

Initial Application Date: 10-8-14

Application # 1450034721

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: Paul S + Pamela B Faircloth Mailing Address: 56 Olde Store Rd
City: Dunn State: NC Zip: 28334 Contact No: 910 984 6332 Email: pgfaircloth@gmail.com

APPLICANT*: Same Mailing Address: _____
City: _____ State: _____ Zip: _____ Contact No: _____ Email: _____
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Pamela Faircloth Phone # 910 984 6332

PROPERTY LOCATION: Subdivision: Long Branch Lot #: 1 Lot Size: 4.17A
State Road # 1793 State Road Name: Pope Rd Map Book & Page: 2410/15
Parcel: 02 1516/214 0013 PIN: 1515-81-1732.000
Zoning: R930 Flood Zone: X Watershed: NA Deed Book & Page: 3130 / 90 Power Company*: _____

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

PROPOSED USE:

- ☒ SFD: (Size 22x24') # Bedrooms: 2 # 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 proposed Manufactured Homes: _____ Other (specify): _____
SFD

Required Residential Property Line Setbacks:

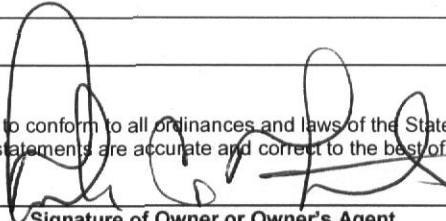
	Minimum	Actual
Front	<u>35</u>	<u>290</u>
Rear	<u>25</u>	<u>500</u>
Closest Side	<u>10</u>	<u>21</u>
Sidestreet/corner lot	<u>20</u>	
Nearest Building on same lot	<u>20</u>	

Comments: _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILINGTON:

Hwy 421 South to I 955 exit @ # 71 take a left
 onto Pope Road go approx 3 miles on the right

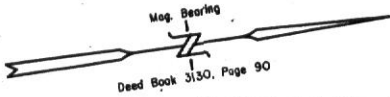
If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted. I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.


Signature of Owner or Owner's Agent


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



Deed Book 3130, Page 90

Pentecostal Freewill Baptist Church, Inc.

Deed Book 710, Page 555

Pentecostal Freewill Baptist Church, Inc.

Deed Book 710, Page 552

Pentecostal Freewill Baptist Church, Inc.

Deed Book 710, Page 555

James Travis Gregory

Deed Book 1699, Page 409
Map # 2002-1429

SITE PLAN

PROPERTY OF:

PAUL JUNIOR FAIRCLOTH

and wife

PAM GODWIN FAIRCLOTH

AVERASBORO TWP., HARNETT COUNTY, N.C.

SURVEY BY: JOYNER PIEDMONT SURVEYING

License No. F-0712
105 East Cumberland Street, P.O. Box 115, Dunn, NC. 28334
Phone (910) 892-2511

ZONE: RA-30 OCTOBER 03, 2014 SCALE: 1" = 100'

NOTE: Deed Reference:
Deed Book 3130, Page 90

LEGEND

FIP-----Found Iron Pipe
SIP-----Set Iron Pipe
FCM-----Found Concrete Monument
FPKN-----Found P.K. Nail
SPKN-----Set P.K. Nail
FRB-----Found Rebar
SRB-----Set Rebar
R/W-----Right of Way
C-----Centerline
CP-----Controlled Point
FCS-----Found Cotton Spindle
MSBL-----Minimum Setback Line
CC-----Control Corner

Kenneth Brooks Winters

Deed Book 3112, Page 389

MINIMUM SETBACK REQUIREMENTS

Front ----- 30'
Side ----- 10'
Rear ----- 25'



FPKN &
SR 1793 &
SR 1002

5/8" FRB
By Wrench
S 15° 22' 06" W
200.77'

FPKN
CC

NCSR 1793

"Pope Road"

60' R/W

NAME: FairclothAPPLICATION #: 1450034721

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 8 00

- **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 over outlet end as diagram indicates, and lift lid straight up (if possible) and then close back down. (Unless inspection is for a septic tank in a mobile home park)
- 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

10-9-14

09/09/11

Application #

14-50034721

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 Paul S. Pamel, G. Farcloth Date 10-28-11
Site Address 1684 Pope Rd Dunn NC Phone 910 984 6332
Directions to job site from Lillington 481 S to 295 S to exit 71
Left at sign go 3 miles on Right

Subdivision _____ Lot _____
Description of Proposed Work Single Dwelling Home # of Bedrooms 2
Heated SF 2880 Unheated SF _____ Finished Bonus Room? NA Crawl Space NA Slab ☒

General Contractor Information

Ronald Dupree R+V Builders LLC 910-892-4920
Building Contractor's Company Name SI Glenfield Dr Telephone _____
Dunn Dunn, NC 28334 Email Address _____
67266
License # _____

Electrical Contractor Information

Description of Work _____ Service Size _____ Amps T-Pole _____ Yes _____ No _____
Chris Sinclair Electric 919-820-6229
Electrical Contractor's Company Name _____ Telephone _____
Dunn 400 Bryant Rd Email Address _____
27819 Dunn, NC 28334
License # _____

Mechanical/HVAC Contractor Information

Description of Work Owner
Mechanical Contractor's Company Name _____ Telephone _____
Address _____ Email Address _____
License # _____

Plumbing Contractor Information

Description of Work _____ # Baths _____
Jason Barakat 910-514-0781
Plumbing Contractor's Company Name _____ Telephone _____
5476 Timothy Rd Email Address _____
20694 Dunn, NC 28334
License # _____

Insulation Contractor Information

Owner
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

10-28-14
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 

Sign w/Title Owner

Date 10-28-14

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 14-50034721 Date 10/28/14
 Property Address 1686 POPE RD
 PARCEL NUMBER 02-1516-12-14-0013- -06-
 Application type description CP NEW RESIDENTIAL (SFD)
 Subdivision Name
 Property Zoning RES/AGRI DIST - RA-30

Owner

Contractor

 FAIRCLOTH PAUL JUNIOR & PAMELA
 56 OLDE STORE ROAD
 DUNN NC 28334

 OWNER

Applicant

 FAIRCLOTH PAUL & PAMELA
 56 OLDE STORE RD
 DUNN NC 28334
 (910) 984-6332

--- Structure Information 000 000 72.2X84 2BDR SLAB W/ GARAGE
 Flood Zone FLOOD ZONE X
 Other struct info # BEDROOMS 2000000.00
 PROPOSED USE SFD
 SEPTIC - EXISTING? NEW TANK
 WATER SUPPLY COUNTY

 Permit BLDG, MECH, ELEC, PLB, INSU PERMIT
 Additional desc . .
 Phone Access Code . 1058437
 Issue Date 10/28/14 Valuation 0
 Expiration Date . . 10/28/15

 Special Notes and Comments

T/S: 10/08/2014 09:22 AM JBROCK ----
 HWY 421 S TO I95 EXIT @ #71 TAKE A LEFT
 ONTO POPE RD GO APPROX 3 MILES ON THE
 RIGHT
 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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Subdivision Name			
Property Zoning	RES/AGRI DIST - RA-30		
Permit	BLDG, MECH, ELEC, PLB, INSU PERMIT		
Additional desc			
Phone Access Code	1058437		

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		/ /
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		/ /

Attn: Lacey

Payment Receipt Confirmation

Your payment was successfully processed.

Transaction Summary

Description	Amount
Liens NC	\$25.00
Total Amount Paid	\$25.00

Customer Information

Customer Name Pamela G. Faircloth
Local Reference ID 73685
Receipt Date 10/17/2014
Receipt Time 08:04:22 AM PDT

Payment Information

Payment Type Credit Card
Credit Card Type VISA
Credit Card Number *****4492
Order ID 7454644
Billing Name Pamela G. Faircloth

Billing Information

Billing Address P.O. Box 1207
Billing City, State Dunn, NC
ZIP/Postal Code 28335
Country US
Phone Number 9108925286
Fax Number 9108914396

This receipt has been emailed to the address below.

Email Address pam@pjstruckbodies.com
pam@pjstruckbodies.com

