11 25 11 CWALL-RAKLANDER III 50022500)
Initial Application Date: 4 25 14 3951 US401 N Application # 14 50033500)
COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7575 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" AND OWNER: Lear And efsor Mailing Address: 6212 Rawls Church Road	
City: Fuguay - Varina State: NCzip: 27526 ontact No: 25 = Email:	
919-324-8389 SC	
APPLICANT*: Michael Anderson Homes, Inc Mailing Address: 180 Woodland Ridge Prive MASO City: Fuguay-Varina State: NC Zip: 27526 Contact No: 919-868-8294 Email: Michaelandessonhomes Openho	PC COA
*Please fill out applicant information if different than landowner	
CONTACT NAME APPLYING IN OFFICE: Michael Anderson Phone # 919-868-8294	
PROPERTY LOCATION: Subdivision: Mill Branch Lot #: 39 Lot Size: 461 acr	e
State Road # State Road Name: Mill Branch Circle Map Book & Page: 2006/172-175	5
Zonino: RA-40 Flood Zone: X Watershed: Deed Book & Page: 145,769 Power Company: Duke Energy	
Zoning: KA-40 Flood Zone: X Watershed: 11 Deed Book & Page: 15 TOO Power Company*: Buke Energy *New structures with Progress Energy as service provider need to supply premise number from Progress Energy.	
New Structures with Progress Energy as service provider need to supply promise manner.	
PROPOSED USE: Monolithic Monolithic	
SFD: (Size 526 496 Bedrooms: Baths: Basement(w/wo bath): Garage: Deck: Crawl Space: Slab:	
☐ Mod: (Sizex) # Bedrooms # Baths Basement (w/wo bath) Garage: Site Built Deck: On Frame Off Frame _	
Manufactured Home:SWDWTW (Sizex) # Bedrooms:Garage:(site built?) Deck:(site built?)	
□ Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit:	
□ 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	
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 (\(\sur_{1}\)) no	
Does the property contain any easements whether underground or overhead () yes (\(\frac{\sqrt{\sq}}}}}}}}}}} \signtarigntiftity}} \sqrt{\sq}}}}}}}}}}} \signtarigntiftity}} \sqrt{\sqrt{\sin}}}}}}} \sqrt{\sintitity}}}} \sqrt{\sqrt{\sint{\sint{\sintexign}}}}}} \sin	
Structures (existing or proposed): Single family dwellings: Normal Manufactured Homes: Other (specify):	
Structures (existing or proposed): Single family dwellings: Door Sed Manufactured Homes: Other (specify): Required Residential Property Line Setbacks: Comments:	
Structures (existing or proposed): Single family dwellings: Months Manufactured Homes: Other (specify): Required Residential Property Line Setbacks: Comments: Front Minimum 35 Actual 45	
Structures (existing or proposed): Single family dwellings: DODSEC Manufactured Homes: Other (specify): Required Residential Property Line Setbacks: Comments: Front Minimum 35 Actual 45 Rear 25 120	
Structures (existing or proposed): Single family dwellings: DOXSEC Manufactured Homes: Other (specify): Required Residential Property Line Setbacks: Comments: Front Minimum 35 Actual 45 Rear 25 120 Closest Side 10 16 A (14)	
Structures (existing or proposed): Single family dwellings: DODSEC Manufactured Homes: Other (specify): Required Residential Property Line Setbacks: Comments: Front Minimum 35 Actual 45 Rear 25 120	

specific directions to the proper will be on right	ety from Lillington: North of before Kipling, lo	n US 401, of 39 is on	Mill Branch Circle
		,	
If permits are granted I agree to conform to I hereby state that foregoing statements are	all ordinances and laws of the State of North accurate and correct to the best of my know of Owner or Owner's Agent	h Carolina regulating such work and Medge. Permit subject to revocation of the Date	nd the specifications of plans submitted. ion if false information is provided.

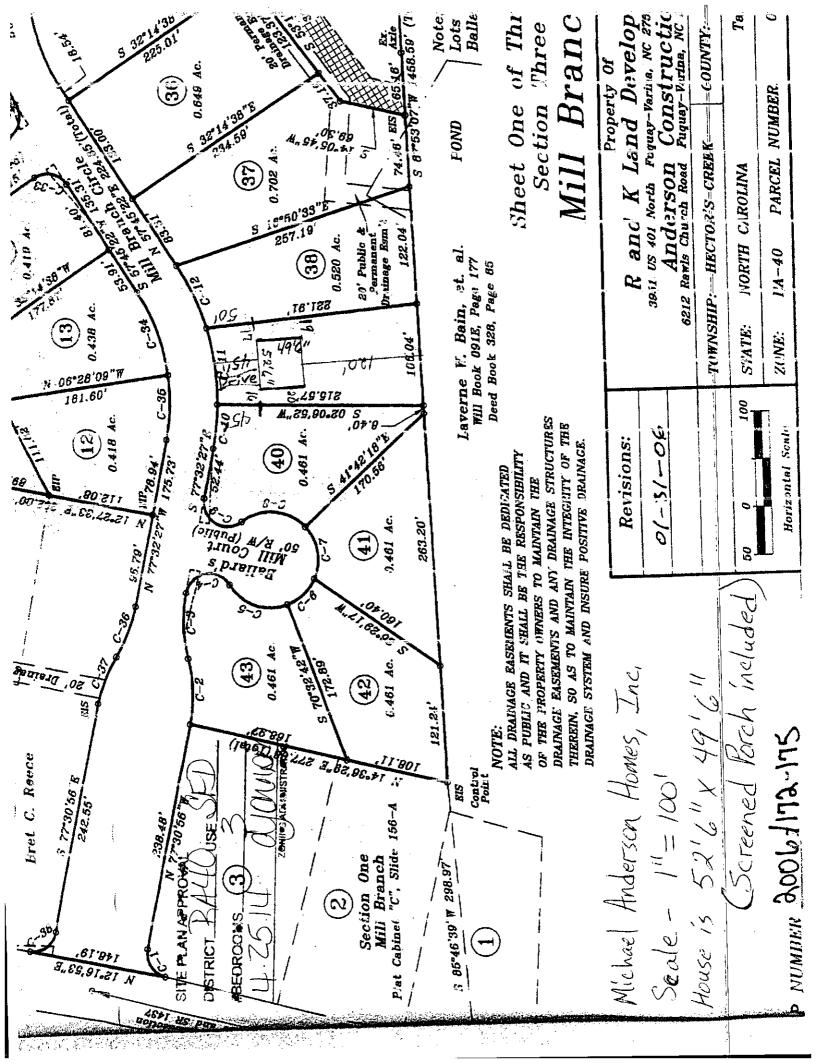
It is the owner/applicants responsibility to provide the county with any applicable information about the subject property, including but not limited to: boundary information, house location, underground or overhead easements, etc. The county or its employees are not responsible for any incorrect or missing information that is contained within these applications.

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

NAME: Michael Anderson Homes, Inc.

APPLICATION #:	1450033500

NAME: <u>//</u>	licros 111	rucidu i nui es,	1 = 1 = 1	APPLICATION #:_	145004	<u> </u>
	*	This application to be f	illed out when applying fo	or a septic system inspe	ction.*	
Count			on for Improvement			struct
			ALSIFIED, CHANGED, OR			
			HALL BECOME INVALID. te plan = 60 months; Complete			expiration
	0-893-7525 o		to plan = 00 montas, complete	CONFIRMATION #_		1
		alth New Septic Syste			4.25	:14
	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.					
			each corner of the propos		g driveways, garage	i es, decks,
		• .	ace flags per site plan de		- 1	
			ard in location that is easi mental Health requires th			
			s should be able to walk			
			usiness days after con			
			rk house corners and provided permitting system a			
			if multiple permits exist)			
co	<u>nfirmation nui</u>	mber given at end of re	ecording for proof of requ	<u>iest.</u>		
			. Once approved, procee spections Code 800	ed to Central Permitting	g for permits.	
			lags and card on property	v.		
• Pr	epare for insp	pection by removing s	oil over outlet end of to	ank as diagram indica		ight up (<i>if</i>
4 4 4 4 4			ce. (Unless inspection is	for a septic tank in a r	nobile home park)	
• DC	er uncovering	LIDS OFF OF SEPTIC T	oice permitting system a	t 910-893-7525 option	1 & select notificati	on permit
if	multiple perm	nits, then use code 80	00 for Environmental He	alth inspection. Pleas	se note confirmation	<u>ni number</u>
giv	en at end of t	recording for proof of re	<u>equest</u> . Once approved, proceed	to Control Parmitting	for remaining permi	ite
• Us <u>Septic</u>	e Click2GoV	or IVH to near results.	Once approved, proceed	1 to Central Fermitting	tor remaining perm	13.
If applying	for authorizatio	n to construct please indic	ate desired system type(s): o	can be ranked in order of p	preference, must choose	e one.
{}} Acce	pted	{}} Innovative	Conventional	(<u> </u>) Any		
{_}} Alter	native	{}} Other	<u> </u>			
The applica	nt shall notify	the local health departme	ent upon submittal of this a	pplication if any of the fo	ollowing apply to the p	property in
question. I	the answer is	"yes", applicant MUST	ATTACH SUPPORTING	DOCUMENTATION:		
{}}YES	I √ NO	Does the site contain an	y Jurisdictional Wetlands?			
{_}}YES	(V) NO	Do you plan to have an	irrigation system now or in	the future?		Q_{i}
{√}YES	{} NO	Does or will the building	g contain any <u>drains?</u> Pleas	e explain. <u>Foundation</u>	drain (water	21praoting
{}}YES	{ √ } NO	Are there any existing w	vells, springs, waterlines or	Wastewater Systems on	this property?	
{}}YES	{⊻ NO	Is any wastewater going	g to be generated on the site	other than domestic sew	/age?	
{_}}YES	{ ∠ } NO	Is the site subject to app	proval by any other Public A	Agency?		
(}YES	NO (V)	Are there any Easement	ts or Right of Ways on this	property?		4
{}}YES	(<u>~</u>) NO	Does the site contain an	y existing water, cable, pho	one or underground electr	ric lines?	
		If yes please call No Cu	uts at 800-632-4949 to loca	te the lines. This is a fre	e service.	
I Have Read	l This Applicati	ion And Certify That The	Information Provided Herei	n Is True, Complete And	Correct. Authorized C	County And
			uct Necessary Inspections To			
I Understand That I Am Solely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making						
		t A Complete Site Evaluat			1 0	1 111



OFFER TO PURCHASE

This contract made this 24th day of April, 2014, between AAA Developers and Michael Anderson Homes, Inc. for the sale and purchase of Lot # 39, Mill Branch Subdivision, Fuquay Varina, North Carolina 27526. Total purchase price of Lot #39 is \$30,000.00 (thirty thousand dollars) and is to be paid in full at the time of closing of house that is to be constructed on said lot.

Jeen Anderson

Muhaffenderson

* Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address, company name & phone must match Application # <u>1450033</u>500

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: Michael Anderson Homes, Inc	Date: 4-24-14
Ciàn Addunasi	Dhana 919 010 - 01911
Directions to job site from Lillington: North on US 401,	Right on Mill Broad Ciala
site is on right	Chele,
Sire is deligible	
Subdivision: Mill Branch	Lot: <u>39</u>
Description of Proposed Work: New Construction	# of Bedrooms:
Heated SF: /492 Unheated SF: Finished Bonus Room? 5	Crawl Space: V Slab:
Michael Anderson Homes, Inc	919-868-8294
Building Contractor's Company Name 180 Woodland Ridge Dr. Frequay-Varing NC Address	Telephone Michaelan Lorenahumos (2) nonder.
Address 27526	Telephone <u>Michaelandersonhomes@peaplepc.</u> Email Address Com
License #	
Description of Work New Construction Service Size: 2	n 2ΩΩ Amps T-Pole: √Yes No
	919-669-3104
Flectrical Contractor's Company Name	Telephone
5/05 Basal Drive, Holly Springs, NC	
Address	Email Address
24637-L	
License # Mechanical/HVAC Contractor Inform	ation
Description of Work New Const.	ation .
	919-329-8288
Mechanical Contractor's Company Name	Telephone
298 Shipwash Drive, Barner, NC 27529	Tolognone
Address	Email Address
<u> 19100 </u>	
License # Plumbing Contractor Information	n
Description of Work New Const	# Baths $\mathcal Z$
Justin Allen	919-201-1319
Plumbing Contractor's Company Name	Telephone
7345 Shady Stroll Lane, Willow Springs, NC	relephone
Address	Email Address
29598	
License #	
Insulation Contractor Informatio	$\frac{\mathbf{n}}{\mathbf{n}}$
Insulating Inc	<u> 117-772-7000</u>
Insulation Contractor's Company Name & Address	Telephone

*NOTE: General Contractor must fill out and sign the second page of this application.

Please answer the following questions then see a Permit Technician to determine if you qualify for permit under Owners Exemption. Questionnaire per G.S. 87-14 Regulations as to Issue of Building Permits (Memo available upon request)
Do you own the land on which this building will be constructed? Yes No
2. Have you hired or intend to hire an individual to superintend and
manage construction of the project? Yes No
3. Do you intend to directly control & supervise construction activities? Yes No
4. Do you intend to schedule, contract, or directly pay for all phases of construction work to be done? Yes No
5. Do you intend to personally occupy the building for at least 12 consecutive months following completion of construction and do you understand that if you do not do so, it creates the presumption under law that you fraudulently secured the permit? Yes No
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 I affirm that I have obtained all listed contractors 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.
Muchael (Massor 4-24-14) 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:
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) and has obtained workers' compensation insurance to cover
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
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.
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

			11 h
Plan Box #	67.	Date Job Nan	14:25:14 ne NUCHAUL Anc
App #_1450	033500	Valuation <u> 13 959</u>	Heated SQ Feet <u>↓69</u> Garage <u>45</u>
Inspections for S	FD/SFA		= 214
Crawl	Slab	Mono	Basement
Footing Foundation Address Open Floor Rough In Insulation	Footing Foundation Address Slab Rough In Insulation Final	Plum Under Slab Ele. Under Slab Address Mono Slab Rough In Insulation Final	Footing Foundation Waterproofing Plum Under slab Address Slab Open Floor Rough In Insulation Final
oundation Surve	·y	Envir. Health <u>DEM</u>	Other
dditions / Other			
ooting		·	440
oundation			
ab			
lono	-		
pen Floor			
ough In		Ç.	
sulation			
nal			•

```
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 . . . . 14-50033500
                                           Date 6/04/14
 Property Zoning . . . . . RES/AGRI DIST - RA-40
                               Contractor
 Owner
                               _______
                               OWNER
 ANDERSON LEON #39
 6212 RAWLS CHURCH RD
 FUQUAY VARINA NC 27526
  (919) 324-8589
 Applicant
  _____
 MICHAEL ANDERSON HOMES INC #39
 180 WOODLAND DR
                 NC 27526
 FUQUAY VARINA
  (919) 868-8294
 Structure Information 000 000 52.6X49.6 3 BR ATT GARAGE, DECK CRAWL
 Flood Zone . . . . . . . FLOOD ZONE X
 Other struct info . . . . # BEDROOMS
                        PROPOSED USE
                                            SFD
NEW
                        SEPTIC - EXISTING?
                       WATER SUPPLY
                                             COUNTY
.________
 Permit . . . . . BLDG, MECH, ELEC, PLB, INSU PERMIT
 Additional desc . .
 Phone Access Code . 1030899
 Issue Date . . . 6/04/14
Expiration Date . . 6/04/15
                              Valuation . . . . 139598
______
 Special Notes and Comments
  T/S: 04/28/2014 09:21 AM DJOHNSON --
  401 N MILL BRANCH ON RIGHT BEFORE
  KIPLING. LOT 39 IS ON THE RIGHT
  MILL BRANCH LOT 39
  T/S: 06/02/2014 11:28 AM VBROWN ----
  PREMIS NUMBER 64312324
  T/S: 06/04/2014 12:41 PM DJOHNSON --
  PERMIT INCLUDES BLDG, ELEC, MECH, PLUMB
  INSULATION AND LAND USE.
  Work must conform and comply with the
  STATE BUILDING CODE and all other State
```

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 . . . 14-50033500 Date 6/04/14

Special Notes and Comments 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.

Permit BLDG, MECH, ELEC, PLB, INSU PERMIT

Additional desc . .

Phone Access Code . 1030899

Required Inspections

				······································		
	Seq	Phone Insp#	Insp Code	Description	Initials	Date
-						
	10	101	B101	R*BLDG FOOTING / TEMP SVC POLE		1_//
	20	103	B103	R*BLDG FOUND & TEMP SVC POLE		/
	20-30	814	A814	ADDRESS CONFIRMATION		_/_/_
	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		//
	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		: <u>_/_/</u> _
	999		H824	ENVIR. OPERATIONS PERMIT		

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: Michael Anderson Homes, Inc. Phone: 919-868-8294
Owner (s) Mailing Address: 180 Woodland Ridge Drive
Frequay-Varina, NC 27526
Land Owner Name (s):
Construction or Site Address: 126 Mill Branch Circle Fuguary-Varing 1 NC 27521
PIN # Parcel #
Job Cost:Description of Work to be done
Mechanical: New Unit With Ductwork Very New Unit Without Ductwork Cas Piping Cother Case Office Countries (Control of Control of Con
Mechanical: New Unit With Ductwork V New Unit Without Ductwork Cas Piping Other Case Oth
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: Mill Branch Lot#: 39
Subdivision: 1/17 Brancer Lot #:
Toullation of Info
(Contractors Name) Will provide the Mechanica labor on this structure.
I am the building owner or my NC state license number is 12655 , 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.
TC's Heating + Cooling, Inc. 919-552-3053 Contractor's Company Name Telephone
Contractor's Company Name 1539 Wade Stephenson Rd, Holly Springs, Address NC 27540 Email Address
1539 Wade Stephenson Kd, Holly Springs,
Address 12655 NC 27540 Email Address
License #
11 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Structure Owner / Contractor Signature: Michael anderson Date: 7-28-14
By signing this application you affirm that you have obtained permission from the above listed license holder to

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

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.

You are using an outdated browser. Please upgrade your browser them them them to improve your experience

39 MB

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 194420

33500

Filed on: 09/24/2014 Initially filed by:

michaelandersonhomes@peoplepc.com

Designated Lien Agent

Project Property

Stewart Title Guaranty Company

126 Mill Branch Circle Fuquay Varina, NC 27526 Harnett County

Online: www.lienanc.com

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

27601

Phone: 888-690-7384 Fax: 913-489-5231

Email: support@liensnc.com

Property Type

1-2 Family Dwelling

Owner Information

Date of First Furnishing

Michael Anderson Homes, Inc. 180 Woodland Ridge Drive Fuquay Varina, NC 27526

United States

Email: michaelandersonhomes@peoplepc.com

Phone: 919-552-1790

08/01/2014

View Comments (0)

Technical Support Hotline: (888) 690-7384

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.