

Initial Application Date: 1-9-14

Application # 1450032733

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: Diversified Investors Inc. Mailing Address: P.O. Box 1685

City: Jacksonville State: NC Zip: 28540 Contact No: 910-346-9800 Email: bettyb@jlpnc.com

APPLICANT: Atlantic Construction Inc Mailing Address: 7 Doris Ave. E.

City: Jacksonville State: NC Zip: 28540 Contact No: 910-938-9053 Email: aci@atlanticconstruction.com

\*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: \_\_\_\_\_ Phone # \_\_\_\_\_

PROPERTY LOCATION: Subdivision: Sweetwater Lot #: 70 Lot Size: 0.34 AC

State Road # 2044 State Road Name: Will Lucas Rd Map Book & Page: 2011 1470-475

Parcel: 010544 0004 78 PIN: 0544-47-3302,000

Zoning: RA-20R Flood Zone: X Watershed: NA Deed Book & Page: 0236310941 Power Company\*: South River Electric

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

PROPOSED USE:

SFD: (Size 42 x 45) # Bedrooms: 3 # Baths: 2 1/2 Basement (w/wo bath): \_\_\_\_\_ Garage:  Deck: \_\_\_\_\_ Crawl Space: \_\_\_\_\_ Slab:  Monolithic 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:

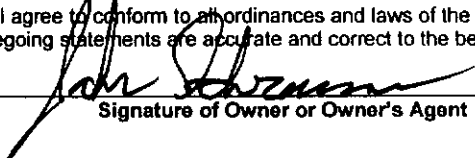
Front Minimum \_\_\_\_\_ Actual 36  
Rear \_\_\_\_\_ 100.50  
Closest Side \_\_\_\_\_ 18.75  
Sidestreet/corner lot \_\_\_\_\_  
Nearest Building on same lot \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: \_\_\_\_\_

South 401  
Turn Right on W. Reeves Bridge Rd  
Turn Left on Will Lucas Rd  
Turn Left on Hybrid Ln To Lot- 70

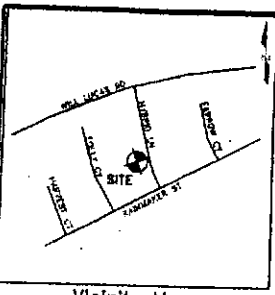
If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted. I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

  
\_\_\_\_\_  
Signature of Owner or Owner's Agent

1-9-14  
\_\_\_\_\_  
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\*\*

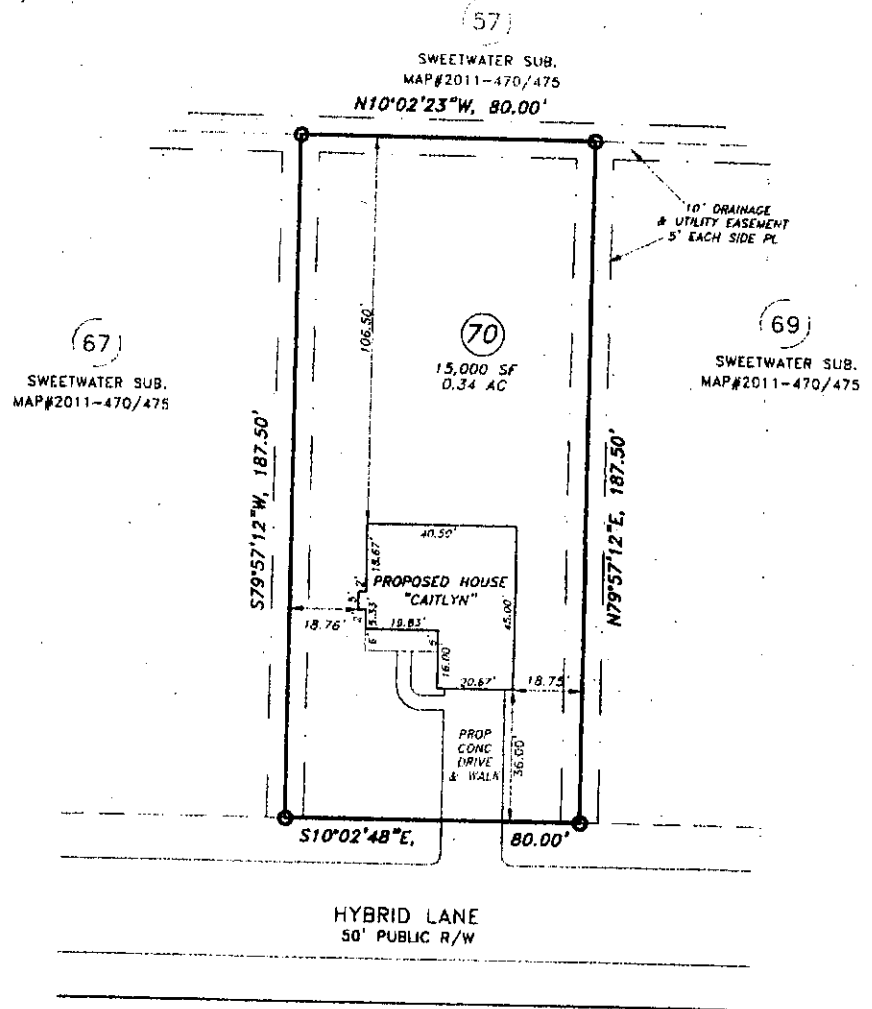


Vicinity Map  
(Not to Scale)

**LEGEND**

- R/W - RIGHT OF WAY
- DB - DEED BOOK
- PG - PAGE
- PROP - PROPOSED
- SF - SQUARE FEET
- AC - ACRE(S)
- CONC - CONCRETE
- ESMT - EASEMENT
- PL - PROPERTY LINE

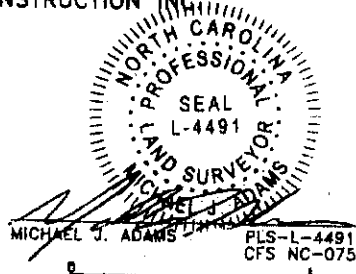
MAP #2011  
PGS 470-475



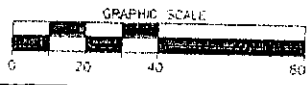
**PLOT PLAN**

**PROPERTY OF:** ATLANTIC CONSTRUCTION INC.  
**ADDRESS:** 32 HYBRID LANE  
**CITY:** LINDEN, NC  
**COUNTY:** HARNETT  
**TAX PIN:** 0544-47-3302.000

**TOWNSHIP:** STEWARTS CREEK  
**DATE:** JANUARY 3, 2014  
**SCALE:** 1" = 40'  
**REFERENCE:** LOT 70  
 SWEETWATER SUB  
 MAP # 2011  
 PGS 470-475



MINIMUM SETBACKS:  
 35' - FRONT  
 10' - SIDE  
 25' - REAR  
 20' - CORNER



M.A.P.S. SURVEYING, INC.  
 C-2589  
 1306 FORT BRAGG ROAD  
 FAYETTEVILLE, NC 28305  
 PHN: (910)484-8432  
 FAX: (910)778-9440

**NOTES**

- 1) THIS MAP IS NOT A CERTIFIED SURVEY AND NO AFFLIANCE MAY BE PLACED IN ITS ACCURACY.
- 2) THIS MAP IS FOR PERMITTING PURPOSES ONLY.
- 3) THIS MAP CAN NOT BE USED FOR RECORDATION OR ATTACHED TO A DEED TO BE RECORDED.
- 4) THIS MAP IS NOT DRAWN IN ACCORDANCE WITH G.S. 47-30

DRAWN BY: DFR

NAME: ATLANTIC CONSTRUCTION INC.

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. \_\_\_\_\_  
 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)

1-9-14  
DATE

**DIVERSIFIED INVESTORS INC.**  
**P.O. BOX 1685 – 405 JOHNSON BLVD.**  
**JACKSONVILLE, NC 28540**  
**(910) 346-9800 – FAX (910) 346-1210**  
**E-mail: bettyb@jlpnc.com**

July 21, 2011

Re: Sweetwater Subdivision – Harnett County, NC

To Whom It May Concern:

As the developers of Sweetwater Subdivision, we have granted Atlantic Construction Inc., to construct single family dwellings in the subdivision project.

Should you have any questions or need any additional information concerning this authorization, please do not hesitate to contact me.

Sincerely,



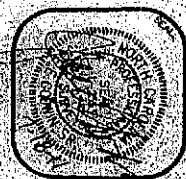
Betty Bullock, President  
DIVERSIFIED INVESTORS INC.

bb

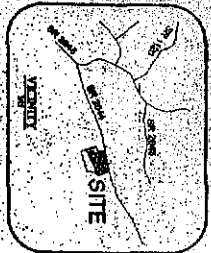
THIS PLAT IS TO BE USED  
IN CONJUNCTION WITH  
SHEETS S-2, S-3, S-4 & S-5

Having been approved by the State Board of Engineering and Surveying, this plat is hereby certified to be correct in all particulars.

DATE: APRIL 28, 2011  
SCALE: AS SHOWN  
DRAWN BY: J.SSR  
CHECKED BY: J.SSR



JASON S. DANAGER  
Professional Engineer  
D.B. 11088, P.E. 183

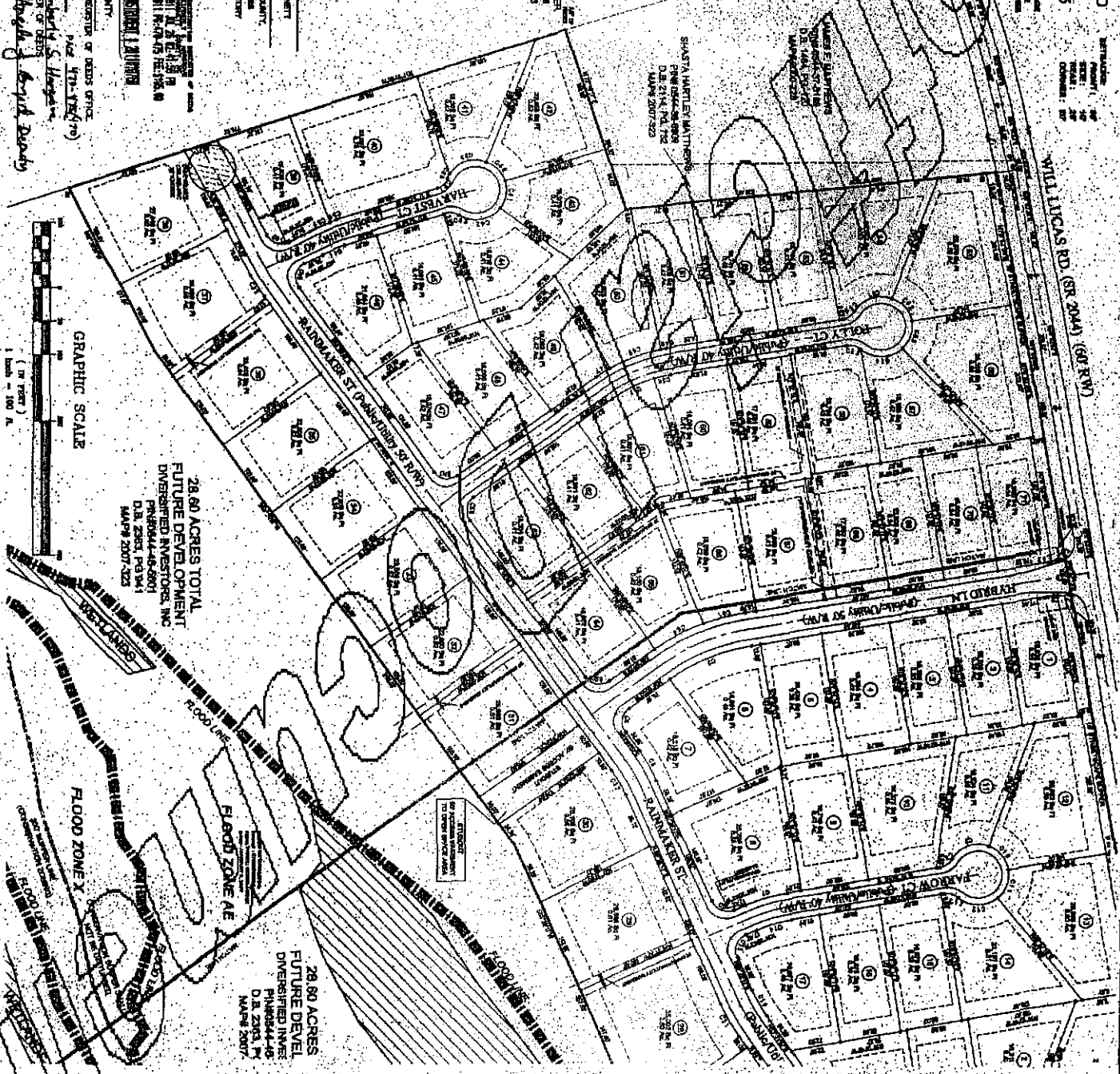


**REVIEW ENGINEER'S CERTIFICATE**  
STATE OF NORTH CAROLINA, COUNTY OF HARNETT  
I, **David A. Adams**, Review Engineer of Harnett County, North Carolina, do hereby certify that the above plat to which this certificate is appended meets all statutory requirements for recording.

REGISTERED PROFESSIONAL ENGINEER  
No. 10000  
D.B. 11088, P.E. 183  
M.B. 2011, R.C. 0415, HARNETT CO. NC

REGISTER OF DEEDS CERTIFICATE  
**DAVID A. ADAMS**  
STATE OF NORTH CAROLINA, HARNETT COUNTY  
I, **David A. Adams**, Register of Deeds of Harnett County, North Carolina, do hereby certify that the above plat to which this certificate is appended meets all statutory requirements for recording.

REGISTERED IN PLAT BOOK 2411, PAGE 178-179 (7/10)  
by *Joseph J. Boyd, Deputy*



GRAPHIC SCALE  
1 inch = 100 feet

28.80 ACRES TOTAL  
FUTURE DEVELOPMENT  
DIVERSIFIED INVESTORS, INC.  
P.O. BOX 1585  
JACKSONVILLE, NC 28540  
MAY 9, 2007

28.80 ACRES  
FUTURE DEVEL  
DIVERSIFIED INVE  
P.O. BOX 1585  
JACKSONVILLE, NC  
MAY 9, 2007

**SUBDIVISION PLAT  
FOR  
SWEETWATER  
SUBDIVISION**

LOCATION:  
WILL LUCAS RD (SR 2044)  
STEWART'S CREEK TOWNSHIP  
HARNETT COUNTY, NC

PROPERTY OWNER(S):  
DIVERSIFIED INVESTORS, INC.  
P.O. BOX 1585  
JACKSONVILLE, NC 28540

PLAN INFORMATION	
DESIGNED BY: EE, PA	HORIZONTAL SCALE 1" = 100'
DRAWN BY: EE, PA	VERTICAL SCALE: AS SHOWN
CHECKED BY: J.SSR	DATE CREATED: APRIL 28, 2011
SURVEY INFORMATION:	

**Enoch  
Engineers, P.A.**  
CONSULTING ENGINEERS & SURVEYORS  
1403 NC Highway 50 South - Randle, NC 27224  
Phone: (919) 894-7760 Fax: (919) 894-8190  
E-mail: general@enochengineers.com

S-1  
Sheet 1 of 5  
Enoch 3440

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 Diversified Investors Inc. Date \_\_\_\_\_  
Site Address 32 Hybrid Ln. Linden, NC 28356 Phone 910-346-9800  
Directions to job site from Lillington South on 401, Turn Right onto  
W. Reeves Bridge Rd, Turn Left onto Will Lucas Rd,  
Turn Left on Hybrid Ln to Lot 70  
Subdivision Sweetwater Lot 70  
Description of Proposed Work S.F.D. # of Bedrooms 3  
Heated SF 1977 Unheated SF 561 Finished Bonus Room?  Crawl Space \_\_\_\_\_ Slab

**General Contractor Information**

Atlantic Construction Inc 910-938-9053  
Building Contractor's Company Name Telephone  
7 Doris Ave. E. Jacksonville, NC 28540 aci@atlanticconstructioninc.com  
Address Email Address  
37596  
License #

**Electrical Contractor Information**

Description of Work S.F.D. new Service Size 200 Amps T-Pole  Yes \_\_\_\_\_ No  
B+N Electric 910-531-4913  
Electrical Contractor's Company Name Telephone  
5449 Hwy 2105 Steadman, NC 28391  
Address Email Address  
09622  
License #

**Mechanical/HVAC Contractor Information**

Description of Work S.F.D. new  
MARK-AIR INC 910-484-6565  
Mechanical Contractor's Company Name Telephone  
P.O. Box 41104 Fayetteville NC 28309-1104  
Address Email Address  
15874  
License #

**Plumbing Contractor Information**

Description of Work S.F.D. new # Baths 2 1/2  
Dell Haire Plumbing 910-429-9939  
Plumbing Contractor's Company Name Telephone  
7612 Decumantony DR. Fayetteville, NC 28306  
Address Email Address  
24204 P-1  
License #

**Insulation Contractor Information**

A-1 Insulation Inc. PO Box 130 Hope Mills, NC 28348 910-850-3462  
Insulation Contractor's Company Name & Address Telephone

\*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

*[Signature]*  
Signature of Owner/Contractor/Officer(s) of Corporation

1-9-14  
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 ATLANTIC CONSTRUCTION INC.

Sign w/Title *[Signature]* Vice President Date 1-7-14



### Designated Lien Agent

---

Investors Title Insurance Company

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

Address: 19 W Hargett St, Suite 507 / Raleigh, NC 27601

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

Fax: (919) 489-5231

Technical

Support Hotline: (888) 690-7384

Entry Number: 84256

Filed by: twotees

Payment Amount: \$25.00

Filing Date: 01/07/2014



### Owner Information

---

Diversified Investors, Inc.

P.O. Box 1685

Jacksonville

NC

28540

United States

910-346-9800

[bettyb@jlpnc.com](mailto:bettyb@jlpnc.com)

### Project Property

---

Sweetwater Lot 70 Map: 2011-470

Parcel # ID 010544000478

32 Hybrid Ln.

Linden, NC

NC

28356

Property Type: 1-2 Family Dwelling

Date First Furnished:

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 . . . . . 14-50032733 Date 2/17/14  
Property Address . . . . . 32 HYBRID LN  
PARCEL NUMBER . . . . . 01-0544- - -0004- -78-  
Application type description CP NEW RESIDENTIAL (SFD)  
Subdivision Name . . . . . SWEETWATER 71LOTS  
Property Zoning . . . . . RES/AGRI DIST - RA-20R

Owner Contractor  
-----  
DIVERSIFIELD INVESTORS INC OWNER  
PO BOX 1685  
JACKSONVILLE NC 28540

Applicant  
-----  
ATLANTIC CONSTRUCTION INC #70  
7 DORIS AVE E  
JACKSONVILLE NC 28540  
(910) 938-9053

--- Structure Information 000 000 42X45 3BDR SLAB W/ GARAGE  
Flood Zone . . . . . FLOOD ZONE X  
Other struct info . . . . . # BEDROOMS 3000000.00  
PROPOSED USE SFD  
SEPTIC - EXISTING? NEW TANK  
WATER SUPPLY COUNTY

-----  
Permit . . . . . BLDG, MECH, ELEC, PLB, INSU PERMIT  
Additional desc . . .  
Phone Access Code . 1015379  
Issue Date . . . . . 2/17/14 Valuation . . . . . 0  
Expiration Date . . 2/17/15

-----  
Special Notes and Comments  
T/S: 01/09/2014 11:54 AM JBROCK ----  
SWEETWATER #70  
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.

Application Number . . . . .	14-50032733	Page	2
Property Address . . . . .	32 HYBRID LN	Date	2/17/14
PARCEL NUMBER . . . . .	01-0544- - -0004- -78-		
Application description . . .	CP NEW RESIDENTIAL (SFD)		
Subdivision Name . . . . .	SWEETWATER 71LOTS		
Property Zoning . . . . .	RES/AGRI DIST - RA-20R		
Permit . . . . .	BLDG,MECH,ELEC,PLB,INSU PERMIT		
Additional desc . . .			
Phone Access Code .	1015379		

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	111	B111	R*BLDG SLAB INSP/TEMP SVC POLE	_____	___/___/___
30-999	309	P309	R*PLUMB UNDER SLAB	_____	___/___/___
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	_____	___/___/___



Vicinity Map  
(Not to Scale)

MAP#2011  
PGS 470-475



**LEGEND**

- R/W-RIGHT OF WAY
- DB-DEED BOOK
- PG-PAGE
- EIR-EXISTING IRON REBAR
- SF-SQUARE FEET
- AC-ACRE(S)
- PB-PLAT BOOK
- AG-ABOVE GROUND
- BG-BELOW GROUND
- (F)-FIELD MEASUREMENT
- (R)-RECORDED MEASUREMENT
- SURVEYED LINE
- EASEMENT LINE
- - - LINE NOT SURVEYED

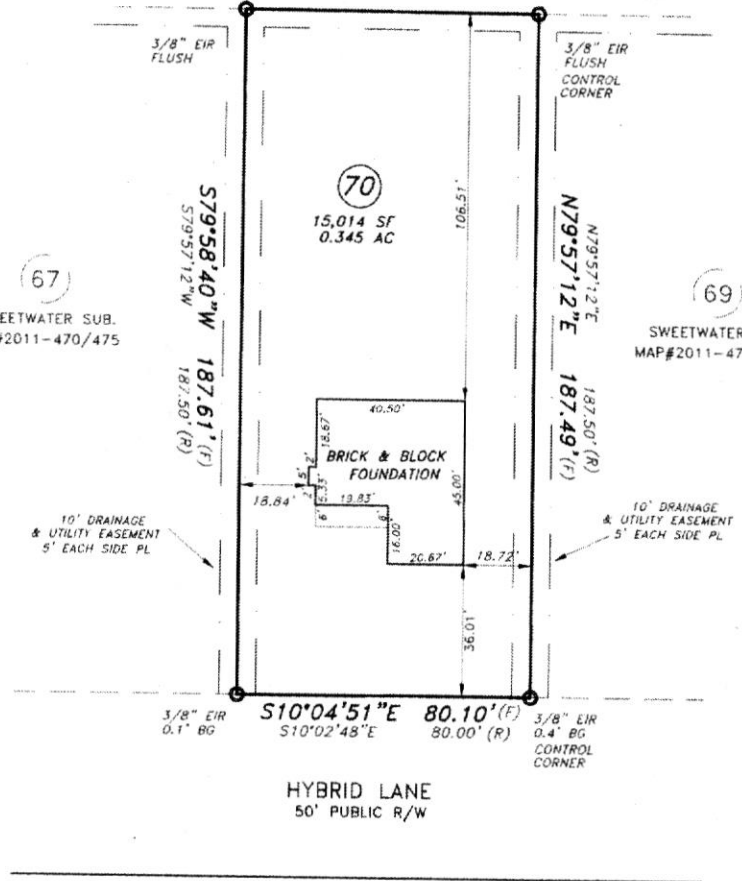
(57)

SWEETWATER SUB.  
MAP#2011-470/475

$N10^{\circ}02'23''W$  80.00' (R)  
 $N09^{\circ}59'23''W$  80.01' (F)

(67)  
SWEETWATER SUB.  
MAP#2011-470/475

(69)  
SWEETWATER SUB.  
MAP#2011-470/475

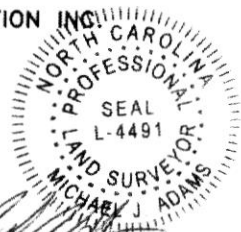


32733

**FOUNDATION SURVEY**

**PROPERTY OF: ATLANTIC CONSTRUCTION INC!**  
**ADDRESS: 32 HYBRID LANE**  
**CITY: LINDEN, NC**  
**COUNTY: HARNETT**  
**TAX PIN: 0544-47-3302.000**

**TOWNSHIP: STEWARTS CREEK**  
**DATE: MARCH 6, 2014**  
**SCALE: 1" = 40'**  
**REFERENCE: LOT 70**  
**SWEETWATER SUB**  
**MAP # 2011**  
**PGS 470-475**



MICHAEL J. ADAMS PLS-L-4491  
CFS NC-075

MINIMUM SETBACKS:  
 35'-FRONT  
 10'-SIDE  
 25'-REAR  
 20'-CORNER



M.A.P.S. SURVEYING, INC.  
 C-2589  
 1306 FORT BRAGG ROAD  
 FAYETTEVILLE, NC 28305  
 PHN: (910)484-6432  
 FAX: (910)778-9440

I CERTIFY THAT THIS MAP WAS DRAWN UNDER MY SUPERVISION FROM AN ACTUAL SURVEY MADE UNDER MY SUPERVISION. DEED DESCRIPTION RECORDED IN MAP# 2011-470/475, THAT THE BOUNDARIES NOT SURVEYED ARE INDICATED AS DRAWN FROM INFORMATION IN MAP# 2011-470/475; THAT THE RATIO OF PRECISION OR POSITIONAL ACCURACY IS GREATER THAN 1:10,000; AND THAT THIS MAP MEETS THE REQUIREMENTS OF THE STANDARDS OF PRACTICE FOR LAND SURVEYING IN NORTH CAROLINA (21 NCAC 56.1600). THIS MAP IS NOT DRAWN IN ACCORDANCE WITH GS 47-30, THIS 6TH DAY OF MARCH, 2014.

DRAWN BY: MJA

## Jennifer Brock

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**From:** John Schramm <john@atlanticconstructioninc.com>  
**Sent:** Thursday, March 20, 2014 2:21 PM  
**To:** Jennifer Brock  
**Subject:** Changeing Eletric subcontractors

Jennifer

I would like to change my eletric subcontractor. Please let me know if this possible and if so how to go about it.  
Thank you so much.

Application # 32733

32732

**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: \_\_\_\_\_ Phone: \_\_\_\_\_

Owner (s) Mailing Address: \_\_\_\_\_

Land Owner Name (s): \_\_\_\_\_ Phone: \_\_\_\_\_

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 #: \_\_\_\_\_

I John Timothy will provide the Electric labor on this structure.  
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 22985, 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

910-973-1527  
Telephone

6126 Azelia dr Steadman NC 26391  
Address

\_\_\_\_\_  
Email Address

22985  
License #

Structure Owner / Contractor Signature: [Signature] Date: 3-26-14

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 sell the listed property for 12 months after completion of the listed work.

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