Initial Application Date:	5	-20-	14
			,

Application # _	14500337	104

CU# COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Central Permitting

on same lot

Residential Land Use Application

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 SU	BMITTING A LAND USE APPLICATION**
LANDOWNER: MOSS HOWLE BUILDARS LANTY Mailing Address: Po Box 5	17
City: LILLINGTON State: NZ Zip: 27546 Contact No. (910) 890-2103 Email	
PAPPLICANT*: Ramm Dew. Mailing Address:	
City: State: Zip: Contact No: Email *Please fill out applicant information if different than landowner	i
CONTACT NAME APPLYING IN OFFICE: Phone #	
Parcel: 13 9690 6035 08 PIN: 0529-58-53	lap Book & Page 2011 /383
Zoning: Nature State Power Company Power C	ompany*:
*New structures with Progress Energy as service provider need to supply premise number	from Progress Energy.
PROPOSED USE: SFD: (Size 45x 45 # Bedrooms: 3 # Baths: 2 Basement(w/wo bath): Garage: Deck! (Is the bonus room finished? () yes () no w/ a closet? () yes () no (if yes	
Mod: (Sizex) # Bedrooms # Baths Basement (w/wo bath) Garage: Site Built De (Is the second floor finished? () yes () no Any other site built additions? () yes	The state of the s
☐ Manufactured Home:SWDWTW (Sizex) # Bedrooms: Garage:(site built	t?) 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 h	ave operable water before final
Sewage Supply: New Septic Tank (Complete Checklist) Existing Septic Tank (Complete Checklist)	
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: Manufactured Homes:	Other (specify):
Required Residential Property Line Setbacks: Front Minimum 35 Actual 37 Rear 25 Closest Side 10	
Sidestreet/corner lot	
Nearest Building	

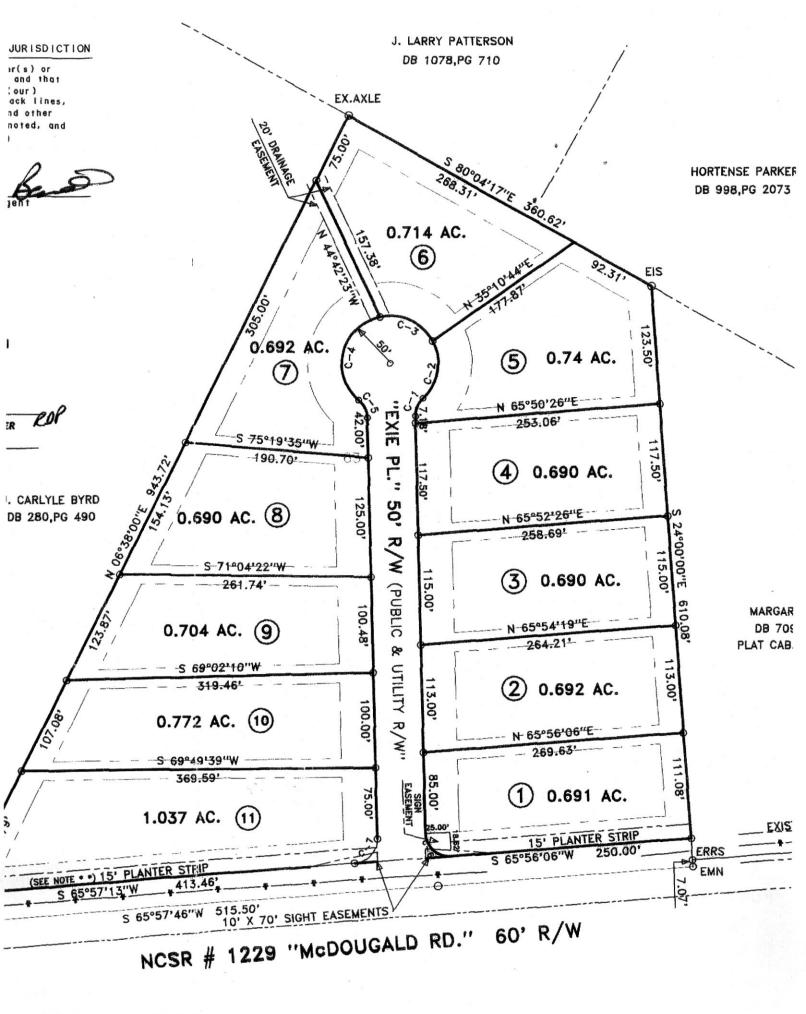
SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: MELLINGTON: MELLINGTON: MELLINGTON: MELLINGTON:	ILA
SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Mª DALLARD RD 4 MILES TO Mª DALLA FOR PLACE. LOT IS IN THE LAFT EVER PLACE	
If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plar I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is pro-	ns submitted ovided.

^{***}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**

SITE PLAN APPROVAL Lot 8 McDougaed PLACE SID DISTRICT RA30 USESFO 75 EXIE PLACE CT. #BEDROOMS ____ 5-20-14 1"= 301 154.13-163' .69 AC. 45'x 45' House 411 4201-DrivE 125.001

Exic Place Ct. 50' R/W



~	
NAME: Moss Home builders	APPLICATION #:
W	

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. If applying for authorization to construct please indicate desired system type(s): can be ranked in order of preference, must choose one. Conventional {__}} 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: (NO { }YES Does the site contain any Jurisdictional Wetlands? {__}}YES Do you plan to have an irrigation system now or in the future? {__}}YES Does or will the building contain any drains? Please explain. {___}}YES Are there any existing wells, springs, waterlines or Wastewater Systems on this property? {__}}YES Is any wastewater going to be generated on the site other than domestic sewage? { }YES Is the site subject to approval by any other Public Agency?

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

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.

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

{__}}YES

{__}}YES

IVI NO

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

Are there any Easements or Right of Ways on this property?

10/10

Harnett County Central Permitting PO Box 65 Lillington, NC 27546 Telephone Number 910-893-4759

Application for Building and Trade Permit	
Owner's Name: LAMIN Developers	O Tim Zord
Address: 75 Exic flace Cts Lilli-for M 07546 Phone:	9/0-630-200
Directions to job site:	
Directions to job site: Middless	Plue Ct let an 111
Building U	se: (Please Charle)
Residential	W Modular O
Commercia	1 () Multi-Family ()
Specify Type of Work: 1280 D residential home	
Pullding Donate T. C.	*
Heated Crawl Space O Building Permit Information Building Construction Cost S	6
Unheated Slah O	80,000
Unheated Slab () Rocky Acres Disturbed Store Builders & Rocky Po Box. 577 Lilli	ies
Building Contractor's Company Name Address	Spin AC
Building Contractor's Company Name /8637 Address Signature of Officer(s) of Corporation License #	793-4875
Signature of Officer(s) of Corporation License # Telep	phone
Electrical Permit Information	
Description of Work Electrica Blectrical Cost TS Pole: Yes (No () Underground () Overheard ()	\$
Pioneer Electric : Maintenance Co., Ins. 12120/205421 1	Amps
Electrical Contractor's Company Name	SS NC, 2754
1/643 9/0-8/4	1-375-1
Signature of Officer (s) of Corporation License# Teleph	ione
Insulation Permit Information	
Peridential O Other O Not Peguinad O	
TICI CITY INSULation 418 Person	St FAL
Insulation Contractor's Company Name Addres	s
910-d86-8855 Telephone	
Mechanical Permit Information	
Description of Work #VA6 Number of Units Type System Mechanism	anical Coat B
Number of Tons	,
Beasley's Htg + Ale Tac. 57 W. C. Beasley Lu. Mechanical Contractor's Company Name Address	Contr. NO 105
K. Bleet Beasley 9497 919-89	4-4248
Signature of Officer(s) of Corporation License # Telepho	ne
District the second second	**
Description of Work Plumbtrus Number of Baths Plumbing Cost \$	
	PTROVER
Plumbing Contractor's Company Name 14087 Address 635	-018
2: 11-202-	
Signature of Officer(s) of Corporation License # Telephor	16

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 10 Jun 2014 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 1/ 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 Moss Hamebuilders + Really Inc.

Sign w/Title W. ann Vice Presidt Date 10 In 2014

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 148381

Filed on: 06/11/2014

Initially filed by: mosshomebuilders

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

Phone: 888-690-7384

Fax: 913-489-5231

Email: support@liensnc.com (made support@liensnc.co

Owner Information

Moss Homebuilders & Realty Inc. PO Box 577

Lillington, NC 27546

United States

Email: amoss@harnett.org Phone: 910-890-2111

Project Property

Lot 8 McDougald Place Subdivision 75 Exic Place Ct.

Lillington , NC 27546 Harnett County

Property Type

1-2 Family Dwelling

Date of First Furnishing

06/11/2014

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.

View Comments (0)

Technical Support Hotline: (888) 690-7384

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 6/10/14

Owner Contractor ______

RAMM DEVELOPERS MOSS KENNETH A 1704 CLARK RD

PO BOX 577 LILLINGTON NC 27546 LILLINGTON NC 27546

SFD

(910) 893-4875

Applicant

MOSS HOME BUILDERS #8

PO BOX 577

LILLINGTON NC 27546

(910) 890-2103

--- Structure Information 000 000 45X45 3BDR CRAWL W/ GARAGE

Flood Zone FLOOD ZONE X

Other struct info # BEDROOMS 3000000.00 PROPOSED USE

SEPTIC - EXISTING? NEW TANK WATER SUPPLY ______

Permit BLDG, MECH, ELEC, PLB, INSU PERMIT

Additional desc . .

Phone Access Code . 1039130

Issue Date . . . 6/10/14 Valuation Expiration Date . . 6/10/15______

Special Notes and Comments

T/S: 05/20/2014 02:12 PM JBROCK ----

MCDOUGALD PLACE #8

PERMIT INCLUDES BLDG, ELEC, MECH, PLUMB

INSULATION AND LAND USE.

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.

Page 2 Date 6/10/14 Application Number 14-50033704

Property Address 75 EXIE PL

Permit BLDG, MECH, ELEC, PLB, INSU PERMIT

Additional desc . .

Phone Access Code . 1039130

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
10 20 20-30 30-999 30 40-50 40-60 40-60 40-60 50-60	101 103 814 105 104 129 425 125 325 225 429	B101 B103 A814 B105 B104 I129 R425 R125 R325 R225 R429	R*BLDG FOOTING / TEMP SVC POLE R*BLDG FOUND & TEMP SVC POLE ADDRESS CONFIRMATION R*OPEN FLOOR R*FOUND & SETBACK VERIF SURVEY R*INSULATION INSPECTION FOUR TRADE ROUGH IN ONE TRADE ROUGH IN THREE TRADE ROUGH IN TWO TRADE ROUGH IN 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		/ /