10: 9 Juy 2013

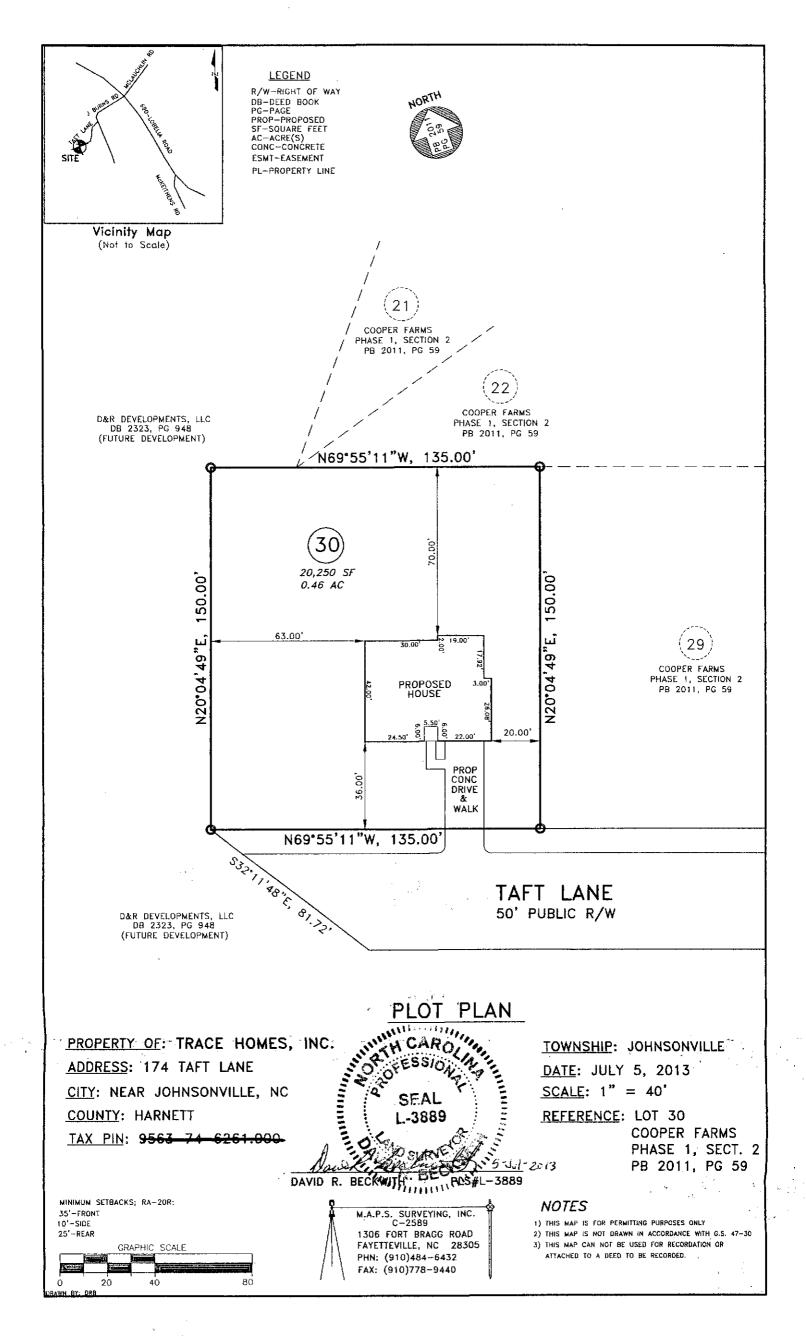
Application	<u> 1350031690</u>
	CU#

COUNTY OF HARNETT RESIDENTIAL LAND USE A	PPLICATION Fax: (910) 893-2793 www.harnett.org/permits
MNER: Trace Homes Inc Mailing Address: 38	57 Legion Rds
HOPE MINS State: NC Zip 23348 ontact # 910 426	2244 Fmail: office Otracehornes
State: NCZip 200 ontact # 385	.com
PLICANT": Trace Homes Inc. Mailing Address: 385	789 - " office Otruchomes no col
y: 140pe WINS State NC Zip: 28348 Contact # 910 987-1* ease fill out applicant information if different than landowner	
Phina Maleur	Phone # 410 987 178 9
Conner Eriems	Lot #: 30 Lot Size: 20, 2301.
ROPERTY LOCATION: Subdivision:	Map Book&Page: 2011 / 59
ate Road # 174 State Road Name: Taff Ln  arcel: 09 9543 0048 27 PIN: 9543 -	74-4310.000
arcel: 09.9503 0043 PIN:	David Company
ning: KAZOR Flood Zone: Watershed: Deed Book&Page: 51007	Fower Company .
lew structures with Progress Energy as service provider need to supply premise number	10m Progress Energy.
PECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:	
ROPOSED USE:  # Raths: Z_ Basement(w/wo bath): Garage:_	Deck: Crawl Space: Slab: Slab:
Mod: (Sizex) # Bedrooms # Baths Basement (w/wo bath) Garage:  (Is the second floor finished? () yes ()no Any other site built a graduated Home:SWDWTW (Sizex) # Bedrooms: Garage:	Site Built Deck:On FrameOff Frame additions? () yes ()no ge:(site built?) Deck:(site built?)
Mod: (Sizex) # Bedrooms # Baths Basement (w/wo bath) Garage:  (Is the second floor finished? () yes ()no Any other site built a graduated Home:SWDWTW (Sizex) # Bedrooms: Garage:	Site Built Deck:On FrameOff Frame additions? () yes ()no ge:(site built?) Deck:(site built?)
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Mod: (Sizex # Bedrooms # Baths Basement (w/wo bath) Garage: (Is the second floor finished? () yes () no Any other site built is   Manufactured Home:SWDWTW (Sizex # Bedrooms: Garage:   Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit:   Home Occupation: # Rooms: Use: Hours of Operation: # Addition/Accessory/Other: (Sizex) Use: New Well (# of dwellings using well   Vater Supply: County Existing Well New Well (# of dwellings using well	Site Built Deck: On Frame Off Frame additions? () yes ()no ge: (site built?)  on: #Employees:  Closets in addition? () yes ()no ) *MUST have operable water before final olete Checklist) County Sewer
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Signature of Owner or Owner's Agent

"This application expires 6 months from the initial date if permits have not been issued"

A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION



APPLICATION #: 1350031690 NAME: Trace Homes Inc \*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. 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	on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.
{}} Acce	epted	{}} Innovative {}} Conventional {}} Any
{}} Alter	rnative	{} Other
		the local health department upon submittal of this application if any of the following apply to the property i "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:
{_}}YES	{ <u></u> } NO	Does the site contain any Jurisdictional Wetlands?
{}}YES	{_}} NO	Do you plan to have an <u>irrigation system</u> 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?
	1	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)

7/9/15 DATE

\* Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address, company name & phone must match

Application # 1350031690

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

## **Application for Residential Building and Trades Permit**

Owner's Name: Trace Homes Inc	Date:13
	Phone: 910 426 2244
Directions to job site from Lillington:	
	Patrici (1971) (
	Page of the control o
Subdivision Company Edwards	Lot: 30
Subdivision: Coopers Farms	Lot:
Description of Proposed Work: Single Family Duelling	
Heated SF: Unheated SF. Finished Bonus Room?	Crawl Space: Slab:
General Contractor Information	COLORDA LOCA
Mclean Contracting and Investments	910 4871784
Building Contractor's Company Name	Telephone
Address Fayetteville NX 28306	Email Address
Address Fayetteville NC 28306	Email Address
7060 S License #	
Electrical Contractor Information	1
Description of Work Rough In Finish Out Service Size:	Amps T-Pole:YesNo
Cyrus Electric	916 797 3095
Electrical Contractor's Company Name	Telephone
7544 Documentary Dr.	
Address Fay NC 28306	Email Address
25212 EL-L	
License #	
Mechanical/HVAC Contractor Inform	<u>ation</u>
Description of Work Rough In / Finish out	
Certified Heating ! AC	910 858 0000
Mechanical Contractor's Company Name	Telephone
POBOX 1071	
Address Hope Mills NC 28348	Email Address
20012 H3-1	
License #	-
Plumbing Contractor Information	<del>n</del>
Description of Work Rough In / Finish Out	# Baths
Kevin Jones Plumbing	910 978 3288
Plumbing Contractor's Company Name	Telephone
6879 Family St.	
Address Fay NC 28314	Email Address
2/018 P-1	
License # Insulation Contractor Information	
Mclean Contracting and investments LCC	910987-1789
Insulation Contractor's Company Name & Address	Telephone

\*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)			
Do you own the land on which this building will be constructed?  Yes No			
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			
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.			
1/23/13			
Total Comments of the Comments			
Signature of Swifer/Contractor/Officer(s) of Corporation Date			
Signature et Owner/Contractor/Officer(s) of Corporation  Affidavit for Worker's Compensation N.C.G.S. 87-14  The undersigned applicant being the:			
Affidavit for Worker's Compensation N.C.G.S. 87-14			
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:			
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			
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:			
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			
Affidavit for Worker's Compensation N.C.G.S. 87-14  The undersigned applicant being the:  General Contractor  Owner  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			
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.			
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			

Man Box #	Dat Job	Name Trace Fines
Ap# 3 49	Tallinon	7220 <b>SQ</b> Feet 2117
Crin/	Slab	Mono
foolig	Footing	Plumbing Under Slab
fountation	Foundation	Ele. Under Slab
Addies	Address	Address
Openfloor	Slab	Mono Slab
Roughin	Roughin	Rough In
<b>Ansulation</b>	Insulation	Insulation
Fina!	Final	Final
>2500	>2500	>2500
Foundation Survey	Envir. Health	Other
		************
Additions / Other		
ooting		
oundation		
JUITUUIVII		

Mono\_\_\_

Open Floor\_

Rough In\_

Insulation\_

Final\_\_\_\_

## DO NOT REMOVE!

## Details: Appointment of Lien Agent

Entry #: 33154

Filed on: 08/01/2013

Initially filed by: Trace.Homes

## Designated Lien Agent

First American Title Insurance Company

Online: www.liensnc.com (http://www.liensnc.com)

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

27601

Phone: 888-690-7384

Fax: 913-489-5231

Email: support@liensnc.com (mailto:support@liensnc.com)

**Project Property** 

Lot 9- 224 Harding Ln. 9563-75-3037 099563 00 48 17 Lot 10- 215 Harding Ln. 9563-74-2887 099 563 0048 18 Lot 11- 16 Nixon Ln. 9563-74-4800 099563 0048 19 Lot 28-120 Taft Ln. 9563-74-62 61 099563 0048 25 Lot 30- 174 Taft Ln. 9563-74-4310 099563 0048 27

Tax Map: 2011-59 Cooper Farms

Cameron, NC 28326

Pre-Permit Workers

NONE

Property Type

Other

Owner Information

Trace Homes Inc. 3857 Legion Rd Hope Mills, NC 28348 United States Email: office@tracehomesnc.com

Phone: 910-426-2244

Contractor Information

McLean Contracting and Investments, LLC 3350 Footbridge Ln St. 124 Fayetteville, NC 28306

Email: mclean\_contracting@hotmail.com

Phone: 910-987-1789

Print & Post



Contractors:

Please post this notice on the Job Site.

Suppliers and Subcontractors:

Scan this image with your smart phone to v iew this filing. You can then file a Notice t o Lien Agent for this project.

Technical Support Hotline: (888) 690-7384

135 316 690

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. Date 8/01/13 Property Zoning . . . . . . RES/AGRI DIST - RA-20R Owner Contractor -----TRACE HOMES INC MCLEAN CONTRACTING AND 3857 LEGION RD INVESTMENTS, LLC NC 28348 HOPE MILLS 305 W LIONFISH CT FAYETTEVILLE NC 28306 (910) 987-1789 Applicant -----TRACE HOMES INC #30 3857 LEGION RD HOPE MILLS (910) 987-1789 NC 28348 Structure Information 000 000 44X52 4BDR MONO W/ GARAGE Flood Zone . . . . . . . FLOOD ZONE X
Other struct info . . . # BEDROOMS 4000000.00
PROPOSED USE SFD SEPTIC - EXISTING? WATER SUPPLY NEW TANK COUNTY Permit . . . . . BLDG, MECH, ELEC, PLB, INSU PERMIT Additional desc . . Phone Access Code . 994954
Issue Date . . . 8/01/13 Valuation . . . . 0
Expiration Date . . 8/01/14 ------Special Notes and Comments T/S: 07/09/2013 01:21 PM JBROCK ----COOPERS CREEK #30 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

Seq	Phone Insp#	Insp Code	Description	Initials	Date
10-30 10-999 10-999 20-999 20 30-50 30-60 30-60 30-60 40-60 40-60 40-60	814 309 205 114 104 129 425 125 325 225 429 131 329 229	A814 P309 E205 B114 B104 I129 R425 R125 R325 R225 R429 R131 R329 R229	ADDRESS CONFIRMATION R*PLUMB UNDER SLAB R*ELEC UNDER SLAB R*BLDG MONO SLAB/TEMP SVC POLE R*FOUND & SETBACK VERIF SURVEY R*INSULATION INSPECTION FOUR TRADE ROUGH IN ONE TRADE ROUGH IN THREE TRADE ROUGH IN TWO TRADE ROUGH IN FOUR TRADE FINAL ONE TRADE FINAL THREE TRADE FINAL THREE TRADE FINAL		
999	227	H824	ENVIR. OPERATIONS PERMIT		//

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 910-893-2793 - www.harnett.org/permits Certification of Work Performed By Owner/Contractor (Individual Trade Application)

Owner (s) of Structure: Trace Homes Inc Phone: 910 426 2244
Owner (s) Mailing Address: 3857 Legion Rd
HOPE MINS NC 28948
Land Owner Name (s): Trace tomes Inc Phone: 910 426 2244
Construction or Site Address:
PIN # Parcel #
Job Cost:Description of Work to be done
Mechanical: New Unit With Ductwork New Unit Without Ductwork Gas Piping Other
* Electrical*: 200 Amp <200 Amp Service Change Service Reconnect Other   * For Progress Energy customers we need the premise number
Plumbing: Water/Sewer Tap Number of Baths Water Heater
Specific Directions to Job from Lillington:
Subdivision: Lot #:
(Contractors Name) [Trade] Iabor on this structure.
I am the building owner or my NC state license number is 22985L, which entitles me to
perform such work on the above structure legally. All work shall comply with the State Building Code and all
other applicable State and local laws, ordinances and regulations.
Tarheel Pride Electric Corp  Contractor's Company Name  Telephone  Telephone
PO Box 458 Stedman NC 28391  Address Email Address
22.985 <sup>L</sup> License #
Structure Owner / Contractor Signature: Date: 19 Aug 13
By signing this application you affirm that you have obtained permission from the above listed license holder to purchase permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or set the listed property for 12 months after completion of the listed work.

\*Company name, address, & phone must match information on license

88.1105.0H 9AM

MAP REFERENCE: MAP NO. 2011-59

120.00

45.00

FOUNDATION

EXISTING HOUSE

23.75

120.00

29

57.9

24.58

22.00

25.1

.00.9

20.25

N 50°04'49"E

0.465 AC.

19.00

M.46+.40.02 S

30

70.3

⊕ Eis

S 69\*55'11"E

135.00

EIS



EIS

N 69°55'11"W

135.00

EIS

"TAFT LN." 50' R/W

35.6

Mickey R.Bennett PLS



TOWNSHIP JOHNSONVILLE SURVEY FOR:

COOPER FARMS S/D, PHASE ONE SECTION TWO FOUNDATION LOCATION SURVEY - LOT - 30

COUNTY HARNETT

BENNETT SURVEYS
1662 CLARK RD.,LILLINGTON,N.C. 27546

(910) 893-5252 40' SURVEYED BY AVB

FIELD BOOK DRAWING NO. 13334

STATE: NORTH CAROLINA ZONE WATERSHED DISTRICT RA-20R

DATE: SEPTEMBER 10.2013

CHECKED & CLOSURE BY: SCALE: 1"= 40' DRAWN BY: RVB

31690