Initial Application Date:	17-1	10-	3
minds rippilodilon bate.	<u> </u>		

Residential Land Use Application

Application # _	1350	032	29.	3
	CU#			

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Central Permitting

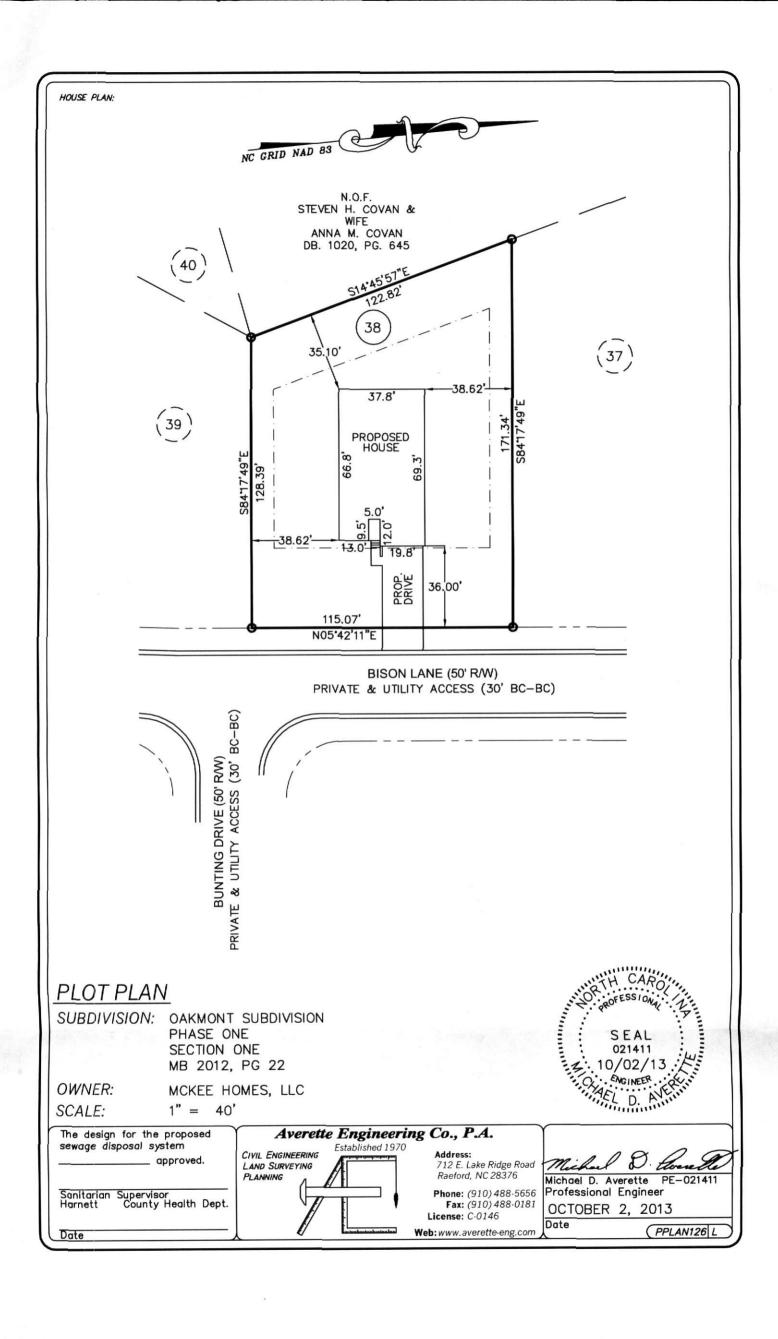
108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits

A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION LANDOWNER: McKee Homes, LLC Mailing Address: 120 Nandina Ct City: Fayetteville Zip: 28311 State: NC Contact No: (910) 475-7100 ext 713 Email: mkoenen@mckeehomesnc.com APPLICANT*: McKee Homes, LLC _ Mailing Address: 120 Nandina Court City: Fayetteville State: NC Zip: 28311 Contact No: (910) 475-7100 ext 713 Email: mkoenen@mckeehomesnc.com Please fill out applicant information if different than landowner CONTACT NAME APPLYING IN OFFICE: Michiline Koenen Phone # (910) 475-7100 ext 713 PROPERTY LOCATION: Subdivision: Oakmont _____Lot #:<u>38</u>___Lot Size: - **3**8**A**C State Road Name: Bison Lane State Road # 164 Parcel: 030507-0046-43 PIN: 0507-32-0439 Zoning: Natershed A / Power Company*: Central Electric *New structures with Progress Energy as service provider need to supply premise number _____ PROPOSED USE: Ø SFD: (Size 37 x 69) # Bedrooms: 3 # Baths: 2 Basement(w/wo bath): Garage: ✓ Deck: Crawl Space: Slab: Monolithic (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: 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 (_\frac{\frac{1}{2}}{2}) no Manufactured Homes: ____ Other (specify):____ Structures (existing or proposed): Single family dwellings: Required Residential Property Line Setbacks: Comments: Front Rear Closest Side Sidestreet/corner los Nearest Building on same lot

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Head west on E Front St toward S 1st St, Take the 2nd left onto
S Main St, Turn right onto W Old Rd, Turn left onto NC-27 W, Turn left onto Nursery Rd, Turn right onto Kramer Rd, Turn right onto
Docs Rd, Take the 2nd right onto Executive, Turn left on Bison Ln.
f 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. hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

^{***}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:	McKee Hom	es, LLC		APPLICATION #:
Cou IF THE IP PERMIT depending I Env	nty Health D NFORMATION IN OR AUTHORIZA gupon documental 910-893-7525 rironmental He All property in lines must be of Place "orange out buildings, s Place orange E If property is the evaluation to be All lots to be a for failure to u After preparing 800 (after select confirmation nu Use Click2Gov ironmental He Follow above in Prepare for ins	*This application to be five partment Application in this application is part and in the search of the partment Application in the partment of	on for Improvement ALSIFIED, CHANGED, OR ALL BECOME INVALID. E plan = 60 months; Comple mCode 800 sible. Place "pink propately every 50 feet betwach corner of the proposice flags per site plan did in location that is easiental Health requires the should be able to walk asiness days after continuous for proof of requirements of multiple permits exist cording for proof of requirements. Code 800 ags and card on propertial over outlet end of to	confirmation. *25.00 return trip fee may be incurred at 910-893-7525 option 1 to schedule and use code to Central Permitting. The series of t
:	Prepare for ins possible) and to DO NOT LEAVE After uncoverin	spection by removing so hen put lid back in place ELIDS OFF OF SEPTIC TA ng outlet end call the vo	oil over outlet end of the control	tank as diagram indicates, and lift lid straight up (if s for a septic tank in a mobile home park) at 910-893-7525 option 1 & select notification permit
• SEPTIC	given at end of Use Click2Gov	recording for proof of re or IVR to hear results.	<u>quest</u> . Once approved, procee	ealth inspection. Please note confirmation number d to Central Permitting for remaining permits. can be ranked in order of preference, must choose one.
{□} Ad	ecepted	{□} Innovative	{☑} Conventional	{☑} Any
{□} Al	ternative	{ □ } Other		
The appliquestion.	icant shall notify If the answer is	the local health department "yes", applicant MUST A	nt upon submittal of this a TTACH SUPPORTING	application if any of the following apply to the property in G DOCUMENTATION:
{□}YES	S {☑} NO	Does the site contain any	Jurisdictional Wetlands?	
{□}YES	S {☑} NO	Do you plan to have an in	rigation system now or in	the future?
{□}YES	S {☑} NO	Does or will the building	contain any drains? Pleas	se explain
{□}YES	{ ☑ } NO	Are there any existing we	ells, springs, waterlines or	Wastewater Systems on this property?
{□}YES	S {☑} NO	Is any wastewater going	to be generated on the site	e other than domestic sewage?
{□}YES	G {☑} NO	Is the site subject to appr	oval by any other Public	Agency?
{☑}YES	G {□} NO	Are there any Easements	or Right of Ways on this	property?
{☑}YES	S {□} NO	Does the site contain any	existing water, cable, pho	one or underground electric lines?
		If yes please call No Cut	s at 800-632-4949 to loca	ate 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 A	ccessible	So Th	at A Comple	te Site I	Evaluation	Can E	Se Performed.	
10/	. 1. 1	/		/	_			

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

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 27546
910 893 7525 Fax 910 893 2793 www harnett org/permits

Application # 3 2 2 9 3

Application for Residential Building and Trades Permit

Owner's NameMcKee Homes, LLC	Date 1)-19-13
Site Address 104 Bison lane	Phone (910) 475-7100 ext 713
Directions to job site from Lillington Twn left onto 5.	
W Old Rd, Turn Flett onto NC-27W,	TURN LOKE ONTO MUSSELL
turn right onto Wamer 12d turn right	on Doss Rd, 2nd right to Executive, Follow
Subdivision Oakmont	10 38 to Bisan Lane
Description of Proposed Work Single Family Residential	Lot 38 +0 Bisan Lane, # of Bedrooms 3
Heated SF 1883 Unheated SF 890 Finished Bonus Ro	
General Contractor Info	
GML Development Inc	(910) 475-7100 ext 713
Building Contractor's Company Name	Telephone
120 Nandina Ct, Fayetteville NC 28311	mkoenen@mckeehomesnc.com
Address	Email Address
63970	
License #	
Description of Work Single Family Residential Service	
Sandy Ridge Electric	e Size 200 Amps T-Pole X Yes No
Electrical Contractor's Company Name	(910) 323-2458
454 Whitehead Rd, Fayetteville, NC 28312	Telephone keith@sandyridgeelectric.com
Address	Email Address
100064	Email Address
License #	
Mechanical/HVAC Contracto	r Information
Description of Work Single Family Residential	
Certified Heating & A/C	(910) 858-0000
Mechanical Contractor's Company Name	Telephone
PO Box 1071, Hope Mills, NC 28348	certifiedheatair@embarqmail.com
Address	Email Address
20012 H3-1	
License #	
Plumbing Contractor Info	<u>ormation</u>
Description of Work Single Family Residential	# Baths
Dell Haire Plumbing	(910) 818-4863
Plumbing Contractor's Company Name	Telephone
7612 Documentary Drive, Fayetteville, NC 28306	dellhaireplumbing@hotmail.com
Address	Email Address
24204 PL	
License #	over ettop
Cumberland Insulation	AND THE PARTY OF T
Insulation Contractor's Company Name & Address	(910) 484-7118 Telephone
Tana a transfer of the transfe	: otopitotio

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.

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
Wicheling Ouler 11-19-13
Signature of Owner/Contractor/Officer(s) of Corporation Date
Affidavit for Worker's Compensation N C G S 87-14
The undersigned applicant being the
X 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
$\frac{X}{covering}$ 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 McKee Homes, LLC
Sign w/Title Wychilmer Oull Date 11-19-13

Details: Appointment of Lien Agent

Entry #: 69369

Filed on: 11/19/2013

Initially filed by: mkoenen

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

Oakmont Lot 38 164 Bison Lane Lillington, NC 27546 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

McKee Homes, LLC 5112 Pine Birch Drive Raleigh, NC 27606 United States

Email: mkoenen@mckeehomesnc.com

Phone: 254-317-5076

Date of First Furnishing

2013-12-02

Technical Support Hotline: (888) 690-7384

LILLINGTON, NC 27546 For Inspections Call: (910) 893-7525 Fax: (910) 893-2793 Bldg Insp scheduled before 2pm available next business day. Application Number 13-50032293 Date 12/03/13 Property Address 164 BISON LN Application type description CP NEW RESIDENTIAL (SFD) Subdivision Name OAKMONT PH1 SECT2 25LOTS Property Zoning RES/AGRI DIST - RA-20R Owner Contractor ______ ______ OAKMONT DEV PTNRS LLC GML DEVELOPMENT INC 5112 PINE BIRCH DRIVE 5112 PINE BIRCH DRIVE NC 27606 RALEIGH RALEIGH NC 27606 (919) 793-5237 Applicant MCKEE HOMES LLC #38 120 NANDINA CT NC 28311 FAYETTEVILLE (910) 475-7100 --- Structure Information 000 000 37X69 3BDR MONO W/ GARAGE Flood Zone FLOOD ZONE X Other struct info # BEDROOMS # BEDROOMS PROPOSED USE 3000000.00 SFD SEPTIC - EXISTING? NEW TANK WATER SUPPLY COUNTY Permit BLDG, MECH, ELEC, PLB, INSU PERMIT Additional desc . . Phone Access Code . 1010230
Issue Date . . . 12/03/13 Valuation
Expiration Date . . 12/03/14 ______ Special Notes and Comments T/S: 10/10/2013 09:35 AM JBROCK ----OAKMONT #38 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

Application Number 13-50032293 Page 2

Application Number 13-50032293

Property Address 164 BISON LN

Permit BLDG, MECH, ELEC, PLB, INSU PERMIT

Additional desc . .

Phone Access Code . 1010230

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
10-30	814	A814	ADDRESS CONFIRMATION		/ /
10-999	309	P309	R*PLUMB UNDER SLAB		— <i>'</i> /— <i>'</i> /—
10-999	205	E205	R*ELEC UNDER SLAB		
20-999	114	B114	R*BLDG MONO SLAB/TEMP SVC POLE		— _/ — _/ —
20	104	B104	R*FOUND & SETBACK VERIF SURVEY		//
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		//

COUNTY OF HARNETT Building Inspections Department Planning Services Certificate of Compliance: x 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: **Permit Numbers** Name: GML Development Inc. Building: 13-50032293 Electrical: 7 \ Address: 164 Bison Lu. Insulation: _____ / \ Plumbing: _____ Mechanical: MFG Home: **Building Official:** Date: 3-21-14

PRESED 3/20/14, 15:09:00
Harnett County

INSPECTION TICKET INSPECTOR: IVR

PAGE

3/21/14

ADDRESS . : 164 BISON LN SUBDIV: OAKMONT PH1 SECT2 25LOTS

CONTRACTOR : GML DEVELOPMENT INC

PHONE: (919) 793-5237

OWNER . . : OAKMONT DEV PTNRS LLC

PHONE :

PARCEL . . : 03-0507- - -0046- -43-

APPL NUMBER: 13-50032293 CP NEW RESIDENTIAL (SFD)

DIRECTIONS: T/S: 10/10/2013 09:35 AM JBROCK ----

OAKMONT #38

STRUCTURE: 000 000 37X69 3BDR MONO W/ GARAGE

FLOOD ZONE . . . : FLOOD ZONE X

BEDROOMS : 3000000.00 PROPOSED USE : SFD SEPTIC - EXISTING? . . . : NEW TANK WATER SUPPLY : COUNTY

	CPSF 00 CP * REQUESTED	INSP	DESCRIPTION
TYP/SQ	COMPLETED	RESULT	RESULTS/COMMENTS
P309 01	12/11/13	MR	R*PLUMB UNDER SLAB VRU #: 002474583
	12/11/13	AP	T/S: 12/11/2013 01:32 PM MREARIC
B114 01	12/13/13	MR	R*BLDG MONO SLAB/TEMP SVC POLE VRU #: 002475531
	12/13/13	AP	T/S: 12/13/2013 12:47 PM MREARIC
B104 01	1/13/14	JB ·	R*FOUND & SETBACK VERIF SURVEY TIME: 17:00 VRU #: 002484038
	1/13/14	AP	T/S: 01/13/2014 09:15 AM JBROCK
A814 01	1/14/14	TW	ADDRESS CONFIRMATION TIME: 17:00 VRU #: 002483980
	1/27/14	AP C	164 BISON LN LILLINGTON 27546 LOT 38
			T/S: 01/27/2014 04:48 PM TWARD
R425 01	1/14/14	MR	FOUR TRADE ROUGH IN TIME: 17:00 VRU #: 002484046
	1/14/14	DA	T/S: 01/14/2014 01:20 PM MREARIC
			stud needed over small garage door at cut / no plumbing
			tests ready / window missing ,
			NOTE + posts at back porch are to be at 5' from left side
T100 01	7 /7 5 /7 4	MD	and 6'8" from right side
I129 01	1/16/14	MR	R*INSULATION INSPECTION VRU #: 002484772
D405 00	1/16/14	AP	T/S: 01/16/2014 01:34 PM MREARIC
R425 02	1/16/14	MR	FOUR TRADE ROUGH IN VRU #: 002484756
H824 01	1/16/14	AP	T/S: 01/16/2014 01:35 PM MREARIC
H824 UI	1/22/14 1/22/14	BM DA	ENVIR. OPERATIONS PERMIT TIME: 17:00 VRU #: 002487098 T/S: 01/22/2014 12:39 PM SSTEWART
	1/22/14	DA	PER BRYAN MCSWAIN PERMIT ON HOLD FOR PUMP AND ALARM TO BE
			CHECKED. WHEN THIS IS READY FOR INSPECTION CALL BRYAN AT
			910-893-7547 TO SCHEDULE.
E209 01	2/26/14	MR	R*ELEC TEMP POWER CERT TIME: 17:00 VRU #: 002496925
	2/26/14	AP	/f/S: 02/26/2014 03:04 PM MREARIC
H824 02	3/04/14	BM .	ENVIR. OPERATIONS PERMIT TIME: 17:00 VRU #: 002499705
	3/04/14	AP V	T/S: 03/05/2014 11:49 AM SSTEWART
	- , ,		T/S: 03/05/2014 11:49 AM SSTEWART
R429 01	3/20/14	MR	FOUR TRADE FINAL VRU #: 002505055
	3/20/14	CA	T/S: 03/20/2014 01:57 PM MREARIC
R429 02	3/21/14	TI	FOUR TRADE FINAL TIME: 17:00 VRU #: 002505790
		AP-MR	