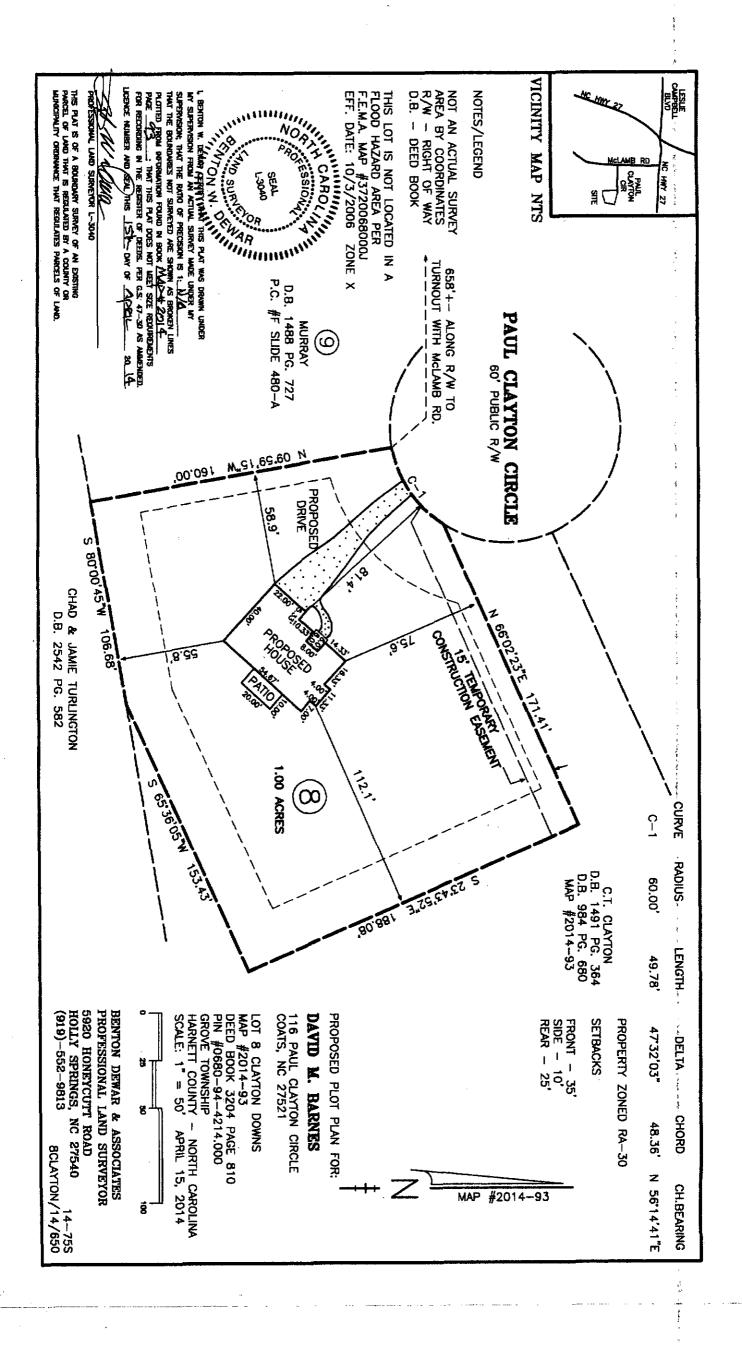
Initial Application Date:	114 Paul.	Application # 14 500 3343
COU Central Permitting 108 E. Front Street, Lil		PLICATION
<u>-</u>	, ,	
	ED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUI	•
LANDOWNER: David & Betty Barnes	Mailing Address: 2820 Cry	stal Spring Lane
City: Heritage State: T	N Zip: 37076 Contact No: 919-639-2073	Email: bgoldston@embarqmail.com
APPLICANT*: Stancil Builders Inc	Mailing Address: 466 Stancil Road	
City: Angier State: N	C Zip: 27501 Contact No: 919-639-2073	Email: bgoldston@embarqmail.com
*Please fill out applicant information if different than landow	/ner 	
CONTACT NAME APPLYING IN OFFICE:	chard Denning	Phone # V (914) 291-6240
PROPERTY LOCATION: Subdivision: Clayton De		Lot #: 8Lot Size: 1 acre
State Road # 2003 State Road Name	_	Map Book & Page: 2014 / 93
Parcel: 07-0680-0137-14	PIN: 0680-94-4214.000	
Zoning: RA3OFlood Zone: X Watershe	d: 1V Deed Book & Page 3704, 6	Power Company*: Duke Energy Progress
*New structures with Progress Energy as service pr	ovider need to supply premise number	from Progress Energy.
PROPOSED USE:		
6 SFD: (Size 4)x 55 # Bedrooms: 3 # 6	Baths: 2_Basement(w/wo bath): Garage: ✓	Deck: Crawl Space: ✓ Slab: Monolithic Slab:
	ilshed? () yes () no w/ a closet? () yes (_	
	aths Basement (w/wo bath) Garage: hished? () yes () no Any other site built add	
(is the second noor in	astree? yes no Any other site built auc	initions? () yes () no
Manufactured Home:SWDWTV	/(Sizex) # Bedrooms: Garage:	:(site built?) Deck:(site built?)
□ Duplex: (Sizex) No. Buildings:	No. Bedrooms Per Unit:	<u> </u>
Home Occupation: # Rooms:	Use: Hours of Operation:_	#Employees:
		· · · · · · · · · · · · · · · · · · ·
Addition/Accessory/Other: (Sizex	Use:	Closets in addition? () yes () no
Water Supply: County Existing Well	New Well (# of dwellings using well) *Must have operable water before final
	Checklist) Existing Septic Tank (Complete	<u>.</u>
	ins a manufactured home within five hundred feet (
Does the property contain any easements whether of	│ underground or overhead () yes (✔) no), !
Structures (existing or proposed): Single family dwe		Other (specify):
	DRMOOLD -	
Required Residential Property Line Setbacks:	Comments:	
Front Minimum 35 Actual 81.4		1
Rear 25 55.	(i	
Closest Side 10 58.C		
Sidestreet/corner lot ZO		
Nearest Building 10		
on same lot Residential Land Use Application	Page 1 of 2 APPLICATION CONTINUES ON BACK	03/11
	The state of the s	•

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 421 S Left on NC-27 turn slight right onto W Stewart St/NC-27	' take 1st right
anto Mclamb Rd. Left on Paul Clayton Circle.	*
	:
	· · · · · · · · · · · · · · · · · · ·
	;
If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specification	s 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 of the control of the cont	on 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



Harnett County

4-16-14

Stancil Builders Inc will do lien appointment before building permit is issued.

Thanks for your cooperation.

Harnett County Central Permitting
PO Box 65 Lillington NC 27546
910 893 7525 Fax 910 893 2793 www harnett org/permits

3343Z

Each section below to be filled out by whomever performing work Must be owner or licensed contractor Address company name &

Application	for Residential	Building and	Trades	Parmit
<u>Ubbliogriali</u>	TOT KOSTHOTHING	<u>Dananing</u> and	11446	CHILIT

phone must match	Application for Residential Building and	Trades Permit
Owner's Name Da	vid Betty Barnes	Date Date
Site Address ///	Paul Clayton Circle Conts NC	
	om Lillington 421 5 Left on NC-5	
	C-27 take 1st Right auto McLam	B Rac, Cerron Paul Claylon
Circlen		
Subdivision _Clay+c	on Downs	Lot8
Description of Propose	d Work Single Family Dwelling	# of Bedrooms
Heated SF 2170 Ur	heated SF Finished Bonus Room?	Crawl Space _/ Slab
C1 P .1.1	General Contractor Informati	
Stanc: Build Building Contractor's C	ers Inc.	919 - 639 - 2073 Telephone
Address	Angier NC 22501	baolulston Cembarg mail.com Email Address
34533		
	-	·
	Electrical Contractor Informat	tion
Description of Work	Service Size	e <u>200</u> Amps T-PoleYesNo
SNO Electric		919-427-6952
Electrical Contractor s	· · · · · ·	Telephone
	0 Angier NC 21501	Email Address
Address		Email Address
13025-L		
License #	Mechanical/HVAC Contractor Info	<u>rmation</u>
Description of Work 3		
Stephenson		919-329-0687
Mechanical Contractor	s Company Name	Telephone
	5h Dr. Garner NC 27529	
Address	of the day of the second	Email Address
18644 H3-I	- -	
License #		A
	Plumbing Contractor Informa	^
Description of Work _		# Baths
Barnes Plum	bing Inc.	
Plumbing Contractor s		Telephone
	07 Angier NC 27501	Email Address
Address	9	Email Address
<u>P17735</u>	<u> </u>	
LICERSE #	Insulation Contractor Informa	ation and and and
Tatum Tos	519 Old Drug Store Rd. Garrer	NC27529 919-235-7902
Insulation Contractor	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 FEER - 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 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 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

Sign w/Title

Date _ 4-16-14

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. Date 5/13/14 Application Number 14-50033432 Property Address *UNASSIGNED . . 07-0680- - -0137- -14-PARCEL NUMBER Application type description CP NEW RESIDENTIAL (SFD) Subdivision Name Property Zoning RES/AGRI DIST - RA-30 Contractor Owner ______ ______ STANCIL BUILDERS INC. BARNES CLAYTON AND BETTY #8 466 STANCIL ROAD 2820 CRYSTAL SPRING LN ANGIER NC 27501 HERMITAGE TN 37076 (919) 639-2073 (919) 639-2073 --- Structure Information 000 000 40X55 3 BR ATT GRGE, UNFINISH BONUS CRAWL Flood Zone FLOOD ZONE X Other struct info # BEDROOMS 3.00 PROPOSED USE SEPTIC - EXISTING? SFD NEW COUNTY WATER SUPPLY -----Permit BLDG, MECH, ELEC, PLB, INSU PERMIT Additional desc . . Additional desc . .
Phone Access Code . 1030055 5/13/14 Valuation Issue Date Expiration Date . . 5/13/15 _____

 HARNETT COUNTY CENTRAL PERMITTING P.O. BOX 65

LILLINGTON, NC 27546

For Inspections Call: (910) 893-7525 Fax: (910) 893-2793 Bldq Insp scheduled before 2pm available next business day.

Page 2 Date 5/13/14 Application Number 14-50033432

Property Address *UNASSIGNED

. . 07-0680- - -0137- -14-PARCEL NUMBER

Subdivision Name

Property Zoning RES/AGRI DIST - RA-30

Permit BLDG, MECH, ELEC, PLB, INSU PERMIT

Additional desc . .

Phone Access Code . 1030055

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
10 20 20-30 30-999 40-50 40-60 40-60 40-60 50-60 50-60 50-60	101 103 814 105 129 425 125 325 225 429 131 329 229	B101 B103 A814 B105 I129 R425 R125 R325 R225 R429 R131 R329 R229 H824	R*BLDG FOOTING / TEMP SVC POLE R*BLDG FOUND & TEMP SVC POLE ADDRESS CONFIRMATION R*OPEN FLOOR R*INSULATION INSPECTION FOUR TRADE ROUGH IN ONE TRADE ROUGH IN THREE TRADE ROUGH IN TWO TRADE ROUGH IN FOUR TRADE FINAL ONE TRADE FINAL THREE TRADE FINAL THREE TRADE FINAL TWO TRADE FINAL ENVIR. OPERATIONS PERMIT		