

Initial Application Date: 7-22-14

Application # 1450034251

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 Investments Inc Mailing Address: P.O. Box 1685

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

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: _____ Phone # _____

PROPERTY LOCATION: Subdivision: Sweet Water Lot #: 28 Lot Size: 0.80 AC

State Road # 2044 State Road Name: Will Lucas Rd Map Book & Page: 2011470-475

Parcel: 010544 0004 36 PIN: 0544-56-0879.000

Zoning: RA-20R Flood Zone: X Watershed: N/A Deed Book & Page: 02363 10941 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 33 x 31.8) # 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:

Comments: _____

Front Minimum _____ Actual 360

Rear _____ 69.95

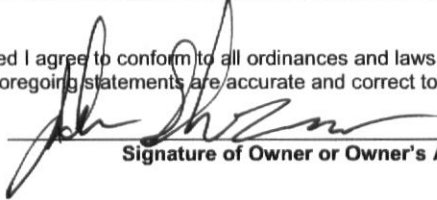
Closest Side _____ 111

Sidestreet/corner lot _____

Nearest Building on same lot _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: South 401
Turn Right onto W. Reeves Bridge Rd
Turn Left onto Will Lucas Rd
Turn Left onto Hybrid Ln
Turn Left onto Rainmaker St

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.

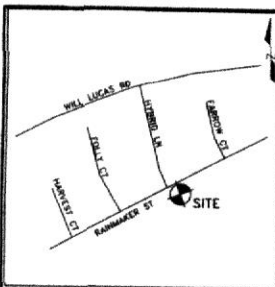


Signature of Owner or Owner's Agent

7.22.14
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)

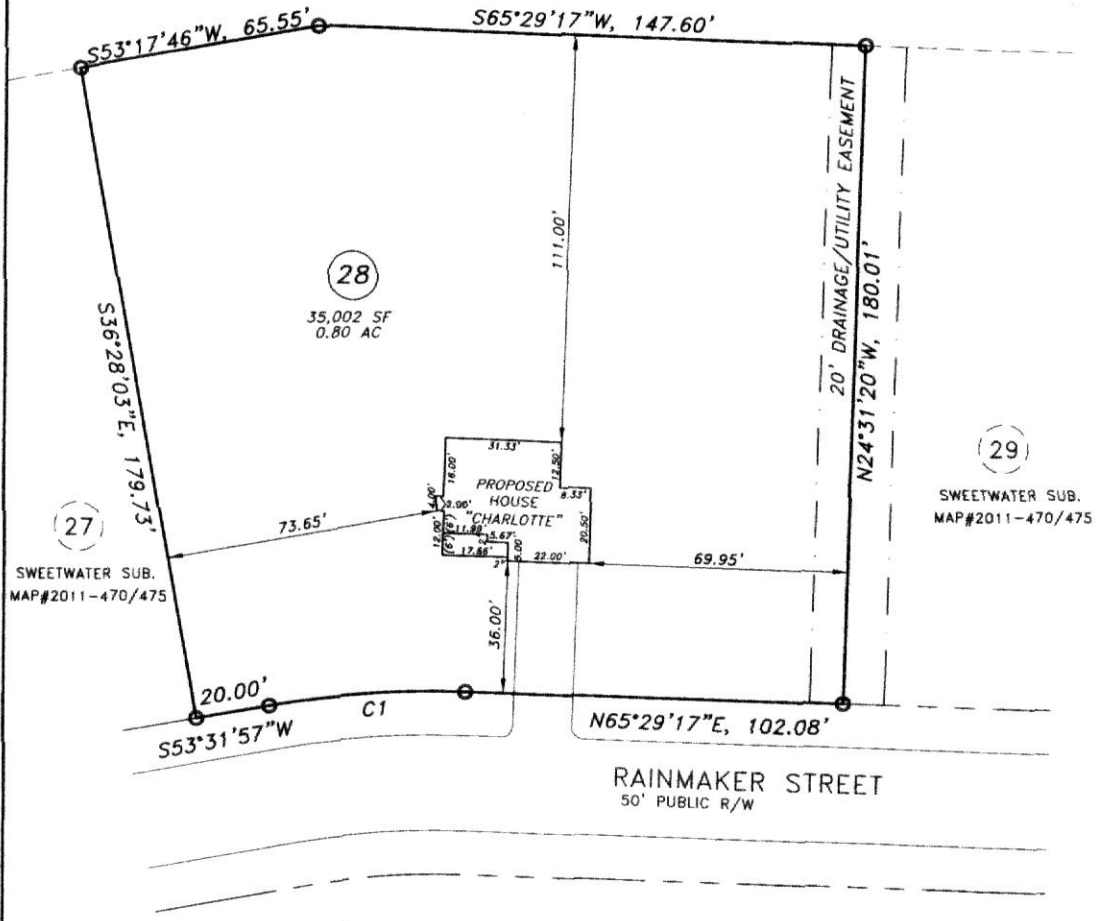
CURVE	RADIUS	LENGTH	C. BEARING	CHORD
C1	255.00'	53.21'	N59°30'24"E	53.11'

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



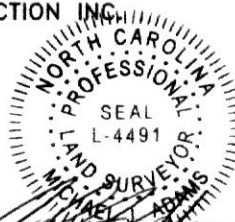
DIVERSIFIED INVESTORS, INC
DEED BOOK 2363, PAGE 941
TRACT # 4
PLAT BOOK 2017, PAGE 323



PLOT PLAN

PROPERTY OF: ATLANTIC CONSTRUCTION INC
ADDRESS: 109 RAINMAKER STREET
CITY: LINDEN, NC
COUNTY: HARNETT
TAX PIN: 0544-56-0879.000

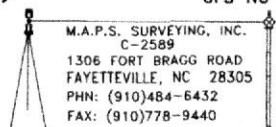
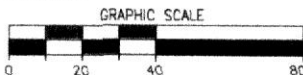
TOWNSHIP: STEWARTS CREEK
DATE: JULY 09, 2014
SCALE: 1" = 40'
REFERENCE: LOT 28



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

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)484-6432
FAX: (910)778-9440

NOTES

- 1) THIS MAP IS NOT A CERTIFIED SURVEY AND NO RELIANCE 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: DRP

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)

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,



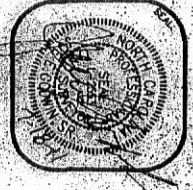
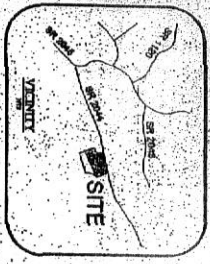
Betty Bullock, President
DIVERSIFIED INVESTORS INC.

bb

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

DATE: 04/26/2011
SCALE: AS SHOWN
DRAWN BY: JFSR
CHECKED BY: JFSR

WILL LUCAS RD. (SR 2044) (60' RW)



SHAUN B. GRANAGER
P.E. 0044-05-0908
D.B. 2114, P.O. 183
MAPE# 2007-323

SHARITA HARTLEY WATKINS
P.E. 0044-05-0908
D.B. 2114, P.O. 183
MAPE# 2007-323

JAMES P. WATKINS
P.E. 0044-05-0908
D.B. 2114, P.O. 183
MAPE# 2007-323

REVIEW OFFICER'S CERTIFICATE
STATE OF NORTH CAROLINA, COUNTY OF HARNETT
I, **David A. McAdams**,
Review Officer of Harnett County,
CERTIFY THAT THE MAP OR PLATS WHICH THIS
CERTIFICATE IS AFFIXED HERETO, COMPLY WITH
REQUIREMENTS FOR RECORDING.

REGISTER OF DEEDS CERTIFICATE
STATE OF NORTH CAROLINA, HARNETT COUNTY
FILED FOR REGISTRATION AT 2:01 PM IN THE REGISTER OF DEEDS OFFICE
AT JASPER, NC
RECORDED IN PLAT BOOK 2411 PAGE 571A-724(70)
BY *Kendrick S. Hoge*
REGISTER OF DEEDS

DATE FOR REGISTRATION: APRIL 26, 2011
REVIEW OFFICER: *David A. McAdams*
REGISTER OF DEEDS OFFICE: JASPER, NC
RECORDED IN PLAT BOOK 2411 PAGE 571A-724(70)

GRAPHIC SCALE
1" = 100' (IN FEET)
1 Inch = 100 Feet

28.80 ACRES TOTAL
FUTURE DEVELOPMENT
DIVERSIFIED INVESTORS, INC.
P.O. BOX 1985
JACKSONVILLE, NC 28540
D.B. 2383, PG 341
MAPE# 2007-323

28.80 ACRES
FUTURE DEVEL
DIVERSIFIED INVE
P.O. BOX 1985
JACKSONVILLE, NC 28540
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D.B. 2383, PG 341
MAPE# 2007-323

**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 1985
JACKSONVILLE, NC 28540

PLAN INFORMATION:	
DESIGNED BY: EE, PA	HORIZONTAL SCALE: 1" = 100'
DRAWN BY: EE, PA	VERTICAL SCALE: AS SHOWN
CHECKED BY: JFSR	DATE CREATED: APRIL 26, 2011
SURVEY INFORMATION:	

Enoch
Engineers, P.A.
CONSULTING ENGINEERS & SURVEYORS
1403 NC Highway 50 South - Benson, NC 27504
Phone: (919) 894-7763 Fax: (919) 894-1190
E-mail: general@enochengineers.com

S-1
Ermont 3440
S-1

Small print text at the bottom of the page regarding surveying standards and professional liability.

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 Investments Inc. Date _____
Site Address: 109 Rainmaker St Linden, NC 28356 Phone 910-346-9800
Directions to job site from Lillington South 401, Turn Right onto W. Reeves Bridge Rd
Turn Left onto Will Lucas Rd, Turn Left onto Hybrid Ln
Turn Left onto Rainmaker St
Subdivision Sweetwater Lot 28
Description of Proposed Work S.F.D. # of Bedrooms 3
Heated SF 1465.2 Unheated SF 4430 Finished Bonus Room? NO Crawl Space _____ Slab

General Contractor Information

Atlantic Construction Inc. 910-939-9053
Building Contractor's Company Name Telephone
7 Doris Ave. E. Jacksonville, NC 28540 aci@atlanticconstruction.com
Address Email Address
37596

License #

Electrical Contractor Information

Description of Work S.F.D. new Service Size 200 Amps T-Pole Yes No
Tinhead Pride Electric Comp. 910-531-4371
Electrical Contractor's Company Name Telephone
P.O. Box 458 Steadman, NC 28391
Address Email Address
22985-L

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 Documentary Dr Fayetteville, NC 28306
Address Email Address
24204 P-1

License #

Insulation Contractor Information

A-1 Insulation Inc. P.O. Box 180 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 of Owner/Contractor/Officer(s) of Corporation

7.22.14
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 John DeWann Vice President Date 7-14-14

Designated Lien Agent

Investors Title Insurance Company

Entry Number: 161965

Filed by: twotees

Filing Date: 07/14/2014

Online: www.liensnc.com

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

Email: support@liensnc.com

Fax: (919) 489-5231

Technical

Support Hotline: (888) 690-7384

Owner Information

Atlantic Construction Inc.

7 Doris Ave. E.

Jacksonville

NC

28540

910-938-9053

danny@atlanticconstructioninc.com

Project Property

Sweetwater Lot 28

109 Rainmaker St

Linden, NC

NC

28356

Property Type: 1-2 Family Dwelling

Date First Furnished:

Comments

No comments have been made.

Report generated by twotees on Mon Jul 14 07:49:47 EDT 2014

Plan Box # EB

Date 7-30-14

Job Name Atlantic

App # 34251

Valuation ^{\$} 123,676

Heated SQ Feet 1465

Garage 443

= 1903

Inspections for SFD/SFA

Crawl

Slab /

Mono

Basement

Footing	Footing	Plum Under Slab	Footing
Foundation	Foundation	Ele. Under Slab	Foundation
Address	Address	Address	Waterproofing
Open Floor	Slab	Mono Slab	Plum Under slab
Rough In	Rough In	Rough In	Address
Insulation	Insulation	Insulation	Slab
Final	Final	Final	Open Floor
			Rough In
			Insulation
			Final

Foundation Survey /

Envir. Health /

Other

Additions / Other

Footing

Foundation

Slab

Mono

Open Floor

Rough In

Insulation

Final

1st 651
2nd 815
gar. 443

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	14-50034251	Date	8/25/14
Property Address	109 RAINMAKER ST		
PARCEL NUMBER	01-0544- - -0004- -36-		
Application type description	CP NEW RESIDENTIAL (SFD)		
Subdivision Name	SWEETWATER 71LOTS		
Property Zoning	RES/AGRI DIST - RA-20R		

Owner

DIVERSIFIELD INVESTORS INC
 PO BOX 1685
 JACKSONVILLE NC 28540

Contractor

ATLANTIC CONSTRUCTION
 7 E DORIS AVE
 JACKSONVILLE NC 28540
 (910) 938-9053

Applicant

ATLANTIC CONSTRUCTION INC #28
 7 DORIS AVE E
 JACKSONVILLE NC 28540
 (910) 938-9053

--- Structure Information 000 000 33X39.8 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 . 1049303

Issue Date 8/25/14

Valuation 0

Expiration Date . . 8/25/15

Special Notes and Comments

T/S: 07/22/2014 08:32 AM JBROCK ----
 SWEET WATER LOT 28
 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

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Property Address	109 RAINMAKER ST	Date	8/25/14
PARCEL NUMBER	01-0544- - -0004- -36-		
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	1049303		

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	_____	___/___/___

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: Change of Contractor
10-16-14

Subdivision: _____ Lot #: _____

I Certified Heat & Air will provide the HVAC labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is H3C120012, 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.

Certified Heat & Air
Contractor's Company Name

(910) 858-0000
Telephone

PO Box 1071 Hope Mills NC 28348
Address

Email Address

H3C120012
License #

Structure Owner / Contractor Signature: [Signature] Date: 10-16-17

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**