Initial Application Date: 7-22-14 Application # 4500 3425
CU#
"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION"
LANDOWNER: James Rowland Mailing Address: 6568 Dwight Rowland Rd
City: 10 Ocu \$1 No. 219-55 -5405 Email:
APPLICANT: Marty Tart Hones Mailing Address: 539 TruthRd. New HILLSC
City: New 11 State 16. Zip 2) 562 contact No: 919 669-1818 Email: 1 art na) hg u. a. Please fill out applicant Information if different than landowner
CONTACT NAME APPLYING IN OFFICE: Marty Tart Phone # 919-669-1818
PROPERTY LOCATION: Subdivision: South Ridge Fams Lot #: 42. Lot Size: 594
State Road #US40 State Road Name: US HUNG US Map Book & Page: 2009, 156
Parcel: 08065 0019 45 PIN: 0653-56-3466 000
Zoning: 11430 Flood Zone: Watershed: Watershed: Watershed: Deed Book & Page 023% 600 Power Company': Pake
*New structures with Progress Energy as service provider need to supply premise number
PROPOSED USE: SFD: (Size 36 x 34) # Bedrooms: 2 # Baths: 2 Basement(w/wo bath): Garage: Deck: Crawl Space: Slab:
(Is the bonus room finished? () yes () no w/a closet? () yes () no (if yes add in with # bedrooms)
Mod: (Size Bull Deck Moderns Baths Bassmebt (Vive bath) Garage Site Bull Deck Moderns Off Frame Off Frame (Is the second floor finished? () yes () no Any other site built additions? () yes () no
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: (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
Does the property contain any easements whether underground or overhead () no
Structures (existing or proposed): Single family dwellings: Manufactured Homes: Other (specify):
Required Residential Property Line Sethacks: Comments:

/MEDO

Front Rear

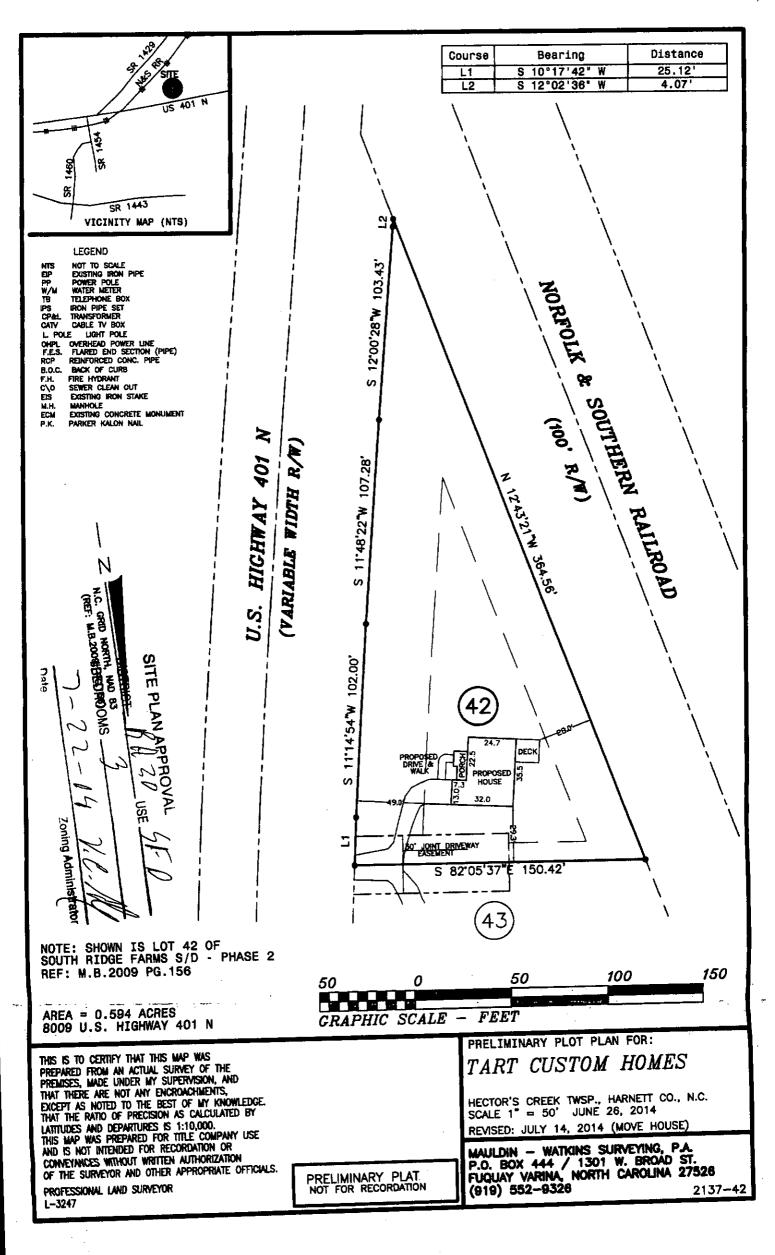
Closest Side

Sidestreet/corner lot
Nearest Building
on same lot

SPECIFIC DIRECTIONS TO	THE PROPERTY FRO	M LILLINGTON:	5. 401 1	North.	
Loti	ion let	7 9421	past L	ayfaye	HAR School
	·				
				<u></u>	
If permits are granted I agree I hereby state that foregoing	e to conform to all ordina statements are accurate	nces and laws of the State and correct to the best of	of North Carolina regu my knowledge. Permi	ulating such work and the	e specifications of plans submitted false information is provided.
	Signature of Owne	er or Owner's Agent		7-20-14	ı
		·			

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:	APPLICATION #:			
,	*This application to be filled out when applying for a septic system inspection.*			
	epartment Application for Improvement Permit and/or Authorization to Construct			
IF THE INFORMATION IN PERMIT OR AUTHORIZA	THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT TION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration ion submitted. (Complete site plan = 60 months; Complete plat = without expiration)			
	ealth New Septic System Code 800			
 All property is lines must be c Place "orange out buildings, s 	rons must be made visible. Place "pink property flags" on each corner iron of lot. All property flagged approximately every 50 feet between corners. house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks, wimming pools, etc. Place flags per site plan developed at/for Central Permitting. Environmental Health card in location that is easily viewed from road to assist in locating property.			
 If property is the evaluation to be 	lickly wooded, Environmental Health requires that you clean out the <u>undergrowth</u> to allow the soil e performed. Inspectors should be able to walk freely around site. Do not grade property .			
• All lots to be a	addressed within 10 business days after confirmation, \$25.00 return trip fee may be incurred			
After preparing 800 (after selection)	proposed site call the voice permitting system at 910-893-7525 option 1 to schedule and use code cting notification permit if multiple permits exist) for Environmental Health inspection. Please note 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 He	palth Existing Tank Inspections Code 800			
	nstructions for placing flags and card on property.			
possible) and t	spection by removing soil over outlet end of tank as diagram indicates, and lift lid straight up (<i>it</i> hen put lid back in place . (Unless inspection is for a septic tank in a mobile home park) LIDS OFF OF SEPTIC TANK			
 After uncovering if multiple perrogiven at end of 	ng outlet end call the voice permitting system at 910-893-7525 option 1 & select notification permit nits, then use code 800 for Environmental Health inspection. Please note confirmation number recording for proof of request.			
	or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.			
	on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.			
{}} Accepted	{} Innovative Conventional {} Any			
{}} Alternative	{}} Other			
question. If the answer is	the local health department upon submittal of this application if any of the following apply to the property in "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:			
{_}}YES (>\NO	Does the site contain any Jurisdictional Wetlands?			
_ YES NO	Do you plan to have an <u>irrigation system</u> 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 (\(\geq\)NO	Are there any Easements or Right of Ways on this property?			
_ YES OTNO	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.			
	ion And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And			
	d Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules.			
	olely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making			
The Site Accessible So The	at A Complete Site Evaluation Can Be Performed.			
PROPERTY OWNERS	OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED) DATE			

Each section below to be filled out by whomever performing work Must be owner 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

Application for Residential Building and Trades Permit

phone must match	
Owners Name James Rowland Marthus	
Site Address U.S. 40 FV. L+.42	Phone 919-669-1818
Directions to job site from Lillington 45 401 South	oward Higual
to Ison Leta sustpas	I track
(a) Laytagette school	
Subdivision South Ridge Farms	Lot 42
Description of Proposed Work New Kessuchta	# of Bedrooms
Heated SF / Unheated SF _ Finished Bonus Room? _	Crawl Space Yes Slab NO
General Contractor Information	
Building Contractor's Company Name	9/9~669~/8/8 Telephone
359 Truth LA New HILL NC.	tarna houson
Address 27562	Email Address
58970	
License # Electrical Contractor Information	
Description of Work New Res Service Size	Amps T-Pole YesNo
Dayson's Elec.	919-201-3841
Electrical Contractor's Company Name	Telephone ,
609 (otsenkd, FU/1C.275)6	+V/sdawsonalongil.10M
Address	Email Address
25948-C	
License # Mechanical/HVAC Contractor Inform	nation
Description of Work D. C. S. Fred J. A.	ew Kes.
J C Heat + AM	919-852-3053
Mechanical Contractor's Company Name	Telephone, (
1539 Wade Stophenon Rd. FUNC	1 Cs huge algraph con
Address 2750k	Email Address
12483-43	
License # Weuke(Plumbing Contractor Information	<u>on</u>
Description of Work Candon Plumbing	# Baths 2 2
Candes Plumbing	919-69-4650
Plumbing Contractor's Company Name	Telephone
POBX 1359 FU. MC. 278/6	candersplumbligh
Address 0907	Email Address a Aquillo
License #	
Insulation Contractor Information	<u>nc</u>
toglation Inc.	
Insulation 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 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 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 Sign w/Title

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 170359

Filed on: 07/31/2014 Initially filed by: martytart

Designated Lien Agent

First American Title Insurance Company

Online: 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 mailto autort@lensac

Owner Information

Marty Tart 359 Truth Rd. New Hill, NC 27562 United States Email: tartm@hpw.com

Phone: 919-669-1818

hamilton and a second

Project Property

Lot 42 South Ridge Farms Pin #0653-56-3466 000

US 401 fuquay-Varina NC 27526 Fuquay-Varina, NC 27526 Harnett County

Property Type

1-2 Family Dwelling

Date of First Furnishing

08/08/2014

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

South ridg Farms # 42 5 Valuation 112,303 Heated SQ Feet 1455 Garage 273 **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 Open Floor Final Rough In Insulation Final Envir. Health New **Additions / Other Footing** Foundation Slab Mono Open Floor____ Rough In____

Insulation

Final

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 14-50034255 Date 8/05/14 Property Address 8009 US 401 N Contractor Owner ______ ______ TART CUSTOM HOMES INC ROWLAND JAMES L 1628 OAKRIDGE DUNCAN RD 8009 US 401 N FUQUAY VARINA NC 27526 FUQUAY VARINA NC 27526 (919) 557-6187 Applicant _____ MARTY TART CUSTOM HOMES #42 Structure Information 000 000 35.6X34 3BDR 2.5BATH SFD W GAR DECK CRAW Flood Zone FLOOD ZONE X 3.00 Other struct info # BEDROOMS PROPOSED USE SFD NEW TANK SEPTIC - EXISTING? WATER SUPPLY COUNTY Permit BLDG, MECH, ELEC, PLB, INSU PERMIT Additional desc . . Phone Access Code . 1047612
Issue Date . . . 8/05/14 Valuation Expiration Date . . 8/05/15

 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 14-50034255

Date 8/05/14

Property Address 8009 US 401 N

Subdivision Name

Property Zoning RES/AGRI DIST - RA-30

Permit BLDG, MECH, ELEC, PLB, INSU PERMIT

Additional desc . .

Phone Access Code . 1047612

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 50-60	101 103 814 105 104 129 425 125 325 225 429 131	B101 B103 A814 B105 B104 I129 R425 R125 R325 R325 R429 R131	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 ONE TRADE FINAL		
50-60 50-60	329 229	R329 R229	THREE TRADE FINAL TWO TRADE FINAL		-/,-/,-
999	227	H824	ENVIR. OPERATIONS PERMIT		//_