Initial Application Date:_	2-	5-	14

Application #	1	<	$\wedge \wedge$	2			7
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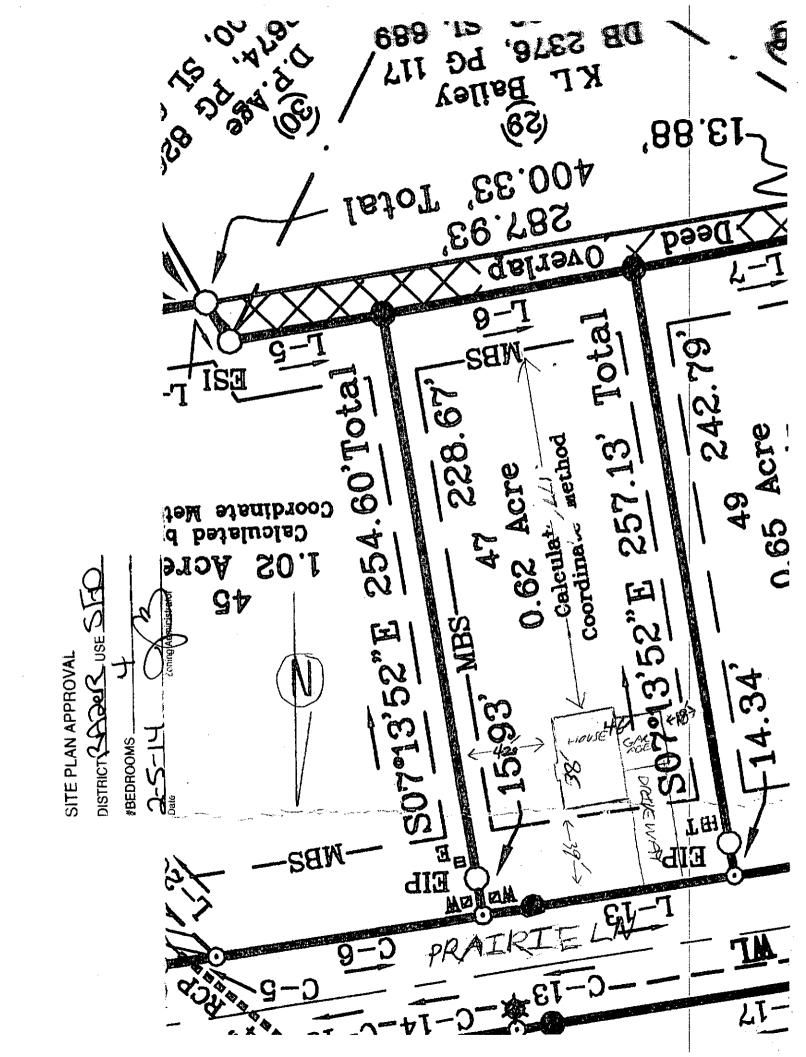
COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-275	
"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A	The second section is a second
TANDOWNER SOUTH SCAN INC	LAND USE APPLICATION"
LANDOWNER: SOUTH SCAN, INC Mailing Address: 3/28 G-010 DVS. City: WILLOW SPRING State: NC Zip. 27592 Contact No: 99 669 4773 Email: DVCA	LP196 10 CALL
State: VC Zip Z 7 7/2 Contact No: 117 067 7 2 7 5 Email: DOC	COURTE CMAILCO
APPLICANT: Same Malling Address:	
City: State: 7in: Control No.	
Please fill out applicant information if different than landowner	a Maria la Calabara de Caracteria
CONTACT NAME APPLYING IN OFFICE: BERT KYMBLAINEN Phone # 919	
PROPERTY LOCATION: Subdivision: TROTYERS BLUFF Lot #: 47	1 Lot Size 62AC
State Road # SR 2586 State Road Name: PRAIRIE LANE Map Book &	Page 2013, 227
Parcel: 030507 0067 46 PIN: 9597-83-9007.000	
Zoning: R4ZOR Flood Zone: NO Watershed: NO Deed Book & Page: 03229-0333 ower Company*:	
New structures with Progress Energy as service provider need to supply premise number 46603858	om Progress Energy
	Jim rogress Lifergy.
PROPOSED USE:	
SFD: (Size 48 x 38) # Bedrooms: 4 # Baths: 3 Basement(w/wo bath): Garage: 2 Deck: Crawl Spac	e: Slab: Slab:
(is the bonus room finished? (<u>K</u>) yes () no w/ a closet? (<u>K</u>) yes () no (if yes add in with	# bedrooms)
Mod: (Sizex) # Bedrooms # Baths Basement (w/wo bath) Garage: Site Built Deck: C	On FrameOff Frame
(Is the second floor finished? () yes () no Any other site built additions? () yes () no	0
Manufactured Home:SWDWTW (Sizex) # Bedrooms: Garage:(site built?) Dec	الإداريم مالم المالم
	w(site bruitt)
Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit:	
Home Occupation: # Rooms: Use: Hours of Operation:	#Employees:
Addition/Accessory/Other: (Sizex) Use: Closets in	addition? () yes () no
Vater Supply: X County Existing Well New Well (# of dwellings using well) *Must have operate	ala water hatera final
ewage Supply: Karaman New Septic Tank (Complete Checklist) Existing Septic Tank (Complete Checklist) Coun	the Course
oes owner of this tract of land, own land that contains a manufactured home within five hundred feet (500') of tract listed above	
oes the property contain any easements whether underground or overhead () yes() no	e?() yes (<u>?\</u>) no
tructures (existing or proposed): Single family dwellings: 1-PROP. Manufactured Homes: 0ther (sp	4/0
Other (sp	pecify):
equired Residential Property Line Setbacks: Comments:	
ont Minimum 35 Actual 39	
ear <u>25 177</u>	
osest Side 10 \8	· · · · · · · · · · · · · · · · · · ·
destreet/comer lot	
destreet/comer lot	

RY AT PRAIRIE LN, LOT ON LY IN NEW SECTION	OA!
	<u> </u>
	• • • • • • • • • • • • • • • • • • •
rmits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plan	A TEST

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**

- 1 word Crossor



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 C	onstruct
F THE INFORMATION IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROPERMIT OR AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or with depending upon documentation submitted. (Complete site plan = 60 months; Complete plat = without expiration) 910-893-7525 option 1 CONFIRMATION #	OVEMENT out expiration
☐ Environmental Health New Septic SystemCode 800	
All property irons must be made visible. Place "pink property flags" on each corner iron of lot. lines must be clearly flagged approximately every 50 feet between corners.	All property
 Place "orange house corner flags" at each corner of the proposed structure. Also flag driveways, gallout buildings, swimming pools, etc. Place flags per site plan developed at/for Central Permitting. 	ages, decks,
 Place orange Environmental Health card in location that is easily viewed from road to assist in location If property is thickly wooded, Environmental Health requires that you clean out the <u>undergrowth</u> to 	g property.
evaluation to be performed. Inspectors should be able to walk freely around site. Do not grade prop	erty.
 All lots to be addressed within 10 business days after confirmation. \$25.00 return trip fee may for failure to uncover outlet lid, mark house corners and property lines, etc. once lot confirme 	<u>pe incurreu</u>
 After preparing proposed site call the voice permitting system at 910-893-7525 option 1 to schedule a 800 (after selecting notification permit if multiple permits exist) for Environmental Health inspection. 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. 	Please note
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 possible) and then put lid back in place. (Unless inspection is for a septic tank in a mobile home particle.) DO NOT LEAVE LIDS OFF OF SEPTIC TANK 	straight up (if
 After uncovering outlet end call the voice permitting system at 910-893-7525 option 1 & select notifing if multiple permits, then use code 800 for Environmental Health inspection. Please note confirmation of end of recording for proof of request. Use Click2Gov or IVR to hear results. Once approved, proceed to Central Permitting for remaining permitting for permitting for permitting for permitting for remaining permitting for p	ation number
SEPTIC	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
If applying for authorization to construct please indicate desired system type(s): can be ranked in order of preference, must ch	oose one.
[_] Accepted {} Innovative {} Conventional {} Any	
Alternative Altern	
The applicant shall notify the local health department upon submittal of this application if any of the following apply to question. If the answer is "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:	the property in
YES (NO Does the site contain any Jurisdictional Wetlands?	

If applying	for authorization	on to construct please indicate desired system type(s). Can be ranked in order of preference, must choose one.				
{ <u></u> } Acce	pted	{} Innovative {} Conventional {} Any				
{}} Alter	mative	[_] Innovative {] Conventional {] Any [X] Other Conventional				
The applica question. I	nt shall notify f the answer is	the local health department upon submittal of this application if any of the following apply to the property "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:				
{}}YES	{ <u>∞</u> } NO	Does the site contain any Jurisdictional Wetlands?				
{}}YES	{ <u>≮</u> } NO	Do you plan to have an <u>irrigation system</u> now or in the future?				
{}}YES	{ ⋉ } NO	Does or will the building contain any drains? Please explain.				
(}}YES	{ <u>K</u> } NO	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?				
{}}YES	(<u>¥</u> } NO	Is any wastewater going to be generated on the site other than domestic sewage?				
{}}YES	{ <u>₩</u> } NO	Is the site subject to approval by any other Public Agency?				
{}}YES	{ <u>&</u> } №	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.				
1		A LO AM TO A COLUMN A COLUMN A LA L				

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 A	Lccessi	ble So <u>Tl</u>	iat A <u>C</u> emple	ete Site Evaluat	ion Can I	Se Performed.		
B	1/		7	PRED	7 10	YMALAINE	4) b	2R E S
	/		/	1. 020L	1 /2	110101111111111111111111111111111111111	<u>, , , , , , , , , , , , , , , , , , , </u>	
			CODOUN		DEDDE	CENTER A TRUTALITY CITY	NEA THÝ SEN	e (DEALIDED)

02/04/15

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 247081

Filed on: 02/04/2015 Initially filed by: duckburg1@gmail.com

Designated Lien Agent

Project Property

Investors Title Insurance Company

Online: www.licnsnc.com

Address: 19 W. Hargett St., Suite 507 / Raleigh, NC 🔒 (Harnett County

27601

Phone: 888-690-7384

Fax: 913-489-5231

Property Type

Lillington, NC 27546

1-2 Family Dwelling

1-2

02/28/2015

555 Prairie Ln

Date of First Furnishing

South Scan Inc 3128 Gold Dust Ln

Owner Information

Willow Spring, NC 27592

United States

Email: Duckburg)@gmail.com

1 Phone: 919-669-4273

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

Application#

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

Owners Name SOUTH- SCAN, INC	Date 03/20/15
Site Address 555 PRAIRIE LN, LILLINGTO	N, NC 27546 Phone 919 669427
Directions to job site from Lillington 27W, Lt. 0	N DOC'S RD., Rt. ON PRIRIELA
TO NEW SECTION. HOUSE ON LE	PT:
	· · · · · · · · · · · · · · · · · · ·
Subdivision TROTTERS BLUFF AT FOX RUN	Lot 47
Description of Proposed Work NEW S.F. RESIDENT	
Heated SF 1940 United SF 572 Finished Bonus I	Room? Y Crawl Space Slab STEM
SOUTH- SCAN INC.	formation 919 669 4273
Building Contractor's Company Name	Telephone
3178 GOLD DUST IN WILLOW SPRING N	CZ759Z DUCKBURGI @ GMIL.CO
Address 36169	Email Address
License #	A Company of the Comp
Description of Work NEW (F. CONST. Serv	Tormation
/ R.A. JACKSON ELECTRIC, INC.	919 8945367
Electrical Contractor's Company Name 9261 RALEIGH RD. BENSON NC 2	
Address 2/144	Email Address
License # Mechanical/HVAC Contract	स्तरक तमा १६० कुन्य अर्थक्त । or Information
Description of Work NEW RES. CONST	and the second of the second o
, JONES + JONES HEATING + AIR INC	910 424 7702
Mechanical Contractor's Company Name	Telephone
5217 MARRACCO DR. HOPE MILLS NC	28348
Address 117 + 201 11/14	Email Address
2984-HZ +3C1-71674	
License # Plumbing Contractor In	formation
Description of Work NEW RES. CONST.	7
L.R. GLOVER PLUMBING CO. INC	919 820 00 26
Plumbing Contractor's Company Name P.O. BOX 764 BENSON, NC 27504	Telephone
Address	Email Address
07958	
License #	•
Insulation Contractor In	(919) 77Z 9000
Insulation Contractor's Company Name & Address	Telephone
P.O. BOX 2741, SANFORD, NC 27336	

WHALLES ALL AND A STATE OF THE Thereby 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 Affidavit for Worker's Compensation N C G S 87-14 The undersigned applicant being the Cofficer/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 K 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 SOUTH SCAN, INC Company or Name

Sign w/Title