

Initial Application Date: 9/9/14

Application # 1450034573

CU _____

Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 Fax: (910) 893-2793 www.hamett.org

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

LANDOWNER: Bill Clark Homes Mailing Address: PO Box 87021

City: Fayetteville State: NC Zip: 26304 Home #: 910-426-2896 Contact #: 910-237-2479

APPLICANT: Bill Clark Homes Mailing Address: _____

City: _____ State: _____ Zip: _____ Home #: _____ Contact #: _____

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Brian Walker Phone #: 910-237-2479

PROPERTY LOCATION: Subdivision: Pattons Point Lot #: 48 Lot Size: 0.644

State Road #: 1141 State Road Name: Tringen Road Map Book&Page: 2007/304

Parcel: 039597-003944 PIN: 9597-40-0970.000

Zoning: RA-20R Flood Zone: n/a Watershed: n/a Deed Book&Page: 2588, 59L

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Hwy 27 towards Hwy 87 Turn left on Tringen Rd. Turn left into subdivision on Strike Eagle Dr. Turn left onto Bunker Buster Ct., then right onto fifty Caliber Dr -

- PROPOSED USE: (Include Bonus room as a bedroom if it has a closet)
- SFD (Size 40 x 48) # Bedrooms 3 # Baths 2 Basement (w/wo bath) n/a Garage car 2 patio Deck Crawl Space Slab
 - Mod (Size _____ x _____) # Bedrooms _____ # Baths _____ Basement (w/wo bath) _____ Garage _____ Site Built Deck _____ ON Frame / OFF
 - Manufactured Home: _____ SW _____ DW _____ TW (Size _____ x _____) # Bedrooms _____ Garage _____ (site built? _____) Deck _____ (site built? _____)
 - Duplex No. Buildings _____ No. Bedrooms/Unit _____
 - Home Occupation # Rooms _____ Use _____ Hours of Operation: _____ #Employees _____
 - Addition/Accessory/Other (Size _____ x _____) Use _____ Closets in addition ()yes ()no

Water Supply: County () Well (No. dwellings _____) **MUST** have operable water before final

Sewage Supply: New Septic Tank (Complete **New Tank Checklist**) () Existing Septic Tank () County Sewer

Property owner of this tract of land own land that contains a manufactured home w/in five hundred feet (500') of tract listed above? () YES NO

Structures (existing or proposed): Single family dwellings 1 Manufactured Homes _____ Other (specify) _____

Comments: _____

Required Residential Property Line Setbacks:

| | | | | |
|------------------------------|---------|------------|--------|--------------|
| Front | Minimum | <u>35'</u> | Actual | <u>38.6'</u> |
| Rear | | <u>20'</u> | | <u>76.2'</u> |
| Closest Side | | <u>10'</u> | | <u>42.0'</u> |
| Sidestreet/corner lot | | <u>20'</u> | | <u>62.0'</u> |
| Nearest Building on same lot | | <u>-</u> | | |

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.

Brian Walker
Signature of Owner or Owner's Agent

8/26/14
Date

This application expires 6 months from the initial date if no permits have been issued

A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) AND PLAN ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION Please use Blue or Black Ink ONLY

NAME: Bill Clark Homes

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

- 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.**
- Call No Cuts to locate utility lines prior to scheduling inspection. 800-632-4949 (This is a free service)
- 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 door as diagram indicates. Loosen trap door cover. (Unless inspection is for a septic tank in a mobile home park)
- After preparing trapdoor 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.

Bill Clark Homes

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

8/26/14
DATE

* Each section below to be filled out by
whomever performing work. Must be owner
or licensed contractor. Address, company
name & phone must match information on
license.

Application # _____

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
Phone 910-893-7525 Fax 910-893-2793 www.harnett.org

Application for Residential Building and Trades Permit

Owner's Name: Bill Clark Homes of Fayetteville, LLC Date: _____

Site Address: 66 Fifty Caliber Dr. Phone: (910) 426-2898

Directions to job site from Lillington: Hwy 27 toward 87 - Turn left on
Jingou, left into Subdivision on Strike Eagle, left onto
Bunker Buster, then right on Fifty Caliber

Subdivision: Pattons Point Lot: 48

Description of Proposed Work: Single Family Dwelling #Bedrooms: _____

Heated SF 1336 Unheated SF 578 Finished Rec Room? no Crawl Space () Slab

General Contractor Information

Bill Clark Homes of Fayetteville, LLC (910) 426-2898
Building Contractor's Company Name Telephone

400 Westwood Shopping Center Suite 220 Fayetteville, NC 28314 34592-BLD-U
Address License #

Brian Walker Must sign & fill out second page
Signature of Owner/Contractor/Officer(s) of Corporation

Electrical Permit Information

Description of Work _____ Service Size: _____ Amps TPole: yes/no

Sandy Ridge Electric, Inc. (910) 323-2458
Electrical Contractor's Company Name Telephone

454 Whitehead Rd. Fayetteville, NC 28312 10006-U
Address License #

[Signature]
Signature of Officer(s) of Corporation

Mechanical Permit Information

Description of Work HVAC & Gas Line

Carolina Comfort Air 910-339-2374
Mechanical Contractor's Company Name Telephone

200 Emmett Rd - Dunn, NC - 28334 29077
Address License #

[Signature]
Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work _____ # Baths _____

VANCE JOHNSON PLUMBING 910-424-6712
Plumbing Contractor's Company Name Telephone

3242 MID PINE DR FAY NC 28306 7756-PI
Address License #

[Signature]
Signature of Officer(s) of Corporation

Insulation Permit Information

A-1 Insulation P.O. Box 180 Hope Mills, NC 28348 (910) 429-2990
Insulation Contractor's Company Name & Address Telephone

Homeowners Applying to Build Their Own Home

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)

1. 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 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.

Brian D. Walker
Signature of Owner/Contractor/Officer(s) of Corporation

8/26/14
Date

Affidavit for Worker's Compensation N.C.G.S. 87-14

The undersigned applicant being the:

___ General Contractor ___ Owner X 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.

X 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: Brian D. Walker - Bill Clark Homes

Sign w/Title: Project Manager Date: 3-15-13

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 169667

Filed on: 07/30/2014

Initially filed by: bchfaync

Designated Lien Agent

Investors Title Insurance Company

Online: www.liensnc.com <https://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>

Project Property

66 Fifty Caliber Dr. (PP48)
Broadway, NC 28355
Harnett County

Property Type

1-2 Family Dwelling

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.

Owner Information

Bill Clark Homes
200 E. Arlington Blvd
Greenville, NC 27858
United States
Email: martha@billclarkhomes.com
Phone: 252-355-5805

View Comments (0)

Technical Support Hotline: (888) 690-7384