

Initial Application Date: 11-16-15

Application # 14-500 34435 R  
CU# \_\_\_\_\_

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION  
Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 Fax: (910) 893-2793 www.harnett.org/permits

LANDOWNER: Trace Homes, Inc Mailing Address: 3857 Legion Road  
City: Hope Mills State: NC Zip: 28348 Contact # 910-426-2242 Email: patsy.grhomes@gmail.com

APPLICANT: Gary Robinson Homes Mailing Address: 4140 Ramsey St, Suite 115  
City: Fayetteville State: NC Zip: 28311 Contact # 910-401-5505 Email: patsy.grhomes@gmail.com  
\*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: \_\_\_\_\_ Phone # \_\_\_\_\_

PROPERTY LOCATION: Subdivision: Market Place Lot #: 105 Lot Size: .47 acres

State Road # \_\_\_\_\_ State Road Name: \_\_\_\_\_ Map Book & Page: 2014 / 199

Parcel: 039 597 - 005632 PIN: 9597-11-0174000

Zoning: RA20R Flood Zone: - Watershed: NA Deed Book & Page: 03239 0731 Power Company: Central Elec

\*New structures with Progress Energy as service provider need to supply premise number \_\_\_\_\_ from Progress Energy.

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 51 Blue Chip Ct, Bunnlevel, NC 27505  
NC 27 W to Tingen Road - Left onto Tingen - Left onto  
Stock Market Drive - 1st Left - Blue Chip Ct - Lot on Left.

PROPOSED USE:

- SFD: (Size 46' x 41') # Bedrooms: 4 # Baths: 2.5 Basement(w/w bath): \ Garage: 453 Deck: \_\_\_\_\_ Crawl Space: \_\_\_\_\_ Slab: \_\_\_\_\_ Monolithic Slab: X  
(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/w 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

Structures (existing or proposed): Single family dwellings: \_\_\_\_\_ Manufactured Homes: \_\_\_\_\_ Other (specify): \_\_\_\_\_

Required Residential Property Line Setbacks:

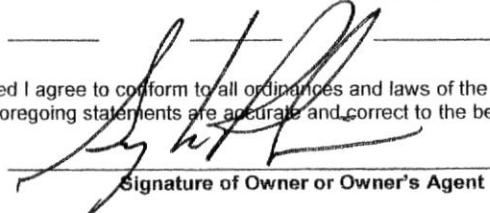
Front	Minimum	Actual
	<u>35</u>	<u>40'</u>
Rear	<u>25</u>	<u>114'</u>
Closest Side	<u>10</u>	<u>29.5'</u>

Comments: \* Name Change \*  
House got smaller (still inside  
foot print)

Sidestreet/corner lot \_\_\_\_\_

Nearest Building on same lot \_\_\_\_\_

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

11/5/15  
Date

\*\*This application expires 6 months from the initial date if permits have not been issued\*\*  
A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION



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 Trace Homes, Inc Date 11/11/15

Site Address 51 Blue Chip Ct, Bunnlevel, NC 27505 Phone 910-997-1789

Directions to job site from Lillington Go NC 27 W - go to Tingen Road, - turn left onto Tingen Rd - go to Stock Market - (to your left) Turn onto Stock Market - 1st left onto Blue Chip lot on left

Subdivision Market Place Lot 105 9

Description of Proposed Work Single Family - New Construction # of Bedrooms 4

Heated SF 1930 Unheated SF 458 Finished Bonus Room? NO Crawl Space MONO Slab X

**General Contractor Information**

Gary Robinson Homes, LLC  
Building Contractor's Company Name

910-977-2562  
Telephone

4140 Ramsey St, Suite 115  
Address

gary.robinsonhomes@yahoo.com  
Email Address

67530 UNL1010  
License #

**Electrical Contractor Information**

Description of Work New Construction Service Size 200 Amps T-Pole X Yes NO

Bugord Electric, LLC  
Electrical Contractor's Company Name

910-818-0994  
Telephone

948 Pan Dr., Hope Mills, NC 28348  
Address

thomasdbugord@yahoo.com  
Email Address

15109-L  
License #

**Mechanical/HVAC Contractor Information**

Description of Work Single Family New Construction

Certified Heating and Air Conditioning  
Mechanical Contractor's Company Name

910-858-0000  
Telephone

PO Box 1071, Hope Mills, NC 28348  
Address

patsy.grhomes@gmail.com  
Email Address

H3C1 20012  
License #

**Plumbing Contractor Information**

Description of Work New Construction # Baths 4

Dell Haire Plumbing  
Plumbing Contractor's Company Name

910-429-9939  
Telephone

PO Box 65048 2503 Southern Ave Fayette 28306  
Address

accountingoffice@ncnrbiz.com  
Email Address

24204 P-1  
License #

**Insulation Contractor Information**

Gary Robinson Homes, LLC, 4140 Ramsey St, Suite 115  
Insulation Contractor's Company Name & Address

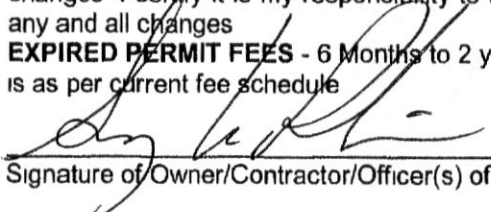
910-401-5505  
Telephone

Fayetteville, NC 28311

\*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

11/11/15  
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 Gary Robinson Homes, LLC

Sign w/Title  President Date 11/11/15

DO NOT REMOVE!

## Details: Appointment of Lien Agent

Entry #: 377747

Filed on: 11/06/2015

Initially filed by: po39quinn

### Designated Lien Agent

Premier Land Title Insurance Company

Online: [www.liensnc.com](http://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](mailto:support@liensnc.com) (<mailto:support@liensnc.com>)

### Project Property

Lot 105 Market Place  
51 Blue Chip Court  
Bunnlevel, NC 27505  
Harnett County

### Property Type

1-2 Family Dwelling

### Owner Information

Trace Homes, Inc.  
3857 Legion Road  
Hope Mills, NC 28348  
United States  
Email: [patsy.grhomes@gmail.com](mailto:patsy.grhomes@gmail.com)  
Phone: 910-987-1789

### Date of First Furnishing

11/25/2015

### 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