| nitial Application Date: 11/ | 04/2014 |
|------------------------------|---------|
|------------------------------|---------|

| Application # | 145 | 00 34 | 943 |
|---------------|------|-------|-----|
| | 01.4 | | · |

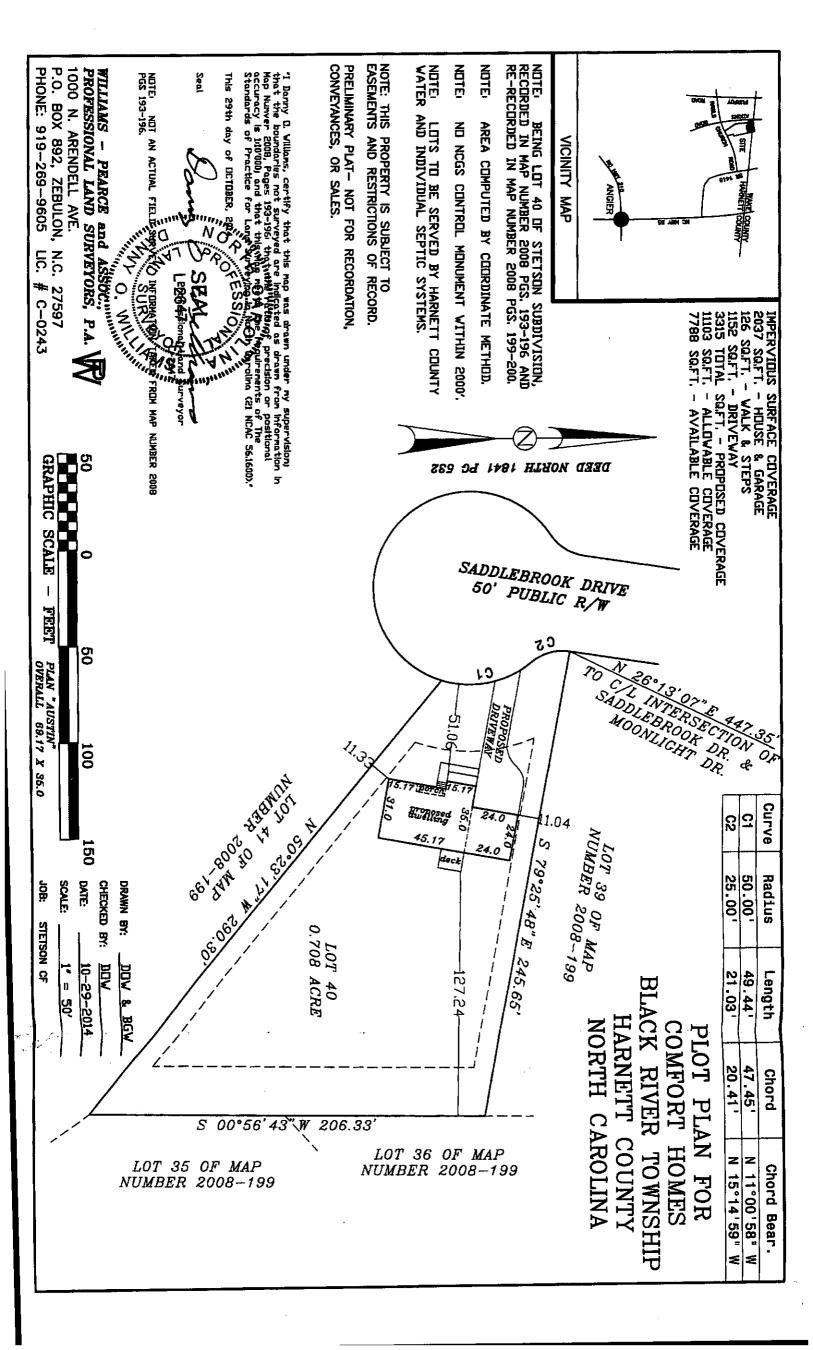
| | COUNTY OF MADNETT | DECIDENTIAL LAND LINE ADDI | 104TION | |
|--------------------|---|-----------------------------|---------------------|----|
| S | | RESIDENTIAL LAND USE APPI | LICATION | |
| Central Permitting | 108 E. Front Street, Lillington, NC 27546 | Phone: (910) 893-7525 ext:2 | Fax: (910) 893-2793 | W۷ |

| Central Permi | | ont Street, Lilling | | • | 910) 893-7525 ext:2 | | | www.hamett. | |
|---------------------------------|--|---------------------|--------------|---------------------------------------|-----------------------|-------------------------|-----------------|---------------------|-------------|
| | | | | | Address: POBox | | BMITTING A LA | ND USE APPLICA | .TION" |
| | | | | | 919 553 3242 | | comfrthom | es@aol.com | |
| | | | | | Box 369 | | | | |
| Clayton | ······································ | - NC | Mailing Ai | daress: | 919 553 3242 | | comfrthom | as@aal.com | |
| *Please fill out applica | ant information if differen | State: | _ Zip: | _ Contact No: | 919 553 3242 | Email | : | es@aoi.com | |
| CONTACT NAME | APPLYING IN OFF | ICE: Julian Ste | wart | · · · · · · · · · · · · · · · · · · · | | _ Phone #_ ⁹ | 19 422 1481 | | <u></u> |
| PROPERTY LOCA | TION: Subdivision: | Stetson | | | | 1 | ot # 410 | Lot Size: .70 | 8 ac |
| | | | awls Church | Road | | | lon Book & Bo | | 197-201 |
| Parcel: 040674 0 | 046 40 | / | | PIN: 066 | 35-70-7233.000 | IV | iap book & Pa | 9 00000 | 770,00 |
| Zoning: RA-30 | Flood Zone: | Watershed: | V Deed | Book & Page | 65-70-7233.000 | Power C | ompany*: Dul | ke Progress E | nergy |
| | | | | | umber 56126929 | | | Progress Energ | |
| | | | | | | | | - ' | |
| PROPOSED USI | | 0 | 0 | | | | | N | lonolithic |
| SFD: (Size | | | | | : Garage:_ - | | | | lab: |
| | (Is the be | onus room finish | ed? () yes (| () no w/a | closet? () yes (|) no (if yes | add in with # b | oedrooms) | |
| ☐ Mod: (Size | x)# Bedro | ooms #Bath | s Baseme | nt (w/wo bath |) Garage: | Site Built De | ck: On F | Frame Off | Eramo |
| ` | | | | | other site built addi | | | ranieOn | - I allie |
| | | | | | | | | | |
| ☐ Manufactured | Home:SW | _DWTW (S | izex_ |) # Bedro | oms: Garage:_ | (site built | !?) Deck:_ | (site built? | <u> </u> |
| ☐ Duplex: (Size | x) No. i | Buildings: | No. | . Bedrooms Po | er Unit: | | | | |
| ☐ Home Occupa | tion: # Rooms: | Use | ; | н | ours of Operation: | | | #Employees | · |
| ☐ Addition/Acces | isory/Other: (Size _ | x) Us | e: | | | | _ Closets in ac | ldition?() ye | s () no |
| | | | | | | | | | |
| | | | | | s using well | | | | inal |
| | | | | | tic Tank (Complete | | | | |
| | | | | | five hundred feet (5 | 500') of tract (| isted above? (| () yes (_) | no |
| Does the property c | | | _ | erhead () y | as (<u>√</u>) no | | | | |
| Structures (existing | or proposed): Singl | e family dwelling | s: proposed | Manufa | ectured Homes: | | _ Other (spec | ify): | |
| Required Resident | tial Pronouts: Line | Eatharles | C | -4 | | | | | |
| | | | Commer | 108: | | | · | · | |
| | Actual 25' | 127' | | | | | | | |
| Rear | 10' | 11' | | | - | | . | | |
| Closest Side | n/a | | _ | *** | | | | · · · · · | |
| Sidestreet/corner lot | | | | | | | | | |
| Nearest Building on same lot | <u>n/a</u> | | | | | | <u>.</u> | | |
| Resid | ential Land Use Ap | plication | ADDI IOATI | Page 1 of | 2 | | | 03/11 | i |

| SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: | t: 401 N. right on Rawls Church Rd, left on Atkins Road, subdivision on righ |
|---|--|
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| If permits are granted I agree to conform to all ordinances and laws of I hereby state that foregoing statements are accurate and correct to the | of the State of North Carolina regulating such work and the specifications of plans submitte the best of my knowledge. Permit subject to revocation if false information is provided. |
| Falle Wate | 11/04/2014 |
| Signature of Owner or Owner's Ag | gent 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



Harnett County Central Permitting
PO Box 65 Lillington NC 27546
910 893 7525 Fax 910 893 2793 www hamett 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

| a phone mast mater | | Date 10-31-14 |
|---------------------------|--|---------------------------|
| Owner's Name | Comfort Homes Inc. | Phone 919-553-3043 |
| Site Address QQ | Soddle brook Drive | Phone THAGO CO 18 |
| Directions to job site | from Lillington 401 North, R | ight on Rawls |
| a dound | d. left on Atting Ro | ad, Subdulision |
| pi 2 20 | · · | 115 |
| | - to four | Lot 40 |
| | osed Work Construction of Single Fami | there # of Bedrooms |
| Heated SF 1402 | Lipheated SE 5 / Finished Bonus Room? | TO Claw opace |
| _ | General Contractor involute | 6465-523-919 |
| Confort | elones Inc | Telephone |
| Building Contractor | S Company Name A Claybo DC 20528 | Confithomes @ aol. Com |
| PoBer 3 | of Clarer or arisas | Email Address |
| Address | | • |
| License # | | ation. |
| | Electrical Contractor Information Service Si | |
| Description of Worl | K LOUGHT / TITLE | 919-975-0599 |
| Summer field | - Semany Name | Telephone |
| Electrical Contract | ors Company Name Vol. Fire Depl. Rd. Selma NC | |
| 705 (hunksgivie | Val. tire tep. 12. | Email Address |
| Address 72825 | | |
| License # | Mechanical/HVAC Contractor In | f <u>ormation</u> |
| | Mechanicality of other Vent | Letion |
| Description of Wo | Roughin + trincut + other Vent | 919-329-0686 |
| Stephenson | actor's Company Name | Telephone |
| Mechanical Contr | ash Dr. Garne-NC-27529 | |
| 343.Shipux | ash Us. Garas | Email Address |
| Address /8644 | | |
| License # | Plumbing Contractor Inform | natio <u>n</u> |
| - · - | 7 Ye | # Raths |
| Description of Wo | ork Rough in + Trimouts | 919-934-1379 |
| AMBIL PLL | imbias | Telephone |
| Plumbing Contra | Blan Rd. Clayton NC 27520 | |
| 755 Kock P. | illar (d. Course | Email Address |
| Address ス <u>08</u> 23 | | |
| License # | Insulation Contractor Info | mation |
| | insulation Contracts into | 9/9-66/-0999 Telephone |
| Tatum Insu | Jolion - 519 old Drugtould. Gara actor's Company Name & Address | Telephone |
| Insulation Contra | actor's Company Hame 47 Marie | |

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/Contracto (Officer(s) of Corporation

| | ~ | | | • | | |
|----------------|---|----------------------|-------------|----------------------|------------------------------|------|
| The t | Affidavit indersigned applicant being | | Com | pensation N C | G S 87-14 | |
| | General Contractor | Owner | <u>X</u> _ | Officer/Agent of the | e Contractor or Owner | |
| | ereby confirm under penaltienth in the permit | es of perjury that t | he pei | son(s)rfirm(s) or co | rporation(s) performing the | work |
| | _ Has three (3) or more emp | oloyees and has o | btaine | d workers compen- | sation insurance to cover th | em |
| them | _ Has one (1) or more subco | ontractors(s) and | has ot | otained workers cor | npensation insurance to co | ver |
| cover | _ Has one (1) or more subco | ontractors(s) who | has th | eir own policy of wo | rkers compensation insura | ince |
| | Has no more than two (2) | employees and n | o subc | contractors | | |
| Depa to iss | working on the project for with ment issuing the permit manage of the permit and at a ng out the work | ay require certifica | ates of | coverage of worker | s compensation insurance | |
| Comp | pany or Name Conti | nt Don | ಣ್ರ ' | - sal | | _ |
| Sign | w/Title - Sable 1 | aile a | <u> 25.</u> | + bac'y | Date <u>\</u> | 14 |
| | | | | \wedge | | |

1000

| 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.

| <u>SEPTIC</u> | the state of professions and the state of professions must choose one |
|---|---|
| If applying for authorization | on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one. |
| {} Accepted | () Innovative { |
| | (_") Other |
| The applicant shall notify question. If the answer is | the local health department upon submittal of this application if any of the following apply to the property in supersummers "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION: |
| {}}YES | Does the site contain any Jurisdictional Wetlands? |
| _ YES X NO | Do you plan to have an <u>irrigation system</u> now or in the future? |
| $\{\bot\}$ YES $\{X\}$ NO | Does or will the building contain any drains? Please explain. |
| $\{\underline{X}\}$ NO | Are there any existing wells, springs, waterlines or Wastewater Systems on this property? |
| LIYES IX NO | Is any wastewater going to be generated on the site other than domestic sewage? |
| {_)YES {X} NO | Is the site subject to approval by any other Public Agency? |
| I_IYES INO | Are there any Easements or Right of Ways on this property? |
| LIYES INO | Does the site contain any existing water, cable, phone or underground electric lines? - only & Street right |
| · | If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service. |
| I Have Dead This Applicat | tion 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)

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 209930

Filed on: 10/30/2014

Initially filed by: ComfortHomes

Designated Lien Agent

WFG National Title Insurance Company

Online: www.hensnc.com/http://www.lionane.com/

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

27601

Phone: 888-690-7384
Fax: 913-489-5231

Email: support@bersnc.com(mu.to support@beaune.gom)

Project Property

Stetson Lot 40 99 SADDLEBROOK DRIVE FUQUAY-VARINA, NC 27526 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

Comfort Homes, Inc. P O Box 369 Clayton, NC 27528 United States Email: comfrthomes@aol.com Phone: 919-553-3242

View Comments (0)

Technical Support Hotline: (888) 690-7384

October 31, 2014

Comfort Homes, Inc. has an option to purchase Lots 4, 25, and 40 in Stetson Subdivision, recorded in Map Book 2008, Pages 193-200, Harnett County Register of Deeds.



I, Patricia F. Waite, do hereby certify that Julian R. Stewart, President of Comfort Homes, Inc., personally appeared before me this day and acknowledged the due execution of the foregoing instrument.

Witness my hand and Notarial Seal, this 3rd day of November 2014.

(Notary Public)

My commission expires 4/2/17.

Stetson # 99

| Plan Box # | -6 | Date | 1-14-14 e Lonfort b | Homes |
|---------------------------------------|------------|---|------------------------|-------|
| | 34943 | 7.5 | | |
| Inspections for S | 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 | 1 |
| Final | Final | Final | Open Floor | |
| | | | Rough In | |
| | | | Insulation | |
| | ; i | | Final | |
| Foundation Surve | ey No | Envir. Health <u>New</u> | Other | |
| | | *************************************** | •••••• | ••••• |
| Additions / Other | | | | |
| | • | • | | |
| ooting | • | | | |
| oundation | | | | |
| lab | | | | |
| 1ono | | | | |
| pen Floor | | | | |
| ough In | • | • | | |
| sulation | | • | | |
| nal | | | | |
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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 type description CP NEW RESIDENTIAL (SFD) Subdivision Name STETSON 53LOTS Property Zoning RES/AGRI DIST - RA-30 Owner Contractor ______ -----FISH BROTHERS INC FISH BROTHERS INC 7440 KENNEBEC RD WILLOW SPRINGS NC 27592 COMFORT HOMES INC PO BOX 369 CLAYTON NC 27520 (919) 553-3242 Applicant _______ COMFORT HOMES INC #99 Structure Information 000 000 70X37 3BDR 2BATH SFD W GAR DECK CRAWL Flood Zone FLOOD ZONE X Other struct info # BEDROOMS # BEDROOMS
PROPOSED USE SFD
SEPTIC - EXISTING? NEW TANK
COUNTY WATER SUPPLY COUNTY Permit BLDG, MECH, ELEC, PLB, INSU PERMIT Additional desc . . Phone Access Code . 1062793
Issue Date . . . 12/08/14
Expiration Date . . 12/08/15 Valuation Special Notes and Comments T/S: 11/17/2014 09:00 AM VBROWN ----99 SADDLEBROOK DRIVE FUQ VAR, STETSON SUB DIV #99

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 Date 12/08/14

Permit BLDG, MECH, ELEC, PLB, INSU PERMIT

Additional desc . .

Phone Access Code . 1062793

Required Inspections

| Seq | Phone Insp# | Insp Code | Description | Initials | Date |
|---|---|--|--|----------|-------|
| 10 20 20-30 30-999 40-50 40-60 40-60 40-60 | 101 103 814 105 129 425 125 325 225 | B101 B103 A814 B105 I129 R425 R125 R325 R225 | R*BLDG FOOTING / TEMP SVC POLE R*BLDG FOUND & TEMP SVC POLE ADDRESS CONFIRMATION R*OPEN FLOOR R*INSULATION INSPECTION FOUR TRADE ROUGH IN ONE TRADE ROUGH IN THREE TRADE ROUGH IN TWO TRADE ROUGH IN | | |
| 50-60 50-60 | 429 131 | R429 R131 | FOUR TRADE FINAL ONE TRADE FINAL | | _// |
| 50-60 | 329 | R329 | THREE TRADE FINAL | | ',', |
| 50-60 999 | 229 | R229 H824 | TWO TRADE FINAL ENVIR. OPERATIONS PERMIT | | -/,/, |