

Initial Application Date: 8/28/2012

Application # 13500 32019

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: SEA 2, LLC Mailing Address: 3531 Chathamville Springs Road
City: FURRAY VARIAN State: NC Zip: 27526 Contact No: 919-649-6554 Email: williamcvairino@gmail.com

APPLICANT*: SEA 2, LLC Mailing Address: SAME
City: SAME State: _____ Zip: _____ Contact No: SAME Email: SAME

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: _____ Phone # _____

PROPERTY LOCATION: Subdivision: Magnolia Crest Lot #: 2 Lot Size: .71 ACRES
State Road # 1415 State Road Name: Rancho Club Map Book & Page: 2007 | 39
Parcel: 08 0655 0067 03 PIN: 0655-52-4544
Zoning: RA30 Flood Zone: NO Watershed: NO IV Deed Book & Page: 2715, 213 Power Company*: DUKE PROGRESS

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

PROPOSED USE:

- SFD: (Size 38'4" x 56') # Bedrooms: 3 # Baths: 2 Basement(w/wo bath): NO 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/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: 1 Manufactured Homes: _____ Other (specify): _____

Required Residential Property Line Setbacks:		Comments:
Front	Minimum <u>35</u> Actual <u>38.9</u>	_____
Rear	<u>25</u> <u>80.5</u>	_____
Closest Side	<u>10</u> <u>40.8 Left 58.9 Right</u>	_____
Sidestreet/corner lot	_____	_____
Nearest Building on same lot	_____	_____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 401 North to RAWLS CLUB RD.
TURN ~~Left~~^{Right} ON RAWLS CLUB. TURN Left ON CURRAGH COVE.
Second Lot on Left.

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.

William J. Cini m/m
Signature of Owner or Owner's Agent

5/24/2013
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

SURVEY FOR

SEA 2, LLC

LOT 2, MAGNOLIA CREST SUBDIVISION, MAP # 2007-39

HECTOR'S CREEK TOWNSHIP HARNETT COUNTY NORTH CAROLINA

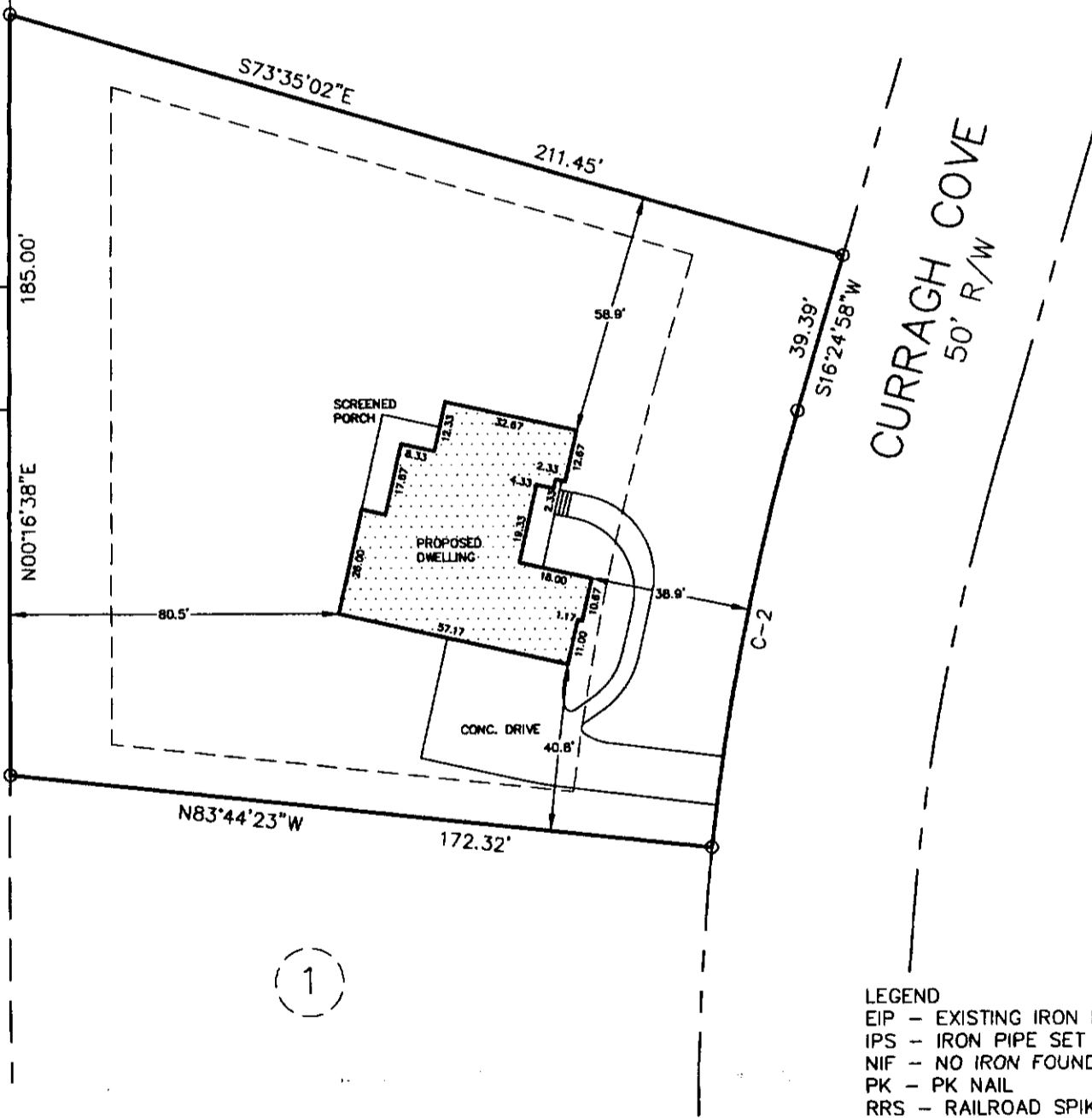
SCALE: 1: 40' HARNETT COUNTY PIN# 0655-52-4544

CURVE TABLE				
CURVE	LENGTH	RADIUS	BEARING	CHORD DIST.
C-2	108.50	612.16	S11°20'18"W	108.36

MAP # 2007-39



(3)



CURRAGH COVE
50' R/W

(1)

- LEGEND
- EIP - EXISTING IRON PIPE
 - IPS - IRON PIPE SET
 - NIF - NO IRON FOUND
 - PK - PK NAIL
 - RRS - RAILROAD SPIKE

ADDRESS:
CURRAGH COVE
FUQUAY-VARINA, N.C. 27526

ASHWORTH
LAND SURVEYING
PO BOX 388, FUQUAY-VARINA, N.C. 27526 919-552-1857

08/19/2013

PRELIMINARY PLAT

AREA
31,066 sq. ft.
0.71 acres

NAME: SEA 2, LLC

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. foundation maybe if permitted
 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.

Walt L. Conner m/a
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

8/28/2013
DATE

Harnett County Central Permitting
PO Box 65 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 SEA 2, LLC Date 8/29/2013
Site Address 45 CURRAGH COVE, FURRAY VARIAN NC Phone 919-649-6554
Directions to job site from Lillington 401 North to Rawls Club Road, Turn Right. Make next left on to CURRAGH COVE, Second lot on left.

Subdivision Magnolia Crest Lot 2
Description of Proposed Work NEW S/F # of Bedrooms 3
Heated SF 2284 Unheated SF _____ Finished Bonus Room? Crawl Space Slab _____

General Contractor Information

SEA 2, LLC Telephone 919-649-6554
Building Contractor's Company Name _____
3531 Chalybeate Springs Road Furray Varian Email Address williamcvarin@gmail.com
Address 67685

Electrical Contractor Information

Description of Work _____ Service Size 200 Amps T-Pole Yes _____ No
DAWSON Electric, INC Telephone 919-201-3841
Electrical Contractor's Company Name _____
3754 Cokesbury Road Email Address _____
Address FURRAY VARIAN, NC 27526
25948-L

Mechanical/HVAC Contractor Information

Description of Work _____ Telephone 919-669-9509
HVAC Specialist
Mechanical Contractor's Company Name _____
5843 Cokesbury Road Furray Varian, NC Email Address _____
Address 27526
22035

Plumbing Contractor Information

Description of Work _____ # Baths 2
Straight Flush Plumbing, INC. Telephone 919-422-8044
Plumbing Contractor's Company Name _____
979 Mitchell Road, Lillington, NC 27546 Email Address _____
Address 23655

Insulation Contractor Information

INSULATION, INC Telephone 919-772-9000
Insulation Contractor's Company Name & Address _____

*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

Will J. Linn m/m
Signature of Owner/Contractor/Officer(s) of Corporation

8/28/2013
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 SEA-2, LLC

Sign w/Title Will J. Linn m/m

Date 8/28/2013

2 Magnolia Crest

Plan Box # A-4

Date 8-28-13

Job Name Geo 2 LLC

App # 1350032019

Valuation 179126

SQ Feet 2757

Inspections for SFD/SFA

Crawl <u>X</u>	Slab _____	Mono _____	Basement _____
Footing	Footing	Plum Under Slab	Footing
Foundation	Foundation	Ele. Under Slab	Foundation
Address	Address	Address	Waterproofing
Open Floor	Slab	Mono Slab	Plum Under slab
Rough In	Rough In	Rough In	Address
Insulation	Insulation	Insulation	Slab
Final	Final	Final	Open Floor
			Rough In
			Insulation
			Final

Foundation Survey YES Envir. Health New Tank Other _____

Additions / Other

Footing _____

Foundation _____

Slab _____

Mono _____

Open Floor _____

Rough In _____

Insulation _____

Final _____

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 59555

Filed on: 10/24/2013

Initially filed by: Watermark

Designated Lien Agent

Stewart Title Guaranty Company

Online: 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

Project Property

Lot #2, Magnolia Crest Subdivision in Map #2007-39 and 2007-40
45 Curragh Cove
Fuquay Varina, NC 27526
Harnett County

Property Type

1-2 Family Dwelling

Print & Post



Contractors:

Please post this notice on the Job Site.

Suppliers and Subcontractors:

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

Owner Information

Watermark, LLC
3531 Chalybeate Springs Road
Fuquay Varina, NC 27526
United States
Email: williamcurrin@gmail.com
Phone: 919-649-6554

Technical Support Hotline: (888) 690-7384

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 13-50032019 Date 11/06/13
Property Address 45 CURRAGH CV
PARCEL NUMBER 08-0655- - -0067- -03-
Application type description CP NEW RESIDENTIAL (SFD)
Subdivision Name MAGNOLIA CREST 29LOTS
Property Zoning RES/AGRI DIST - RA-30

Owner	Contractor
-----	-----
SEA 2 LLC	SEA 2 LLC
3531 CHALYBEATE SPRINGS ROAD	3531 CHALYBEATE SPRINGS RD
FUQUAY VARINA NC 27526	FUQUAY VARINA NC 27526
	(919) 669-8576

Applicant

SEA 2 LLC #2
3531 CHALYBEATE SPRINGS RD
FUQUAY VARINA NC 27526

--- Structure Information 000 000 58.4X56 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

Permit BLDG, MECH, ELEC, PLB, INSU PERMIT
Additional desc . . .
Phone Access Code . . . 999532
Issue Date 11/06/13 Valuation 0
Expiration Date . . . 11/06/14

Special Notes and Comments
T/S: 08/29/2013 10:14 AM VBROWN ----
CURRAGH COVE, MAGNOLIA CREST #2.
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.

Page 2
Date 11/06/13

Application Number 13-50032019
 Property Address 45 CURRAGH CV
 PARCEL NUMBER 08-0655- - -0067- -03-
 Application description CP NEW RESIDENTIAL (SFD)
 Subdivision Name MAGNOLIA CREST 29LOTS
 Property Zoning RES/AGRI DIST - RA-30

Permit BLDG, MECH, ELEC, PLB, INSU PERMIT

Additional desc . . .
 Phone Access Code . . . 999532

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	_____	___/___/___
30	104	B104	R*FOUND & SETBACK VERIF SURVEY	_____	___/___/___
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	_____	___/___/___