

Initial Application Date: 01/12/15

Application # 15 500 35 300

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.hamett.org/permits

"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION"

LANDOWNER: SOUTH-SCAN, INC. Mailing Address: 3128 GOLD DUST LN
City: WILLOW SPRING State: NC Zip: 27592 Contact No: 919 669 4273 Email: DUCKBURGLE@gmail.com

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

CONTACT NAME APPLYING IN OFFICE: BERT KYMALAINEN Phone # 919 669 4273

PROPERTY LOCATION: Subdivision: TROTTER'S BLUFF AT FOX RUN Lot #: 46 Lot Size: .69 AC
State Road # SR 2586 State Road Name: PRAIRIE LN Map Book & Page: 2013, 227
Parcel: 030507006745 PIN: 9597-93-1413.000

Zoning: RA-20R Flood Zone: N Watershed: N Deed Book & Page: 03229, 0339 Power Company*: DUKE PROGRESS
*New structures with Progress Energy as service provider need to supply premise number 81037004 from Progress Energy.

PROPOSED USE:

SFD: (Size 54 x 52) # Bedrooms: 3 # Baths: 2 Basement (w/wo bath): N Garage: 2 Deck: N Crawl Space: N Slab: STEM Slab Monolithic Slab: N
(Is the bonus room finished? () yes (X) no w/ a closet? () yes (X) 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 (X) no

Does the property contain any easements whether underground or overhead () yes (X) no

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

Required Residential Property Line Setbacks:

Front	Minimum	<u>35</u>	Actual	<u>39</u>
Rear		<u>25</u>		<u>179</u>
Closest Side		<u>10</u>		<u>22</u>
Sidestreet/corner lot		<u>-</u>		<u>-</u>
Nearest Building on same lot		<u>-</u>		<u>-</u>

Comments: _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:

27 W, LAT DOG'S RD, R+AT
PRAIRIE LN, LOT ON R+ IN NEW
SECTION.

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.

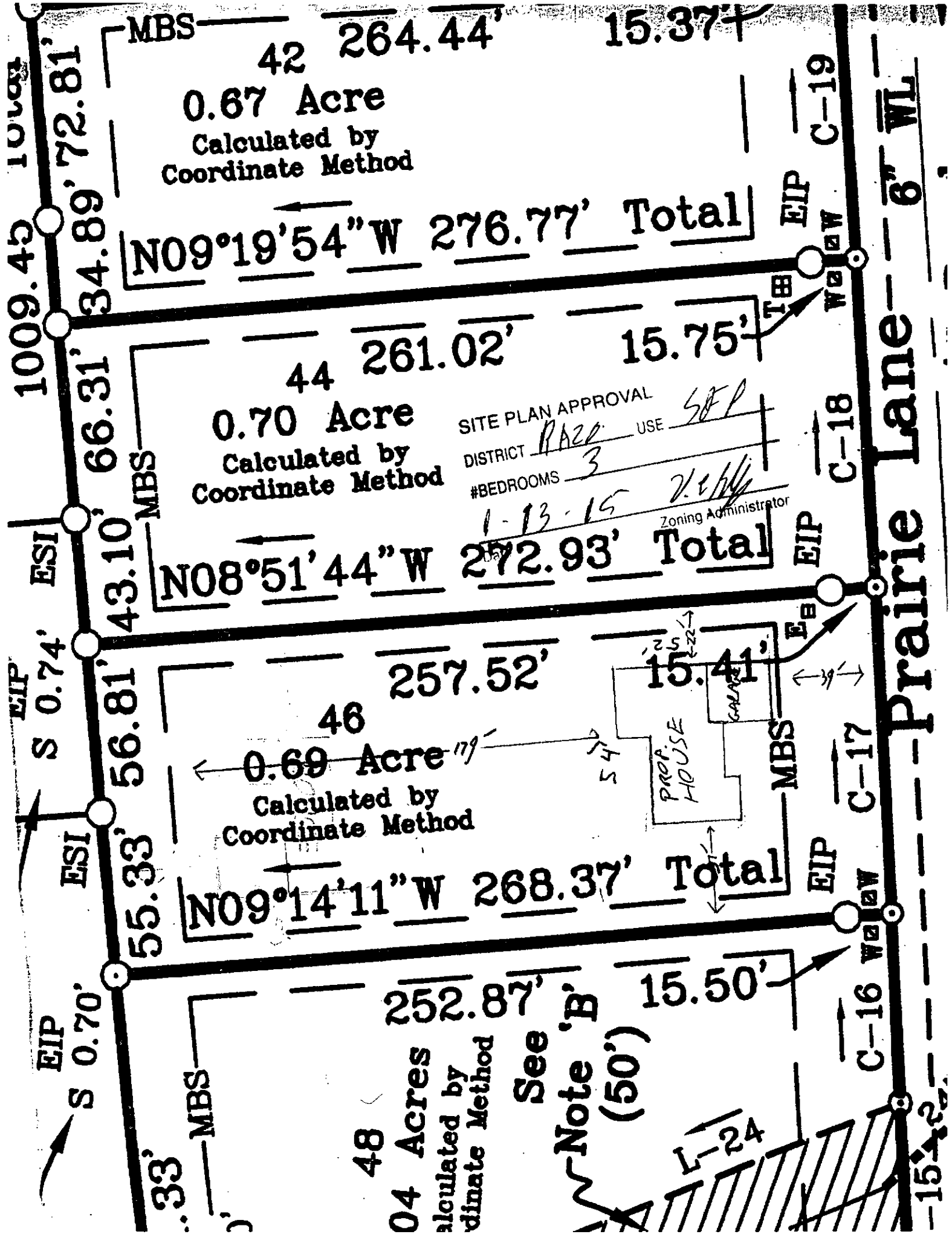


Signature of Owner or Owner's Agent

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



MBS 42 264.44' 15.37'

0.67 Acre
Calculated by
Coordinate Method

N09°19'54" W 276.77' Total

MBS 44 261.02' 15.75'

0.70 Acre
Calculated by
Coordinate Method

N08°51'44" W 272.93' Total

SITE PLAN APPROVAL
DISTRICT RAZZ USE SFP
#BEDROOMS 3
1-13-15
Zoning Administrator

EIP S 0.74' ESI 43.10' MBS 46 257.52' 15.41'

0.69 Acre
Calculated by
Coordinate Method

N09°14'11" W 268.37' Total

PROP. HOUSE

EIP S 0.70' MBS 48 252.87' 15.50'

0.4 Acres
Calculated by
Coordinate Method

See Note 'B'
(50')

Prairie Lane - 6" WL

C-19
C-18
C-17
C-16

1542

NAME: SOUTH-SCAN, INC.

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.

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 25% RED.

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.

BY [Signature] PROG.
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

01/12/15
DATE

1997

1997

1997

1997

1997

1997

DO NOT REMOVE!

Details: Appointment of Lien Agent
Entry #: 235923

Filed on: 01/11/2015
Initially filed by:
duckburg1@gmail.com

Designated Lien Agent

Investors 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

Project Property

lot 46
472 prairie ln
hillington, nc, NC 27546
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

South Scan, Inc.
3128 gold dust ln
willow spring, NC 27592
United States
Email: duckburg1@gmail.com
Phone: 919-669-4273

Date of First Furnishing

02/02/2015

View Comments (0)

Technical Support Hotline: (888) 690-7384

HARRIS COUNTY CENTRAL RECORDING

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	15-50035300	Date	4/07/15
Property Address	472 PRAIRIE LN		
PARCEL NUMBER	03-0507- - -0067- -45-		
PIN	9597-93-1413.000		
Application type description	CP NEW RESIDENTIAL (SFD)		
Subdivision Name	TROTTER'S RIDGE PH2B 23LOTS		
Property Zoning	RES/AGRI DIST - RA-20R		

Owner

Contractor

SOUTH-SCAN, INC
3128 GOLD DUST LANE
WILLOW SPRINGS NC 27592

OWNER

Applicant

SOUTH SCAN INC

--- Structure Information 000 000 54X52 3BDR 2BATH SFD W GAR STEMWALLSLAB

Flood Zone	FLOOD ZONE X	
Other struct info	# BEDROOMS	3.00
	PROPOSED USE	SFD
	SEPTIC - EXISTING?	NEW TANK
	WATER SUPPLY	COUNTY

Permit BLDG,MECH,ELEC,PLB,INSU PERMIT

Additional desc . . .

Phone Access Code . 1079995

Issue Date 4/07/15

Valuation 0

Expiration Date . . 4/06/16

Special Notes and Comments

T/S: 01/13/2015 03:57 PM VBROWN ----
472 PRAIRIE LANE, TROTTERS BLUFF AT FOX
RUN #46. 27W, LEFT DOCS RD, RIGHT AT
PRAIRIE LANE.

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

Bldg Insp scheduled before 2pm available next business day.

Application Number	15-50035300	Page	2
Property Address	472 PRAIRIE LN	Date	4/07/15
PARCEL NUMBER	03-0507- - -0067- -45-		
PIN	9597-93-1413.000		
Application description	CP NEW RESIDENTIAL (SFD)		
Subdivision Name	TROTTER'S RIDGE PH2B 23LOTS		
Property Zoning	RES/AGRI DIST - RA-20R		
Permit	BLDG,MECH,ELEC,PLB,INSU PERMIT		
Additional desc			
Phone Access Code	1079995		

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	_____	___/___/___
30-999	205	E205	R*ELEC 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	_____	___/___/___

*** PAY AT PERMIT PICKUP PLS ***
HARNETT COUNTY DEPARTMENT OF PUBLIC UTILITIES
WATER USER'S AGREEMENT

1550035300

Form Must be Completed in Full Before Service is Made Available. ID is Required.

Today's Date: <u>03/20/15</u>	*Deposits shown apply for customers with approved credit only!
Date Service Requested: <u>Will Call</u>	Fees Due: Deposit, Owner, Water \$25 Connection Fee, all accounts: \$15
	Deposit, Owner, Sewer \$25
	Deposit, Rental, Water \$50
	Deposit, Rental, Sewer \$50 Meter Fee: \$70

This agreement is to request Harnett County Department of Public Utilities through normal procedures and in accordance with the District's Rules and Regulations, to provide water and/or sewer service connections at the following location:

Please Print: Subdivision TROTTER'S BLUFF Lot # 46 Permit # (if applicable) 1550035300
Service Address: 472 PRAIRIE LN WILLINGTON NC 27546 Landlord: _____
Applicant's Name: SOUTH-SCAN, INC.
Co-Applicant's Name: _____
Mailing Address: 3128 GOLD DUST LN
Town: WILLOW SPRING State: NC Zip: 27592
Home Phone Number: _____ Contact Phone Number: 919 669 4273
Previous Address: _____

Customer's Social Security #: <u>EIN 65-0233463</u>	Co-App's Social Security #: _____
Customer's Drivers License #: _____	Birthdate: _____
Co-App's Drivers License #: _____	Birthdate: _____

Employer: _____
Employer's Address: _____ Employer's Phone #: _____
Co-Applicant's Employer and Phone #: _____
Name of Nearest Relative: _____ Phone #: _____
Mailing Address: _____

I, the undersigned, do agree to abide by the rules and regulations of the Harnett county Department of Public Utilities. Should I fail to make all payments on time when due as stated on the WATER/SEWER bill, the department has the right to disconnect my services without further notice. In order for service to be restored, I will be required to pay ALL DUE amounts plus a \$30 reconnect fee. Any fees resulting from court action to collect on an account will be the responsibility of the customer. Any FINAL BILLS with a credit balance of less than \$1.00 will not be refunded. Property owners will be responsible for a monthly bill regardless of whether water and/or sewer is being used, until the property is sold or rented. By signing this application, you are agreeing that you are at least 18 years of age.

Customer Signature: BY [Signature] PRES.

Amount Paid: _____	Cash: _____	Check: _____	Account #: CID: <u>19599</u>	LID: <u>92733</u>
Account # Transferred From: _____	Date To Turn Off: _____			
Address of Transferred Account: _____	Turn On: _____	Read Only: _____	Install: _____	