Initial Application Date:	12/1/2015
Initial Application Date:	

Application #	1350032202R	,
	01111	

# COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION et, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (91

**Central Permitting** 

108 E. Front Street, Lillington, NC 27546

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: Comfort Homes	, Inc.	Mailing Address: P O Box 3	69
City: Clayton	State: NC Zip: 2752	8 Contact No: 919 553 3242	69Email: comfrthomes@aol.com
APPLICANT*: Comfort Homes,	Inc. Mailing	Address: P O Box 369	
City: Clayton	State: NC Zip: 2752	8 Contact No: 919 553 3242	Email: comfrthomes@aol.com
*Please fill out applicant information if	different than landowner		
CONTACT NAME APPLYING IN	OFFICE: Julian Stewart		Phone #
PROPERTY LOCATION: Subdivi	sion: Austin Farms		Lot #: 16 Lot Size: 49501 sq t
State Road #	State Road Name: Twin Fields	Drive	Map Book & Page 2006 / 782-78
		PIN: 0645-08-5763.000	
			Power Company*: Duke Progress Energy
*New structures with Progress En	ergy as service provider need to	supply premise number 03986523	from Progress Energy.
PROPOSED USE:		_	
✓ SFD: (Size 42' x49') #	Bedrooms: $\frac{3}{4}$ # Baths: Base the bonus room finished? ( $\checkmark$ ) ye	ment(w/wo bath): Garage: [ s () no w/ a closet? () yes (_∕	Deck: ✓ Crawl Space: ✓ Slab: Monolithic Slab: Slab: No (if yes add in with # bedrooms)
		ment (w/wo bath) Garage: §	Site Built Deck: On Frame Off Frame ions? () yes () no
☐ Manufactured Home:SV	VDWTW (Sizex	) # Bedrooms: Garage:_	(site built?) Deck:(site built?)
□ Duplex: (Sizex)	No. Buildings:	No. Bedrooms Per Unit:	
☐ Home Occupation: # Rooms	:Use:	Hours of Operation:	#Employees:
□ Addition/Accessory/Other: (S	Sizex) Use:		Closets in addition? () yes () no
Water Supply: <u>✓</u> County	Existing Well New W	lell (# of dwellings using well	_ ) *Must have operable water before final
Sewage Supply: ✓ New Sept	ic Tank (Complete Checklist)	Existing Septic Tank (Complete 0	Checklist) County Sewer
			00') of tract listed above? () yes (✓) no
Does the property contain any eas	sements whether underground or	overhead $(X)$ yes $(\underline{)}$ no	
Structures (existing or proposed):	Single family dwellings: propose	ed Manufactured Homes:	Other (specify):
Required Residential Property	Line Setbacks: Comm	ments:	
Front Minimum 30'	Actual 66'		
Rear 25'	180'		
Closest Side 15'	15'		
Sidestreet/corner lot_n/a			
Nearest Building n/a			

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 42 W out of Fuquay	; left on Oak Ridge Duncan; left on Twin Fields
If permits are granted I agree to conform to all ordinances and laws of the State of North Card I hereby state that foregoing statements are accurate and correct to the best of my knowledge	olina regulating such work and the specifications of plans submitted.  e. Permit subject to revocation if false information is provided.
tarben a te	12/1/2015
Signature of Owner or Owner's Agent	Date

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

<sup>\*\*\*</sup>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.\*\*\*

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 Cpde 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.

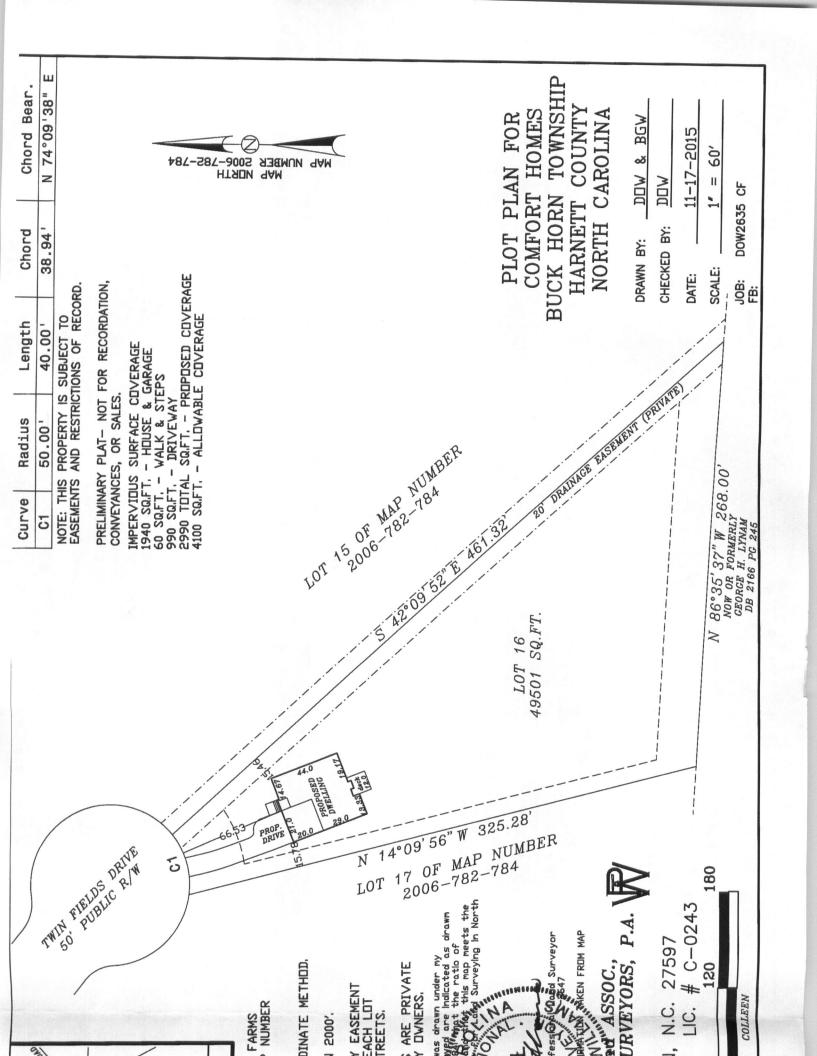
SEPTIC				to contrain entitling for remaining permits.
	g for authorizat	ion to construct please inc	licate desired system type(s):	can be ranked in order of preference. must choose one.
{}} Acc	cepted	{}} Innovative	(_X) Conventional	{}} Any
{}} Alte	ernative			
The applic question.	ant shall notify If the answer i	y the local health departn s "yes", applicant MUST	nent upon submittal of this ap CATTACH SUPPORTING	oplication if any of the following apply to the property in DOCUMENTATION:
{}}YES	{} NO	Does the site contain a	ny Jurisdictional Wetlands?	acrostal
{}}YES	(X) NO		irrigation system now or in	
{_}}YES	$\{\underline{X}\}$ NO		ng contain any <u>drains</u> ? Please	
{}}YES	$\{\frac{X}{N}\}$ NO			Wastewater Systems on this property?
{}}YES	1 NO			other than domestic sewage?
{}}YES			proval by any other Public A	
{\\YES	{}} NO	Are there any Easemen	ts or Right of Ways on this p	roperty?
{_}}YES	NO IN	Does the site contain ar	y existing water, cable, phor	ne or underground electric lines? - only@ street right
		If yes please call No C	uts at 800-632-4949 to locate	the lines. This is a free service.
I Have Read	This Applicati	ion And Certify That The	Information Provided Herein	Is True, Complete And Correct. Authorized County And
State Officia	ls Are Granted	l Right Of Entry To Cond	uct Necessary Inspections To	Determine Compliance With Applicable Laws And Rules.
Y Y * Y .	1 001	E 52 965		· ·

I Understand That I Am Solely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

The Site Accessible So That A Complete Site Evaluation Can Be Performed.

10/10



Application #

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 & phone must match

Application for Residential Building and Trades Permit

Owner's Name Conclored blomes Inc	
Site Address 1000 11250 E-0140 M	Date 12-1-15
Directions to job site from Lillington 42 West out of	Quary Phone 919-553-3242
De Branch Chillington 49 Most out o	Truguer left on
Cax Kidge Suncan: 1887 on I.	Eddin Tile
Subdivision Hustin Farms	Lot \\C
Description of Proposed Work Construction of Sing	and lind al
Heated SF ASN Unheated SF 415 Finished Bonus Room General Contractor Informat	The Edition of Bedrooms
General Contractor Informat	Crawl Space Ulb Slab
Concort Homes Inc	^ ^
Building Contractor's Company Name	719-553-3343 Telephone
862015 20 robush Claylor NC 20528	Concethomes @ aol. Com
Address	Email Address
33184	
License #	e ec.
Electrical Contractor Informat	ICD
Description of Work Rough in + Trimout Service Size	
Summerfield Electric Electrical Contractor's Company Name	9/9-975-0599 Telephone
	relephone
705 Thunksgiving Vol. Fire Ded. Rd. Selan NC	Email Address
72825	Littali Address
License #	
Mechanical/HVAC Contractor Info	nation
Description of Work Rough in + trimout + other Vental	Non
Stephenson Heating + Air	919-329-0686
Mechanical Contractor's Company Name	Telephone
343 Shipwash Dr. Garner NC. 27529	
Address	Email Address
18644	
License #	
Plumbing Contractor Information	
Description of Work Rough in + Trimquit	# Baths
Ambit Plumbing Plumbing Contractor's Company Name	919-934-1379
Plumbing Contractor's Company Name	Telephone
755 Rock Pillan Rd. Clayton NC 27520	P 1 A J J
Address	Email Address
20823 License #	
Insulation Contractor Informat	nc
Tatum Insulation - 519 old Drugton Rd. Garner	919-661-0999
Insulation Contractor's Company Name & Address	Telephone

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

table water 12-1-15
Signature of Owner/Contracto Officer(s) of Corporation 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) rfirm(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
them Has one (1) or more subcontractors(s) and has obtained workers compensation insurance to cover
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
Company or Name Confist Homes In
Sign w/Title Lattie White County Date 12-1-15

December 1, 2015

Comfort Homes, Inc. has an option to purchase Lot 16 in Austin Farms Subdivision, recorded in Map Book 2006, Pages 782-784, Harnett County Register of Deeds.



I, Patricia F. Waite, do hereby certify that Julian R. Stewart, President of Comfort Homes, Inc., personally appeared before me this day and acknowledged the due execution of the foregoing instrument.

Witness my hand and Notarial Seal, this 1st day of December 2015.

(Notary Public)

My commission expires 4/2/17.



### DO NOT REMOVE!

## Details: Appointment of Lien Agent

Entry #: 386627

Filed on: 11/30/2015 Initially filed by: ComfortHomes

#### Designated Lien Agent

WFG National 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(milto:support@liensnc.com)

#### **Project Property**

Austin Farms Lot 16 166 TWIN FIELDS DRIVE 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

Comfort Homes, Inc. P O Box 369 Clayton, NC 27528 United States Email: comfrthomes@aol.com Phone: 919-553-3242

View Comments (0)

Technical Support Hotline: (888) 690-7384