Residential Land Use Application

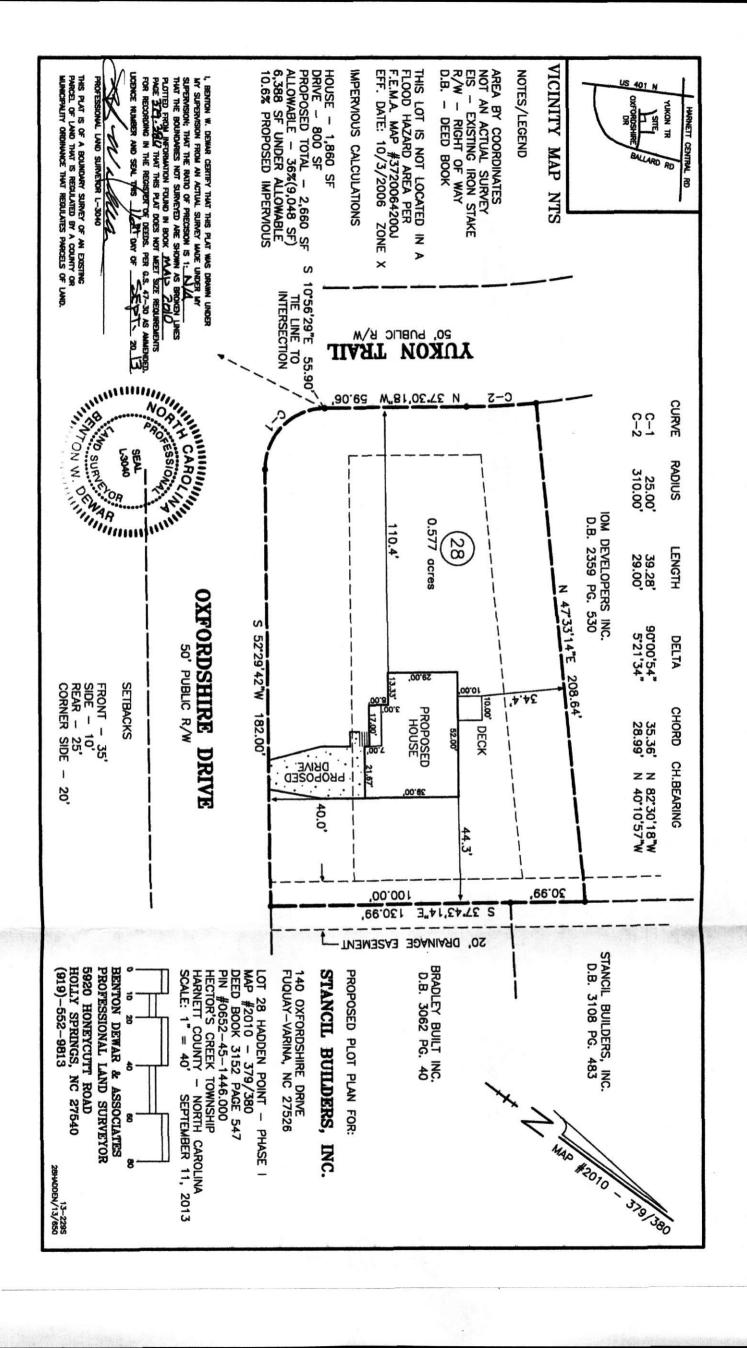
Initial Application Date: 10-14-13	Application # 135003 2309
COUNTY OF HARNETT RESIDENTIAL LAND USE Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ex	CU#APPLICATION tt:2 Fax: (910) 893-2793 www.harnett.org/permits
"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REC	QUIRED WHEN SURMITTING A LAND USE ADD ICATIONS
LANDOWNER: STANCIL BUILDING Mailing Address: 466	5 - 2) 6 11 O O
City: ANGIEX State: X Zip: 2750 Contact No: 919-1669-16	DIFFICIL IZU
APPLICANT: STANCIL BUILDING Mailing Address: 466 STAN	ru Ro
City: ANGIEK State: NX Zip: 27501 Contact No. 2919 291-6. *Please fill out applicant information if different than landowner	240 Email: FLSTANCIL C
	embaramail com
CONTACT NAME APPLYING IN OFFICE: RICHARD DENNING	Phone #_ 291 _ 6240
PROPERTY LOCATION: Subdivision: HADDEN POINTE	Lot #: 28 Lot Size - 577
State Road * 770 State Road Name: Ballard Kd.	Man Book & Desay 2010 . 279
PIN: 0652-45	1446.000
Zoning: KA-2011 Flood Zone: X Watershed: \ \ Deed Book & Page: 2 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	7 2000 Duko E P.
*New structures with Progress Energy as service provider need to supply premise number 2322	from Progress Energy.
PROPOSED USE:	
SFD: (Size 52 × 39) # Bedrooms: 3 # Baths: 2 Basement(w/wo bath): Garage: Gar	Monolithic Monolithic
(Is the bonus room finished? () yes () no w/ a closet? () yes	Deck: Craw Space: Slab: Slab: Slab: () no (if yes add in with # bedrooms)
Mod: (Sizex) # Bedrooms # Baths Basement (w/wo bath) Garage: (Is the second floor finished? () yes () no Any other site built a	Site Built Deck: On Frame Off Frame
☐ Manufactured Home:SWDWTW (Sizex) # Bedrooms: Garage	
Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit:	
☐ Home Occupation: # Rooms: Use: Hours of Operation	#Employees
) USE	Closets in addition? () yes () no
Water Supply: X 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)	te Checklist) County Source
Does owner of this tract of land, own land that contains a manufactured home within five hundred feet	t (500') of tract listed above 2 ()
Does the property contain any easements whether underground or overhead () yes (X) no	
Structures (existing or proposed): Single family dwellings:	Other (specify):
Front Minimum 35 Actual	
Rear a5	
Closest Side 10	
Sidestreet/corner lot_20	
Nearest Building on same lot	

Page 1 of 2
APPLICATION CONTINUES ON BACK

03/11

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

^{***}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.***



NAME: STANCIL BUILDIES, Inc APPLICATION #:_		
*This application to be filled out when applying for a continue to		
IF THE INFORMATION IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT DEPOSITION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration upon documentation submitted. (Complete site plan = 60 months; Complete plat = without expiration) 910-893-7525 option 1		
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 proper lines must be clearly flagged approximately every 50 feet between corners. 		
 Place orange nouse corner flags" at each corner of the proposed structure. Also flag driveways, garages, deck place orange Environmental Health card in location that is easily viewed from an additional flags. 		
evaluation to be performed. Inspectors should be able to walk freely around site. Do not see that you clean out the undergrowth to allow the so		
THE TOTAL TO BE GUILLESSED WILLIAM TO DISTINGS HAVE ATTOP CONTINUATION BOR AN		
 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 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 (possible) and then interest in the property. 		
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 permits 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. 		
If applying for authorization to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.		
{} Accepted {} Innovative {} 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 <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?		
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) DATE		
DAIL		

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 for Residential Building and Trades Permit

Owner's Name STANCIL BUILDINS	Date	
Site Address 140 Oxfordshire Dr. Fuquay Varina	27526 Phone 919-669-1274	
Directions to job site from Lillington 401 TOWARDS FUGURY - VARINA,		
TURN RIGHT ON BALLARD RD, PROSS RB TRACKS,		
I MILE HANDEN SUBDIVISION ON LEFT		
Subdivision HADDEN POINTE	Lot 28	
Description of Proposed Work 51NGLE FAMILY DWELLING # of Bedrooms 3		
Heated SF 1340 Unheated SF Finished Bonus Room? NO Crawl Space X Slab		
General Contractor Information	1	
STANCIL BUILDING	919-669-1274	
Building Contractor's Company Name	Telephone	
466 STANCIL RD ANGITAL		
Address	- FLSTANCILO embaro	
	Email Address	
034533 License #		
Electrical Contractor Information	n	
Description of Work SFD Service Size	Amps T-Pole XYes No	
3NO ELECTRICAL		
Electrical Contractor s Company Name	919-427-6952 Telephone	
	releptione	
19655 NC 210 HWY, ANGIER		
Address	Email Address	
13075-L		
License # Mechanical/HVAC Contractor Information		
Description of Work		
1	BIQ 220 N/8/	
Mechanical Contractor's Company Name	419 - 329 - 0686 Telephone	
343 SHIPWASH DR. GARNER	releptione	
Address	Email Address	
18644 H3-I		
License #		
Plumbing Contractor Information		
Description of Work SFD	# Baths 2	
BARNES PLLMBING, INC	919-639-0935	
Plumbing Contractor's Company Name	Telephone	
P.O. BOX 1207, ANGIEL	**************************************	
Address	Email Address	
P17735		
License #		
Insulation Contractor Information		
INSULATING. Inc	919-661-0999	
Insulation Contractor's Company Name & Address	Telephone	
INSULATING, TAC Insulation Contractor & Garner Grant G		

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 bed current fee schedule Signature of Øwner/Contractor/Officer(s) of Corporation Affidavit for Worker's Compensation N C G S 87-14 The undersigned applicant being the Officer/Agent of the Contractor or Owner Owner General Contractor 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 BUILDERS Company or Na Date (C Sign w/Title

I hereby certify that I have the authority to make necessary application that the application is correct

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 54689

Filed on: 10/10/2013 Initially filed by: StancilBuildersInc

Designated Lien Agent

Fidelity National Title Company, LLC

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

Pre-Permit Workers

None

2013-10-14

Notification Alert Emails:

1. bgoldston@embarqmail.com

Date of First Furnishing

Project Property

Lot 28 Hadden Pointe PH 1 Map 2010 Pg 379 Deed Bk 2359 Pg 530

Tax Map: 2010 , Lot: 28 140 Oxfordshire Drive Fuquay Varina, NC 27526

Tax Parcel ID: 080652002415

Property Type

1-2 Family Dwelling

Owner Information

Stancil Builders Inc. 466 Stancil Road Angier, NC 27501 United States

Email: bgoldston@embarqmail.com

Phone: 919-639-2073

Contractor Information

Stancil Builders Inc. 466 Stancil Road Angier, NC 27501

Email: bgoldston@embarqmail.com

Phone: 919-639-2073

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.

Technical Support Hotline: (888) 690-7384