on same lot

Residential Land Use Application

Application #	145	00	33351	A
• • • • • • • • • • • • • • • • • • • •		-		

03/11

				CU#	
Central Permitting			BIDENTIAL LAND USE AF Bone: (910) 893-7525 ext2		www.harnett.org/permits
"A RECORDED S	SURVEY MAP, RECORDED DEED	(OR OFFER TO PURCH	ASE) & SITE PLAN ARE REQUI	RED WHEN SUBMITTING A L	AND USE APPLICATION**
ANDOWNER: AM	Rlue	4	Mailing Address: 15	redom	, Load
ANDOWNER: 1 YALD	100 au N	- 2831L	\widehat{Q} \widehat{Q} \widehat{Q} \widehat{Q} \widehat{Q}	62-5-11 (16)	ue Bjunac
the Carre	STATE:/ VC	_ep= <u>0>Co</u> con	BICHIO IC	CIMED LAD	00 m) 001 100
PPLICANT*:		Mailing Address	;		
ity:	State:	Zip: Cont	lact No:	Email:	
	mation if different than landowner			01	110- 2
ONTACTINAME APPLY	YINGUNOFFICE: AM	ber 13/46	2	_ BRENES 410-10	14456L
	1 .				
	: Subdivision: Hemine		1	LOT #:	Lot Size: 1 · 13 Acr
	State Road Name:		9 16 21 9	59 171	- FL 12012
D A 74	Zone: Watershed:	<i>∏</i>	3205.14	57. 2 6	7,000
oning: <u>A & V</u> Flood	Zone: Watershed:	Deed Book	8 Page: 12 7 16	Power Company":fro	- Program Engrav
New structures with Prog	gress Energy as service prov	ider need to supply pr	emise number //	<u>Β</u> πο	m Progress Energy.
ROPOSED USE:					
SED (Sim HA) x A	60_) # Bedrooms: 4_ # Bal	Basement(w/	wo bath): Garage: 🗸	_ Deck: Crawl Space	Slab:Slab:
SPD. (SIZE	(Is the bonus room finish	hed? () yes () r	no w/a closet? () yes () no (if yes add in with	# bedrooms)
			_	ou nuncial. O	Off Frame
Mod: (Sizex_	# Bedrooms # Bat	thsBesement (w/	wo bath) Garage: no Any other site built ad	_ Site Built Deck: O	on Frame Off Frame o
				•	
☐ Manufactured Home	e:SWDWTW (Sizex)	# Bedrooms: Garage	e:(site built?) Dec	k:(site built?)
-	SAL Distribution	No Bed	rooms Per Unit:		
	_x) No. Buildings:				#Employees
☐ Home Occupation:	# Rooms:U	se:	Hours of Operation		#Employees:
C. Addition/Annappengi	/Other: (Sizex)	Jse:		Closets in	n addition? () yes () no
	•				
Water Supply: Co	ounty Existing Well	New Well (# or	dwellings using well) *Must have opera	ble water before final
Sewage Supply:I	New Septic Tank (Complete	Checklist)Ex	sting Septic Tank (Comple	nte Checklist)Cou	nty Sewer
Does owner of this tract	of land, own land that contain	ns a manufactured ho	me within five hundred fee	t (500') of tract listed above	/e? () yes (_/) no
	in any easements whether ur				
	roposed): Single family dwell		Manufactured Homes:	Other (specify):
		,	All flags as	e on Site	Markine
	Property Line Setbacks:	Comments:	1 1	Corners latit	the Card Posted
Front Minimum 3	Actual 100	- Kuben	7 /10/3 /200	State	
Rear 2	100		Hoed way on	2 3 7 8 8 8	
Closest Side	<u>0</u> 35				
Sidestreet/comer lot			·		
Negroet Building					

Page 1 of 2
APPLICATION CONTINUES ON BACK

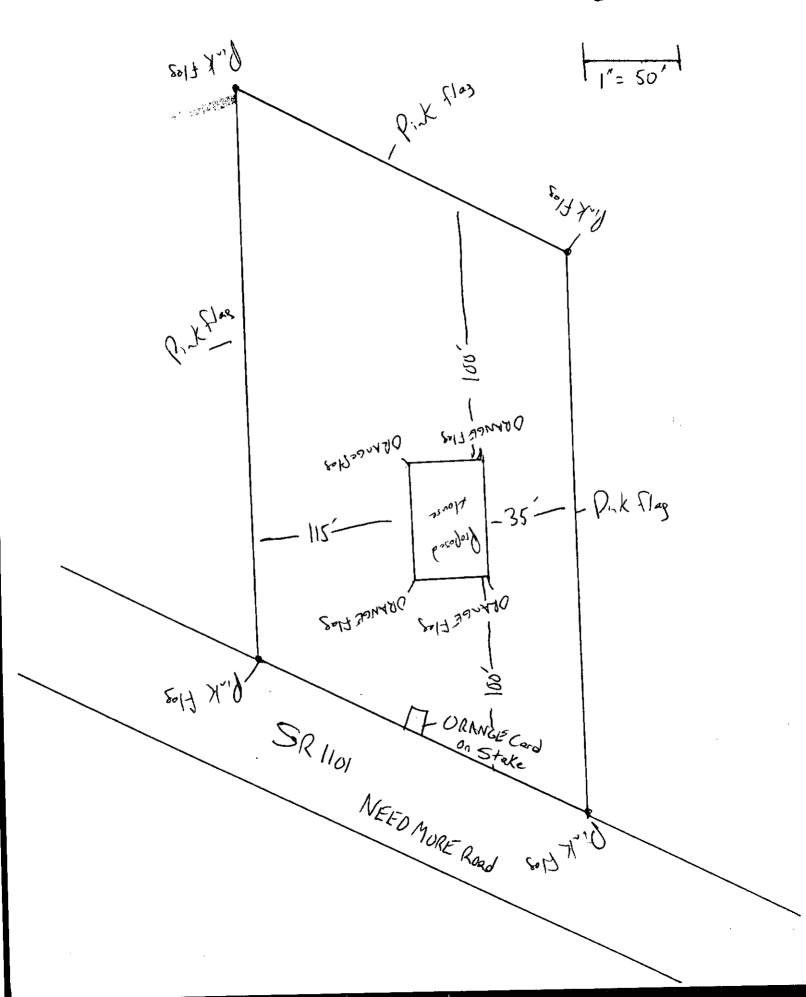
specific directions to Ad Next L Site on righ	THE PROPER	TY FROM LILL	INGTON: 2	4/27 to	rand £	ancon	Pass	Edward	
Rd Next L	eft on	Line R) Apporx	. Innes	on Right	Neco	More	Ra	
Site on Mol	<i>+</i>								<u></u>
									
	· · · · · · · · · · · · · · · · · · ·	<u></u>							· · ·
			····						

If permits are granted I agree I hereby state that foregoing	to conform to	all ordinances a	nd laws of the Si	ate of North C	arolina regulati Ide Permit su	ng such wor blect to revo	rk and the : ocation if fa	specifications of Ise information I	plans submitted. s provided.
i nereby state that to egoing		1001	1) 112		aga. , r o, mir oa.	47	14		
	Signatilia	of Owner of Ov	UNAPE ARAM	·		(Ozte	<u>!l</u>		

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





Southeastern Soil & Environmental Associates, Inc.

P.O. Box 9321
Fayetteville, NC 28311
Phone/Fax (910) 822-4540
Email mike@southeasternsoil.com

March 17, 2014

Harnett County Health Department 307 Cornelius Harnett Blvd. Lillington, N.C. 27546

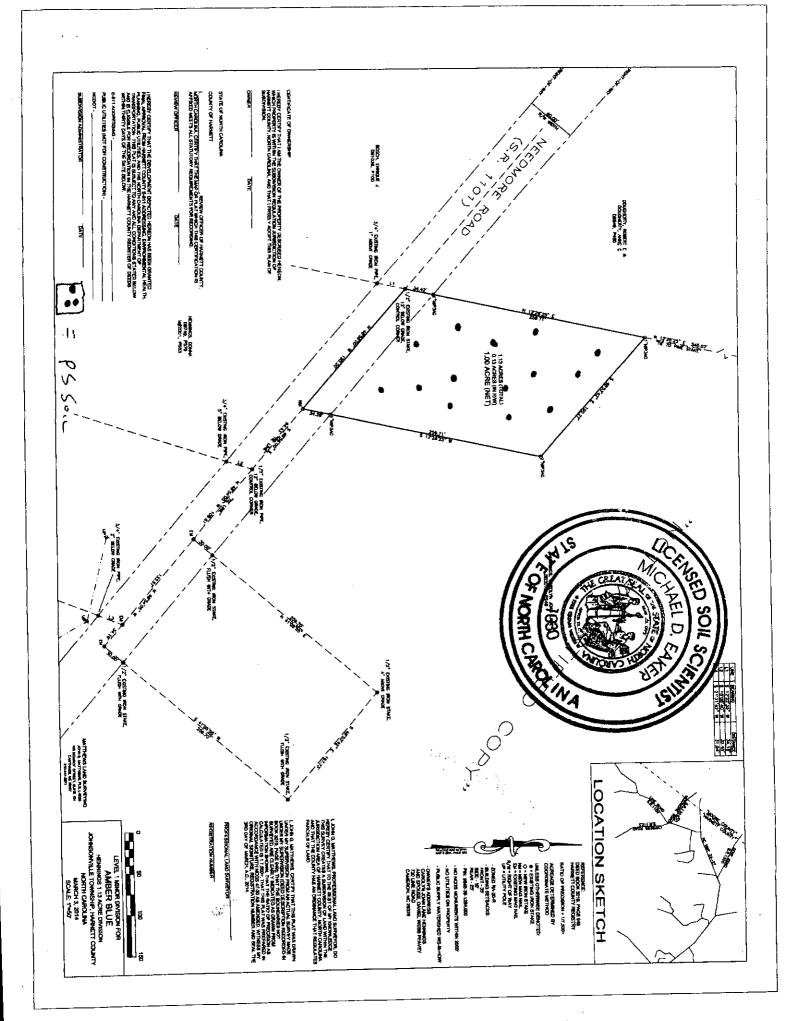
Re: Soil evaluation and final septic recommendation, 1.00 acre lot, Amber Blue, NCSR 1101, Harnett County, North Carolina

To whom it may concern,

A preliminary soils investigation has been completed for the above referenced lot. The property is located on NCSR 1101 as shown on the accompanying map. The purpose of the investigation was to determine the ability of the soil to support any subsurface waste disposal system for the proposed lot. All ratings and determinations were made in accordance with "Laws and Rules for Sanitary Sewage Collection, Treatment, and Disposal, 15A NCAC 18A .1900".

The lot appears to contain at least one area that meets minimum criteria for subsurface waste disposal systems for at least a typical (40' x 60') 5 bedroom home (may include the use of conventional drainlines, gravelless drainlines, low pressure pipe, pumps, fill, large diameter pipe, french drains, pretreatment, drip irrigation, etc.). Soil characteristics in the usable areas were dominantly provisionally suitable to at least 18 inches (fill, drip irrigation and/or pretreatment) or 24 inches (conventional or LPP) including .1940, .1941, .1942, .1943, .1944 and .1945. A soil map indicating typical soil areas that meet these criteria is enclosed. The lot appears to contain sufficient available space for a repair area for at least a typical 5 bedroom home (may include the use of any of the systems mentioned above).

This lot may require specific design/layout on our part prior to action by the local health department due to space and soil considerations (at separate cost to client). Alternative systems (mentioned above) could be required on the lot to compensate for shallow unsuitable soil conditions. Specific house location, house size, driveway location and/or side entry garage may be required on any individual lot. There should be no grading, logging or other site disturbance in soil areas designated as usable for subsurface waste disposal until approved by the local health department (any site disturbance could remove soil and render the area unusable).



HARNETT COUNTY TAX ID#

ABMONEILL



NORTH CAROLINA GENERAL WARRANTY DEED

Excise Tax	Recording Time, Book and Page
Tax Lot No.	Parcel Identifier No.
Tax Lot NoCounty on by	the,,
Mail after recording to Thigpen & Jenkins, L.L.P., Post Offic	e Box 792, Robbins, North Carolina 27325
This instrument was prepared by Frank C. Thigpen, Thigpe	n & Jenkins, L.L.P.
	1.13 Acre Division
THIS DEED made this 27 th day of	March 2014 by and between
AP NOTTHORNIU)	s, and, if appropriate, character of entity, e.q.:corporation.
The designation Grantor and Grantee as used herom status, aboli include singular plural, masculine, feminine or neuter	as required by context.
WITNESSETH, that the Grantor, for a valuable consideration acknowledged, has and by these presents does grant, barg	on paid by the Grantee, the receipt of which is hereby pain, sell and convey unto the Grantee in fee simple, all that
certain lot or parcel of land situated in the City of Harnett County, North Carolina and mo	, <u>Johnsonville</u> Township, ore particularly described as follows:
BEING that certain 1.13 acres, more or less, as shown on the Blue", Hennings 1.13 acre division, Johnsonville Township, drawn under the supervision of John G. Matthews, registers	that certain plat entitled "Level 1 Minor Division for Amber , Harnett County, North Carolina, dated March 21, 2014 and red land surveyor and said plat is incorporated herein by

reference thereto for a more particular description and said plat is recorded in Book 2014, Page 81-81 in the Harnett

County Register of Deeds.

NAME:	APPLICATION #: 14.500353
	be filled out when applying for a septic system inspection.* cation for Improvement Permit and/or Authorization to Construct
IF THE INFORMATION IN THIS APPLICATION PERMIT OR AUTHORIZATION TO CONSTRUC	VIS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT CT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration ete site plan = 60 months; Complete plat = without expiration) CONFIRMATION #
Environmental Health New Septic S	
 All property irons must be made lines must be clearly flagged appropriately. 	de visible. Place "pink property flags" on each corner iron of lot. All propert oximately every 50 feet between corners. ' at each corner of the proposed structure. Also flag driveways, garages, decks
out buildings, swimming pools, etc	c. Place flags per site plan developed at/for Central Permitting.
 If property is thickly wooded, Envi evaluation to be performed. Inspendent 	th card in location that is easily viewed from road to assist in locating property. ironmental Health requires that you clean out the <u>undergrowth</u> to allow the soctors should be able to walk freely around site. <i>Do not grade property.</i>
	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 codermit if multiple permits exist) for Environmental Health inspection. <u>Please not</u>
	sults. Once approved, proceed to Central Permitting for permits.
□ Environmental Health Existing Tank	
Follow above instructions for place Propers for inspection by removing	ng flags and card on property. ng soll over outlet end of tank as diagram indicates, and lift lid straight up (
possible) and then put ild back in DO NOT LEAVE LIDS OFF OF SEPT	place. (Unless inspection is for a septic tank in a mobile home park)
if multiple permits, then use cod given at end of recording for proof	
	ults. 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	(L) Conventional [_] Any
{}} Alternative {}} Other	
	urtment upon submittal of this application if any of the following apply to the property in IST ATTACH SUPPORTING DOCUMENTATION:
{_}}YES (_\(\sum_\)NO Does the site contain	n any Jurisdictional Wetlands?
YES (NO Do you plan to have	e an <u>irrigation system</u> now or in the future?
{_}}YES {_\subseteq} NO Does or will the but	ilding contain any drains? Please explain.
YES (NO Are there any existing	ng wells, springs, waterlines or Wastewater Systems on this property?
(_)YES (√)NO Is any wastewater g	oing 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 Easer	nents or Right of Ways on this property?
(_)YES {✓} NO Does the site contain	n any existing water, cable, phone or underground electric lines?
If yes please call N	o 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 C	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

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

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

Each section below to be filled out by whomever performing work.

Must be cowner 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

145-00 33351

Application for Residential Building and Trades Permit

Owner's Name Amber Blue	Date <u>4-22-14</u>
Site Address O. Need More Rd	Phone 910 724-956
Directions to job site from Lillington 24 \$27 Towards Can	veren Persed Sond PH
Next Left on Line RJ Invice turn Right	an Need more rd
Job on Right	
Subdivision	Lot
Description of Proposed Work New Construction	# of Bedrooms
Heated SF 2154 Unheated SF 271 Finished Bonus Room?	Crawl Space Slab
General Contractor Information	ם -
South Residented Builder LCC	(919) 353-0412
Building Contractor's Company Name	Telephone
104 McNell Rd Souland NC 27330	Srb U582 @ Ymax . Com
Address	Email Address
58890	
License #	
Description of Work New Construction Service Size	<u>) un Amps T-Pole Yes No</u>
Holt Electrial Co	(9(9) Telephone
Electrical Contractor's Company Name	7- 1
900 WILLIAM Senford NC27731	(919) 770-1632 Email Address
Address	Email Address
222 P3-L	
License # Mechanical/HVAC Contractor Inform	nation
	•
Description of Work New Construction	@D 202 4/4
Sure temp Mechanizal	<u>(919)</u> 777-0668
Mechanical Contractor's Company Name	Telephone
Po Box 1469 Souton MC 27331	
Address	Email Address
19738	
icense #	
Plumbing Contractor Information	△ 1/
Description of Work New Construction	# Baths 2 /2
DL Neal Plumbin Co	(919) 708-8071
Plumbing Contractor's Company Name	Telephone
104 McNell Rd Sonford NC27310	
ddress	Email Address
12899	
icense #	•
insulation Contractor Informatio	<u>n</u> _
Insulation INC	(919) 770-1974
sulation 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 Same and the same of the same of any and all changes 1 3 2 5 10 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 of Owner/Contractor/Officer(s) of Corporation Affidavit for Worker's Compensation N C G S 87-14 The undersigned applicant being the 13/43 Officer/Agent of the Contractor or 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 MERCAN LANGE 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

Company or Name Snith Residential Builder LLC

Company or Name Snith Residential Builder LLC

Character Thomas Snith Date 4/2314

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

Plan Box #/	47	Date Job Nam	4.24.14 ne Anwell Ru	u)
App # 145	003335	laluation 167 99	_	
•			Garage_	<u>}</u> 32.8≥
Inspections for	SFD/SFA			;
Crawl	Slab	Mono	Basement	- -
Footing Foundation	Footing Foundation	Plum Under Slab Ele. Under Slab	Footing Foundation	
Address	Address	Address	Waterproofing	ŀ
Open Floor Rough In	Slab Rough In	Mono Slab Rough In	Plum Under slab Address	- -
Insulation	Insulation	Insulation	Slab	
Final	Final	Final	Open Floor	
			Rough In	
		•	Insulation Final	
Foundation Surv	vev Fi	nvir. Health <u>M</u>	Other	· 1
		<u> </u>		

Additions / Other	er	·		
Footing	·			
Foundation	_			
Slab				
Mono				_
Open Floor	-			
Obell Llool				
Rough In	•		•	
Rough In			· · · · · · · · · · · · · · · · · · ·	

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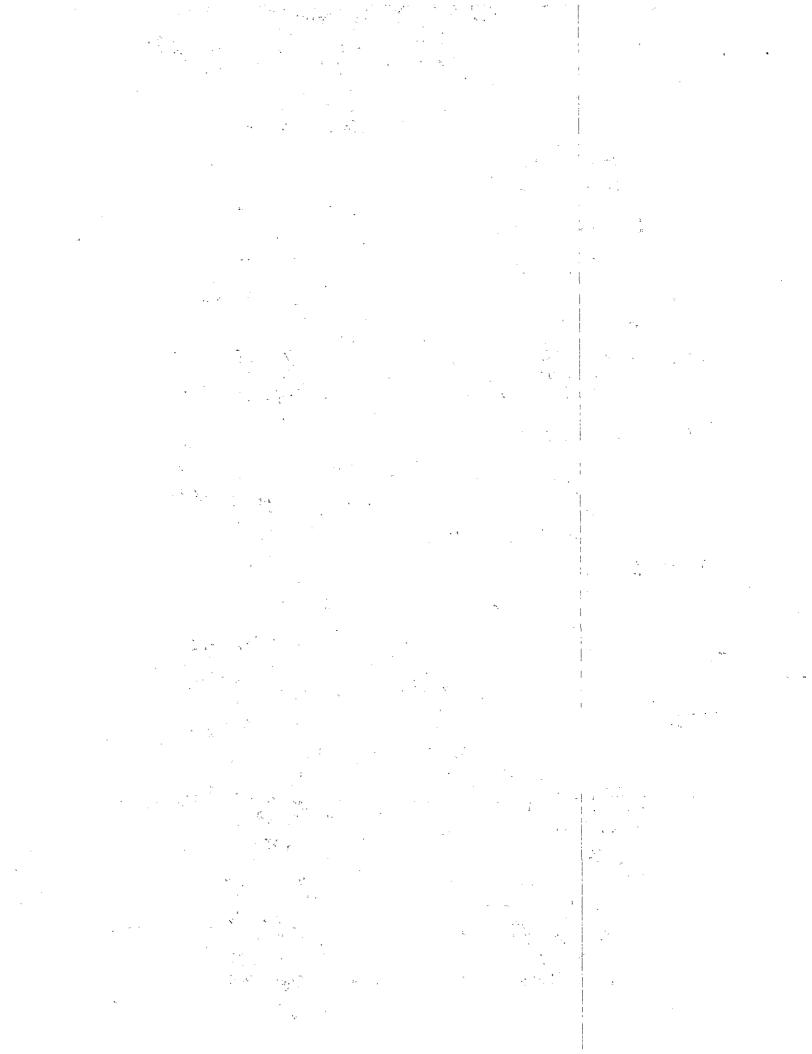
" Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address, company name & phone must match Application # 1451033351

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: Amber Blue	Date: <u>5-19-14</u>
Site Address: Need more rd	Phone:
Directions to job site from Lillington: 24-27 towards Conven	Ros Sand Pils Next
Lefton Line rd Inile Right on Newbrow 5100	
Subdivision:	Lot:
Description of Proposed Work: New Home	# of Bedrooms:
Heated SF: 1620 Unheated SF: 176 Finished Bonus Room?	Crawl Space: Slab:
General Contractor Information	
South Residential Builder LLC	(919) 353 0812
Building Contractor's Company Name	Telephone
104 Mc Neill Ld Soward NC 27330	5,60582 Q Ynal. Con
	Email Address
58996 License #	
Electrical Contractor Information	
Description of Work New Construction Service Size:	Amps T-Pole: YesNo
Holt Electial Co	(9(P) 770-1632
	Telephone
900 Wildlife Rd Sonford M 27332	
	Email Address
222 98-L	
License # Mechanical/HVAC Contractor Information	tion
Description of Work New Construction	
	9A 777-0668
Mechanical Contractor's Company Name	Telephone
moditalisas. Company mand	
Address	Email Address
19739	
License #	
Plumbing Contractor Information	1
	Baths &
Plumbing Contractor's Company Name	(919) 708-8071
Plumbing Contractor's Company Name	Telephone
JULY MCNOWN Rd Senterd NC 27330 Address	
	Email Address
11-12899	
Insulation Contractor Information	
Insulation Inc	(919) 770-1974
	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 of Owner/Contractor/Officer(s) of Corporation 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 periury 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

Has one (1) or more subcontractors(s) who has their own policy of workers compensation insurance

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

Has no more than two (2) employees and no subcontractors

them

covering themselves

carrying out the work

Company or Name

Sign w/Title

The state of the s and the state of t the state of the s AND THE STATE OF STATE OF THE STATE OF i de la Cagarete de la Borro de la Casa de la Cagarete de la Cagarete de la Cagarete de la Cagarete de la Cagar La companya de la Cagarete de la Cag and the trade of the contract the control of the control of the second of the control of the con Hat is the property of the second of the sec the property of the second second second second second entroller of the composition of the sign of the sign of the second of th

A Company of the Comp

Plan Box #	1-7	Date 5 - 19 - 14	
App # 145	10 33351	Valuation 105283 Heated SQ Feet 16	<u>2</u>
Inspections for	SFD/SFA		
Crawl	Slab	Mono Basement	•
Footing Foundation Address Open Floor Rough In Insulation Final	Footing Foundation Address Slab Rough In Insulation Final	Plum Under Slab Ele. Under Slab Address Waterproofing Mono Slab Rough In Insulation Final Plum Under slab Address Insulation Rough In Insulation Final Final	
Foundation Surv	vey <u> /</u> 0	Envir. Health New Tan K Other	
•••••			
Additions / Other	<u>er</u>	A	,
		÷	
Footing Foundation	_		
	_		

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 14-50033351 Date 5/21/14 Application type description CP NEW RESIDENTIAL (SFD) Subdivision Name PENDING Contractor Owner ______ SMITH RESIDENTIAL BUILDER, LLC BLUE AMBER L 274 CUMNOCK RD. 75 NEEDMORE RD SANFORD NC 27330 NC 28326 CAMERON (919) 353-0412 Applicant BLUE AMBER Structure Information 000 000 40X60 4BDR 2.5BATH SFD W GAR DECK CRAWL Flood Zone FLOOD ZONE X 4.00 Other struct info # BEDROOMS PROPOSED USE SFD NEW TANK SEPTIC - EXISTING? WATER SUPPLY Permit BLDG, MECH, ELEC, PLB, INSU PERMIT Additional desc . . Phone Access Code . 1035286 Issue Date 5/21/14 Expiration Date . . 5/21/15 Valuation ______

HARNETT COUNTY CENTRAL PERMITTING

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 14-50033351

Date 5/21/14

Property Address 154 NEEDMORE RD

Subdivision Name

Property Zoning PENDING

Permit BLDG, MECH, ELEC, PLB, INSU PERMIT

Additional desc . .

Phone Access Code . 1035286

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		<u> </u>
20-30	814	A814	ADDRESS CONFIRMATION		—'/—'/ <u>—</u>
30-999	105	B105	R*OPEN FLOOR		 ',',
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		—' <i>,</i> —' <i>,</i> —
40-60	225	R225	TWO TRADE ROUGH IN		—'/—'/—
50-60	429	R429	FOUR TRADE FINAL		'/'/
50-60	131	R131	ONE TRADE FINAL		—-' <i>/</i> ' <i>/</i>
50-60	329	R329	THREE TRADE FINAL		' _/ ' _/
50-60	229	R229	TWO TRADE FINAL		—',—',—
999		H824	ENVIR. OPERATIONS PERMIT		—',—',—