	sible So Th	hat A Complete Site Evaluation Can Be Performed.	113
_			·	RS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED) DATE	<u> </u>
P	ROP	ERTY	OWNEŔ	S OROWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)	10/10

Application #

1350031603

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 & p

Application for Residential Building and Trades Permit

phone must match	lece is made is a	Date 8/12/13
Owner's Name	KEE HOMES LLC.	Phone 9/0-322-20/6
Site Address 108	Moores Chapel Re	Phone 9/0 322-2016
Directions to job site fr	om Lillington LEFT ON W. OLD ST.	
	LEFT ON NC 27W	
	Right on Time	Surran
Subdivision	Left on moore	schopel
Description of Propose	ed Work SINGLE FAMILY RESIDENTIN	+4 # of Bedrooms 5
Description of Propose	nheated SF //66 Finished Bonus Room?	125 Crawl Space Slab
Heated Sr 237 0	General Contractor Information	
GMI DEVEL	OPMENTINC	910-322-2016
Building Contractor's C	Company Name	Telephone
120 NANDIA	VA CT. FAYETTEVILLE, NC 28311	GEOFF@ MCKEEHOMESNE.COM
Address	at the state of th	Email Address
63970		
License #	Electrical Contractor Informatio	n /
Description of Work 5	INGLE FAMILY RESIDENTIAL Service Size	200 Amps T-Pole YesNo
SANOY RIDGE	ELECTRIC	910-323-2958
Electrical Contractor's	Company Name	Telephone
454 WHITEHE	40 RD. FAYETTEVILLE, NC 28312	KEITH@SANOYRIDGEELECTRIC.COM Email Address
Address		Email Address
100064		
License #	Mechanical/HVAC Contractor Inform	nation
Description of Work	SINGLE FAMILY RESIDENTIAL	
CERTIFIED I	HKATING TALE	910-858-0000
Mechanical Contracto	r's Company Name	Telephone
PO BOX 107	1 HOPEMIUS, NC 28348	CERTIFIED HEATAIR DEMBARD MAIL. COM
Address	110110111111111111111111111111111111111	Email Address MAIL. CON
20012 H3-1		
License #	Plumbing Contractor Information	
		#Baths 3.5
Description of Work	INGLE FAMILY RESIDENTIAL	910-818-4863
Plumbing Contractor	Company Name	Telephone
Plumbing Contractor	MATTANY OD FAVESTEVILLE NO	DELLHAINE PLUMBING & HOTMAIL.
Address	MENTARY OR FAYETTEVILLE, NC 28306	Email Address Com
24204 PL		
License #		on
	Insulation Contractor Informati	910-484-7118
CUMBERLAND	INSUCATION & Address	Telephone
Insulation Contractor	s Company Name & Address	, s.spirans

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 Signature of Owner/Contractor/Officer(s) of Corporation 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 Persect Manager Date 8/12/13

LILLINGTON, NC 27546 For Inspections Call: (910) 893-7525 Fax: (910) 893-2793 Bldg Insp scheduled before 2pm available next business day. Date 8/16/13 Application type description CP NEW RESIDENTIAL (SFD) Subdivision Name PENDING Owner Contractor CAMPBELL WAYNE GML DEVELOPMENT INC 231 STONEBRIER CIR 5112 PINE BIRCH DRIVE APT 104 RALEIGH NC 27606 SPRING LAKE NC 28390 (919) 793-5237 Applicant _______ MCKEE HOMES LLC 5122 PINE BIRCH DR RALEIGH NC 27606 (910) 322-2016 Structure Information 000 000 63X44 5BDR MONO W/ GARAGE Flood Zone FLOOD ZONE X Other struct info # BEDROOMS 5000000.00 PROPOSED USE SFD SEPTIC - EXISTING? NEW TANK WATER SUPPLY COUNTY -----Permit BLDG, MECH, ELEC, PLB, INSU PERMIT Additional desc . . Phone Access Code . 997536
Issue Date . . . 8/16/13 Valuation
Expiration Date . . 8/16/14 _______ Special Notes and Comments T/S: 06/26/2013 09:56 AM JBROCK ----S ON S MAIN ST R ON W OLD RD LEFT ON NC 27 R ON TIM CURRIN L ON MOORES CHAPELS PERMIT INCLUDES BLDG, ELEC, MECH, PLUMB INSULATION AND LAND USE. 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

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 8/16/13

Application Number 13-50031603

Subdivision Name

Property Zoning PENDING

Permit BLDG, MECH, ELEC, PLB, INSU PERMIT

Additional desc . .

997536 Phone Access Code .

Required Inspections

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

PREPARED 9/24/13, 14:46:47 Harnett County

INSPECTION TICKET

INSPECTOR: IVR

PAGE

DATE 9/25/13

ADDRESS . : 108 MOORES CHAPEL RD

SUBDIV:

PHONE :

CONTRACTOR : GML DEVELOPMENT INC

PHONE: (919) 793-5237

OWNER . . : CAMPBELL WAYNE

PARCEL . . : 13-0529- - -0078- - -

APPL NUMBER: 13-50031603 CP NEW RESIDENTIAL (SFD)

DIRECTIONS: T/S: 06/26/2013 09:56 AM JBROCK ----

S ON S MAIN ST R ON W OLD RD LEFT ON NC

27 R ON TIM CURRIN L ON MOORES CHAPELS

STRUCTURE: 000 000 63X44 5BDR MONO W/ GARAGE

FLOOD ZONE . . . : FLOOD ZONE X

BEDROOMS 5000000.00 PROPOSED USE : SFD

SEPTIC - EXISTING? . . . : NEW TANK WATER SUPPLY : COUNTY

PERMIT:	CPSF 00 CP *	SFD	
	REQUESTED	INSP	DESCRIPTION
TYP/SQ	COMPLETED	RESULT	RESULTS/COMMENTS
P309 01	8/28/13	FS	R*PLUMB UNDER SLAB VRU #: 002431765
	8/28/13	AP	Thom Wilkins, McKee Homes, cell 478-808-0775. Request AM inspection. T/S: 08/28/2013 03:37 PM FSPIVEY
A814 01	8/30/13	TW	ADDRESS CONFIRMATION TIME: 17:00 VRU #: 002433928
	9/06/13	AP	108 moores chapel rd lillington 27546 T/S: 09/06/2013 04:22 PM TWARD
B114 01	8/30/13	FS	R*BLDG MONO SLAB/TEMP SVC POLE TIME: 17:00 VRU #: 002433886
	8/30/13	AP	Thom Wilkins, McKee Homes, cell 478-808-0775.
			Request morning inspection. T/S: 08/30/2013 02:35 PM FSPIVEY
R425 01	9/20/13	FS	FOUR TRADE ROUGH IN VRU #: 002442010
	9/20/13	DA	Thom Wilkins, McKee Homes, cell 478-808-0775, AM inspection please.
			T/S: 09/20/2013 01:31 PM FSPIVEY
			joist hanger
		16) smoke detectors
I129 01	3/25/13	TI//-	R*INSULATION INSPECTION VRU #: 002443745
,	107-15	2/2	Also, Re-Inspection for Four Trade Rough-In (missing a truss hanger, had a few electrical items) Thom Wilkins,
		1	McKee Homes, cell 478-808-0775
R425 02	9/25/13	TT/-}	FOUR TRADE ROUGH IN TIME: 17:00 VRU #: 002444123 T/S: 09/24/2013 02:46 PM DJOHNSON

COUNTY OF HARNETT Building Inspections Department Planning Services Certificate of Compliance: Occupancy: 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: **Permit Numbers** Building: Electrical: Address: Insulation: Plumbing: Mechanical: MFG Home: **Building Official:** Date:

PREPARED 12/11/13, 14:13:04 INSPECTION TICKET
Harnett County INSPECTOR: IVR

PAGE

DATE | 12/12/13

ADDRESS . : 108 MOORES CHAPEL RD SUBDIV:

CONTRACTOR : GML DEVELOPMENT INC

PHONE: (919) 793-5237

PHONE :

OWNER . . : CAMPBELL WAYNE

PARCEL . . : 13-0529- - -0078- - -

APPL NUMBER: 13-50031603 CP NEW RESIDENTIAL (SFD)
DIRECTIONS: T/S: 06/26/2013 09:56 AM JBROCK ----

S ON S MAIN ST R ON W OLD RD LEFT ON NC 27 R ON TIM CURRIN L ON MOORES CHAPELS

STRUCTURE: 000 000 63X44 5BDR MONO W/ GARAGE

FLOOD ZONE . . . : FLOOD ZONE X

PERMIT: CPSF 00 CP * SFD

BEDROOMS : 5000000.00 PROPOSED USE : SFD SEPTIC - EXISTING? . . . : NEW TANK WATER SUPPLY : COUNTY

TYP/SQ	REQUESTED COMPLETED	INSP RESULT	DESCRIPTION RESULTS/COMMENTS
P309 01	8/28/13 8/28/13	FS AP	R*PLUMB UNDER SLAB VRU #: 002431765 Thom Wilkins, McKee Homes, cell 478-808-0775. Request AM inspection. T/S: 08/28/2013 03:37 PM FSPIVEY
A814 01	8/30/13 9/06/13	TW AP	ADDRESS CONFIRMATION TIME: 17:00 VRU #: 002433928 108 moores chapel rd lillington 27546 T/S: 09/06/2013 04:22 PM TWARD
B114 01	8/30/13 8/30/13	FS AP	R*BLDG MONO SLAB/TEMP SVC POLE TIME: 17:00 VRU #: 002433886 Thom Wilkins, McKee Homes, cell 478-808-0775. Request morning inspection. T/S: 08/30/2013 02:35 PM FSPIVEY
R425 01	9/20/13 9/20/13	FS DA	FOUR TRADE ROUGH IN VRU #: 002442010 Thom Wilkins, McKee Homes, cell 478-808-0775, AM inspection please. T/S: 09/20/2013 01:31 PM FSPIVEYjoist hanger smoke detectors
I129 01	9/25/13 9/25/13	FS AP	R*INSULATION INSPECTION VRU #: 002443745 Also, Re-Inspection for Four Trade Rough-In (missing a truss hanger, had a few electrical items) Thom Wilkins, McKee Homes, cell 478-808-0775 T/S: 09/25/2013 03:42 PM FSPIVEY
R425 02	9/25/13 9/25/13	FS. AP	FOUR TRADE ROUGH IN TIME: 17:00 VRU #: 002444123 T/S: 09/24/2013 02:46 PM DJOHNSON T/S: 09/25/2013 03:42 PM FSPIVEY
H824 01	10/02/13 10/02/13	OT AP	ENVIR. OPERATIONS PERMIT TIME: 17:00 VRU #: 002448603 T/S: 10/03/2013 10:09 AM SSTEWART T/S: 10/03/2013 10:09 AM SSTEWART T/S: 10/03/2013 10:11 AM SSTEWART
R125 01	10/07/13 10/09/13	FS AP	ONE TRADE ROUGH IN VRU #: 002449361 Please inspect water and septic tank tie-ins. Thom Wilkins, McKee Homes (cell) 478-808-0775. T/S: 10/09/2013 07:16 AM FSPIVEY
R225 01	10/29/13 10/29/13	FS AP	TWO TRADE ROUGH IN VRU #: 002458073 Inspect paper/lath for stone veneer on front porch and garage. Paper/lath completed over this past weekend. Perhaps inspect today, if possible. Thom Wilkins, cell
	· Anglis · ·	Ser.	478-808-0775

PREPARED 12/11/13, 14:13:04 INSPECTION TICKET PAGE Harnett County INSPECTOR: IVR DATE 12/12/13 ADDRESS . : 108 MOORES CHAPEL RD SUBDIV: CONTRACTOR : GML DEVELOPMENT INC PHONE: (919) 793-5237 OWNER . . : CAMPBELL WAYNE PHONE : PARCEL . . : 13-0529- - -0078- - -APPL NUMBER: 13-50031603 CP NEW RESIDENTIAL (SFD) REQUESTED INSP DESCRIPTION TYP/SQ COMPLETED RESULT RESULTS/COMMENTS T/S: 10/29/2013 04:20 PM FSPIVEY ------E209 01 10/30/13 FS R*ELEC TEMP POWER CERT TIME: 17:00 VRU #: 002458974 10/30/13 AP)r/s: 10/30/2013 03:22 PM FSPIVEY ------R429 01 12/12/13 FOUR TRADE FINAL VRU #: 002475259 TI lock box code is 7878 ---- COMMENTS AND NOTES -----