Initial Application Date: 1-16-15 Application # 1550035354

CU# _____

Owner: JJJB Inc

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

Buyer: ~~LANDOWNER~~: Pride Homes, Inc Mailing Address: 7353 Mariners Landing Dr.

City: Fayetteville State: NC Zip: 28306 Contact # 910-670-8237 Email: lauren.grhomes@gmail.com

APPLICANT*: Gary Robinson Homes LLC Mailing Address: 4140 Ramsey St, Suite 115

City: Fayetteville State: NC Zip: 28311 Contact # 910-401-5505 Email: lauren.grhomes a

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Lauren Robinson Phone # 910-670-8237

PROPERTY LOCATION: Subdivision: Plantation of Vineyard Green Lot #: 25 Lot Size: .5112 acres

State Road # _____ State Road Name: Tripp Rd Map Book&Page: 2004 / 904

Parcel: 11045 100 5760 PIN: 0451-82-3780.00

Zoning: RA40 Flood Zone: X Watershed: NA Deed Book&Page: 03230 / 0306 Power Company*: Duke Energy

*New structures with Progress Energy as service provider need to supply premise number 86564778 from Progress Energy.

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Hwy 210 N from Lillington, Turn left onto Tripp Road. Left onto Scuppernong - Second Right - at end of Cul-D-Sac -

PROPOSED USE:

☒ SFD: (Size 43 x 40) # Bedrooms: 3 # Baths: 2.5 Basement(w/wo bath): WO Garage: 458 Deck: ____ Crawl Space: ____ Slab: X Monolithic Slab: ____

(Is the bonus room finished? (X) yes (__)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: X County ____ Existing Well ____ New Well *(# of dwellings using well _____)* ***MUST** have operable water before final

Sewage Supply: X 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: 1 Manufactured Homes:_____ Other (specify):_____

Required Residential Property Line Setbacks: **Comments:**_____

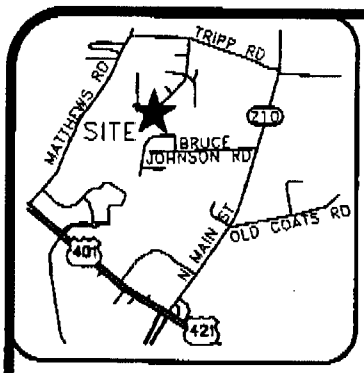
	Minimum	Actual	
Front		37	
Rear		99.5	
Closest Side		10.5	
Sidestreet/corner lot			
Nearest Building on same lot			

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** 1/16/15 **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



VICINITY MAP (NTS)

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EOP=EDGE OF PAVEMENT
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IRON PIPE SET
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G. DARRELL TAYLOR, PLS L-3729 DATE

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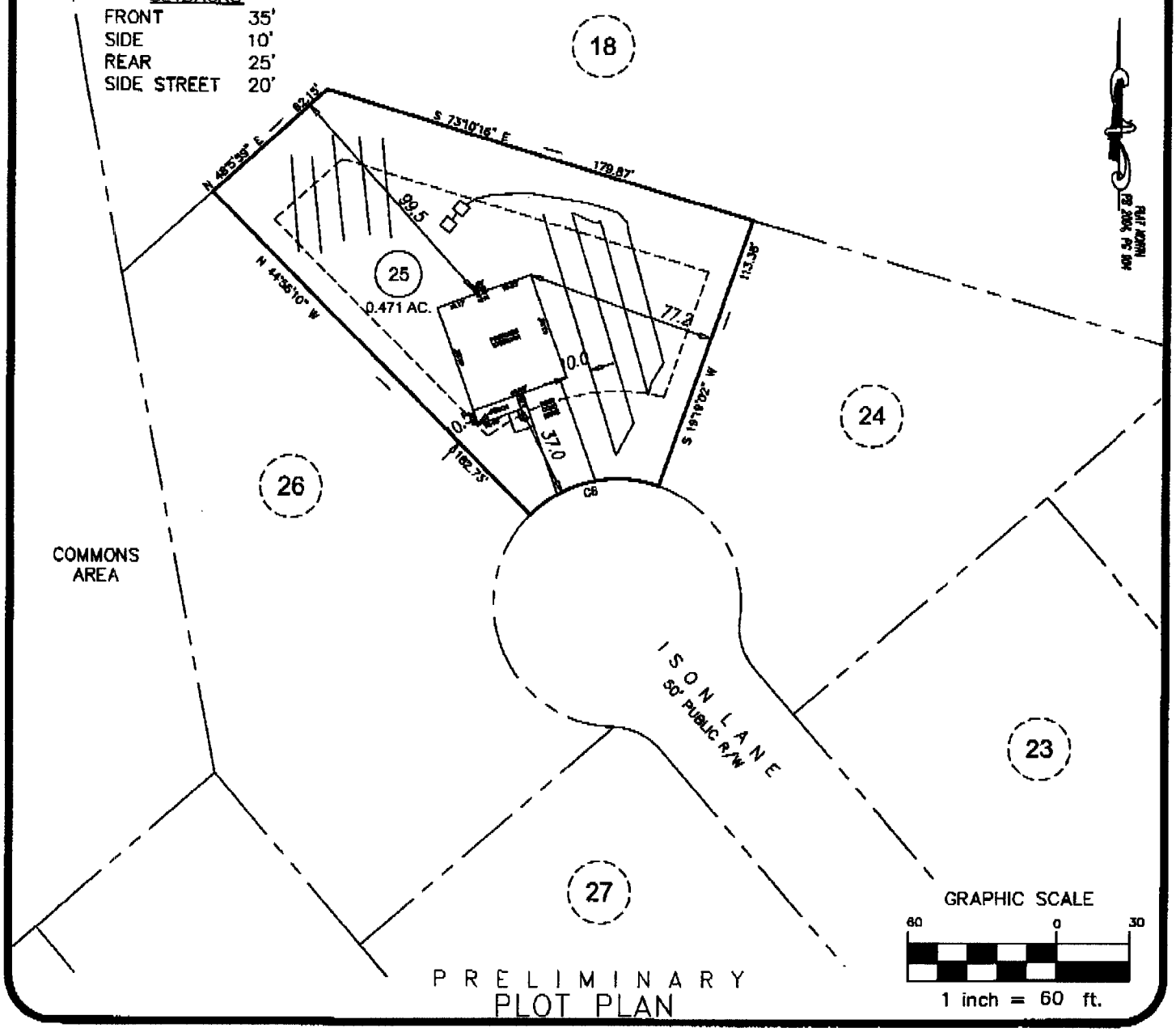


PRELIMINARY
PLOT PLAN

PROJECT:	14-005
DRAWN BY:	AMW
SCALE:	1"=60'
DATE:	01-16-15

FOR
GARY ROBINSON HOMES
___ ISON LANE
LOT 25 THE PLANTATION AT VINEYARD GREEN SUBDIVISION
NEILL'S CREEK TWP., HARNETT CO., NC
P.B. 2004, PG. 904

ECLS
SURVEYING THE EAST COAST
227 FISH DRIVE
ANGIER, NC 27501
910.897.3257
910.897.2329 (FAX)
ECLSINC.COM

SOUTHEASTERN SOIL & ENVIRONMENTAL ASSOC., INC.

PROPOSED SUBSURFACE WASTE DISPOSAL SYSTEM DETAIL SHEET

SUBDIVISION PLANTATION AT VINEYARD GREEN LOT 25

INITIAL SYSTEM PUMP TO APPROVED 25% REDUCTION REPAIR PANEL BLOCK (PABS)

DISTRIBUTION SERIAL DISTRIBUTION TBD

BENCHMARK 100.0 LOCATION ELEC BOX PAD (24/25) INITIAL

NO. BEDROOMS 3 PROPOSED LTAR 0.35 GPD/FT² (INITIAL)
0.30 GPD/FT² (REPAIR)

	LINE	FLAG COLOR	ELEVATION	LENGTH (FT)
INITIAL	1	W	100.92	55'
	2	P	100.58	75'
	3	W	100.34	90'
	4	P	100.00	100'
				320' AVAIL
REPAIR	5	B	103.50	40'
	6	P	102.92	40'
	7	B	102.32	40'
	8	P	101.67	40'
	9	W	101.00	40'
				200'

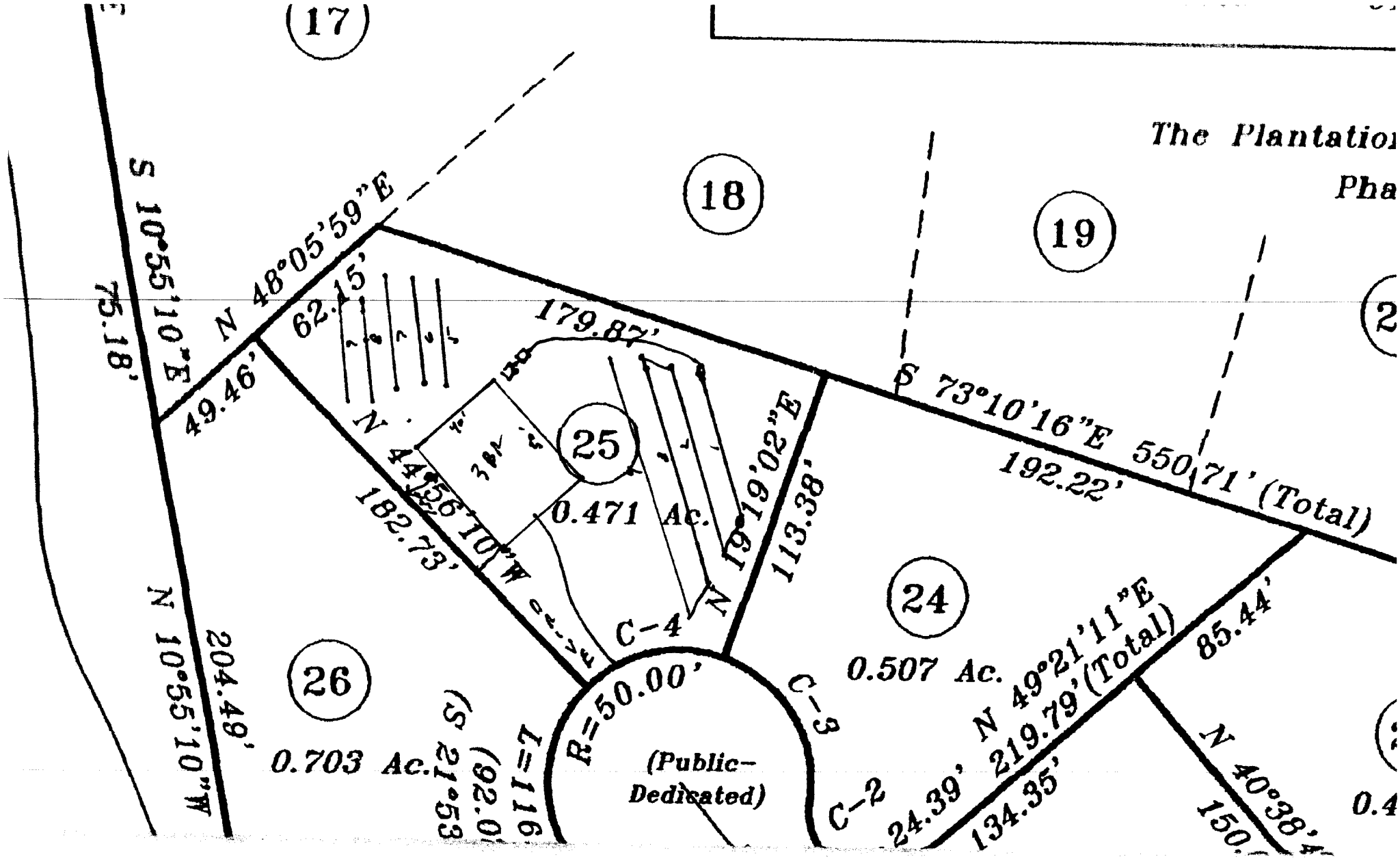
BY MEAKER DATE 04/2014

TYPICAL PROFILE (INITIAL)

0-10 LS (VFR, mgr)
10-36+ SCL (FI: sbk)

Cr > 36"
INSTAL AT 18"

(REPAIR) 0-6 SLOAM (VFR, mgr)
6-44 Clay (FI: sbk)
SAP > 44"


The Plantatio
Pha
17
18
19
2
25
26
24
S 10°55'10"E
75.18'
N 48°05'59"E
62.15'
49.46'
179.87'
S 73°10'16"E 550.71' (Total)
192.22'
N 19°19'02"E
113.38'
N 44°56'10"W
182.73'
0.471 Ac.
C-4
R=50.00'
C-3
C-2
(Public-
Dedicated)
N 10°55'10"W
204.49'
0.703 Ac.
L=116.
(S 21°53
0.507 Ac.
N 49°21'11"E
219.79' (Total)
24.39'
134.35'
85.44'
N 40°38'
150.
0.4

1" = 50'

NAME:_____ 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.

_____ 1/16/15

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED) **DATE**

Vacant Lot Purchase Contract

Buyer, Pride Homes Inc offers to purchase from

Seller, JJJB Investments, LLC the following parcel of land:

Subdivision, Plantation of Vineyard Green, City, Lillington, NC

County, Harnett Lot number 25 Deed Book 03230

Page 0306 Purchase Price $ 26,500.00 Earnest Money

Deposit $ -0- Balance Due at Closing $ 26,500.00.

Property must be zoned with no restrictions for Single Family Home use.

Seller will pay for deed preparation, title research and revenue stamps. Buyer will pay all other closing costs. Closing will occur on or before _____.

The deed will be made to Pride Homes, Inc..

Special Conditions: none.

Seller will provide public water access and private or public sewer to the vacant lot.

All earnest monies become non refundable if closing does not occur on or before the contract closing date.

Buyer and Seller agree and confirm all terms and conditions in the contract.

Buyer: Pride Homes, Inc Date: 1/16/15

Title: Owner Phone: 910-751-2402 Fax: 910-488-6086

Buyer's Mailing Address: 7353 Mariners Landing Dr., Fay NC 28306

Seller: JJJB Investments, LLC Date: 1/16/15

Title: Manager/member Phone: 910-670-2040 Fax: 910-488-6086

Seller's Mailing Address: 407 Lions Head Road, Fay NC 28311

09/09/11

Application # 15-50035354

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 Pride Homes, Inc Date 1/19/15

Site Address 50 Ison Lane, Lillington, NC 27546 Phone 910-401-5505

Directions to job site from Lillington Hwy 210 N of Lillington. Turn left onto Tripp Road. Left onto Snuppernong - Second ~~left~~ Right lot at end of Cul-de-sac.

Subdivision Plantation of Vineyard Green Lot 25

Description of Proposed Work New Construction - Single Family # of Bedrooms 3

Heated SF 2066 Unheated SF 458 Finished Bonus Room? X Crawl Space ___ Slab X

General Contractor Information

Gary Robinson Homes, LLC
Building Contractor s Company Name

910-977-2562
Telephone

4140 Ramsey St, Suite 115
Address

garyrobinsonhomes@yahoo.com
Email Address

67530 unlimited
License #

Electrical Contractor Information

Description of Work Single Family New Const Service Size 200 Amps T-Pole x Yes ___ No

Parnell Electric, Inc.
Electrical Contractor s Company Name

910-237-3751
Telephone

6400 Allie Cooper Road
Address

parnellelectric@gmail.com
Email Address

24236-U
License #

Mechanical/HVAC Contractor Information

Description of Work Single Family - New Const

Chacco, Inc
Mechanical Contractor s Company Name

910-488-0318
Telephone

PO Box 36037 Fay, NC 28303
Address

chacco@embarqmail.com
Email Address

2957 PH-1-3
License #

Plumbing Contractor Information

Description of Work New Construction # Baths ___

Dell Haire Plumbing
Plumbing Contractor s Company Name

910-429-9939
Telephone

PO Box 45048 2503 Southern Ave Fay, NC 28306
Address

accountingoffice@ncrrbiz.com
Email Address

24204 P-1
License #

Insulation Contractor Information

Gary Robinson Homes, LLC, 4140 Ramsey St, Suite 115 Fayetteville, NC 28311
Insulation Contractor s Company Name & Address

910-401-5505
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 _____ Date 1/19/15

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 _____ Date 1/19/15

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 238964

Filed on: 01/19/2015
Initially filed by: po39quinn

Designated Lien Agent

Chicago Title Company, LLC

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

Owner Information

Price Homes, Inc.
7353 Mariners Landing Dr,
Fayetteville, NC 28306
United States
Email: patsy.grhomes@gmail.com
Phone: 910-751-2402

Project Property

Lot 25 Plantation of Vineyard Green
50 Ison Lane
Lillington, NC 27546
Harnett County

Property Type

1-2 Family Dwelling

Date of First Furnishing

02/05/2015

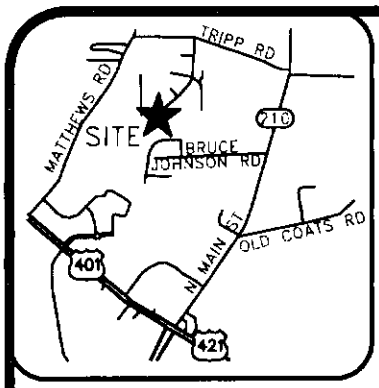
Print & Post

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



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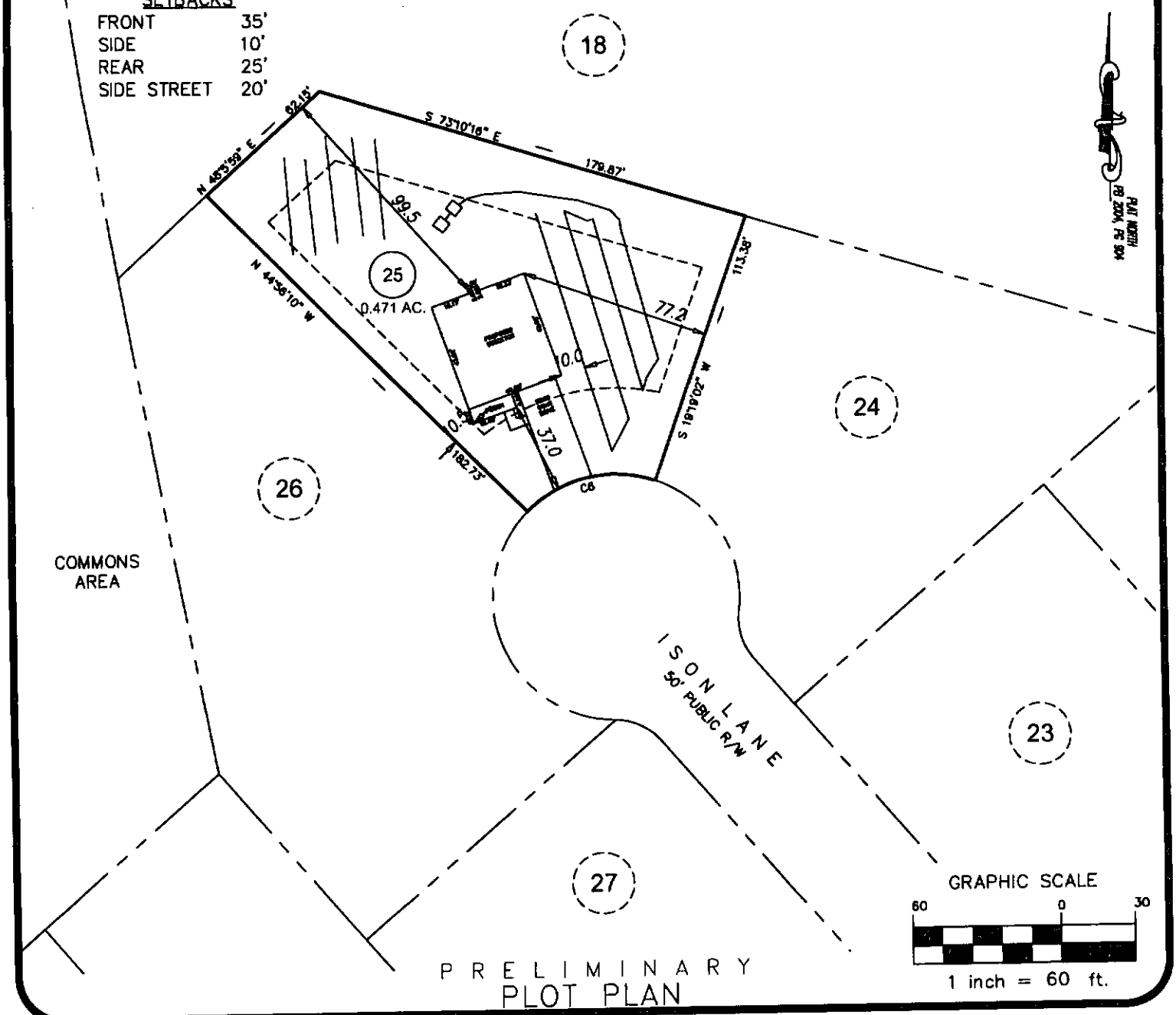

GRAPHIC SCALE

60 0 30

1 inch = 60 ft.

PRELIMINARY
PLOT PLAN

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DRAWN BY:	AMW
SCALE:	1"=60'
DATE:	01-16-15

FOR
GARY ROBINSON HOMES
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