Initial Application Da	te: 7	,	13.	15
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Application # 1550035523
CU#

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Central Permitting

on same lot

Residential Land Use Application

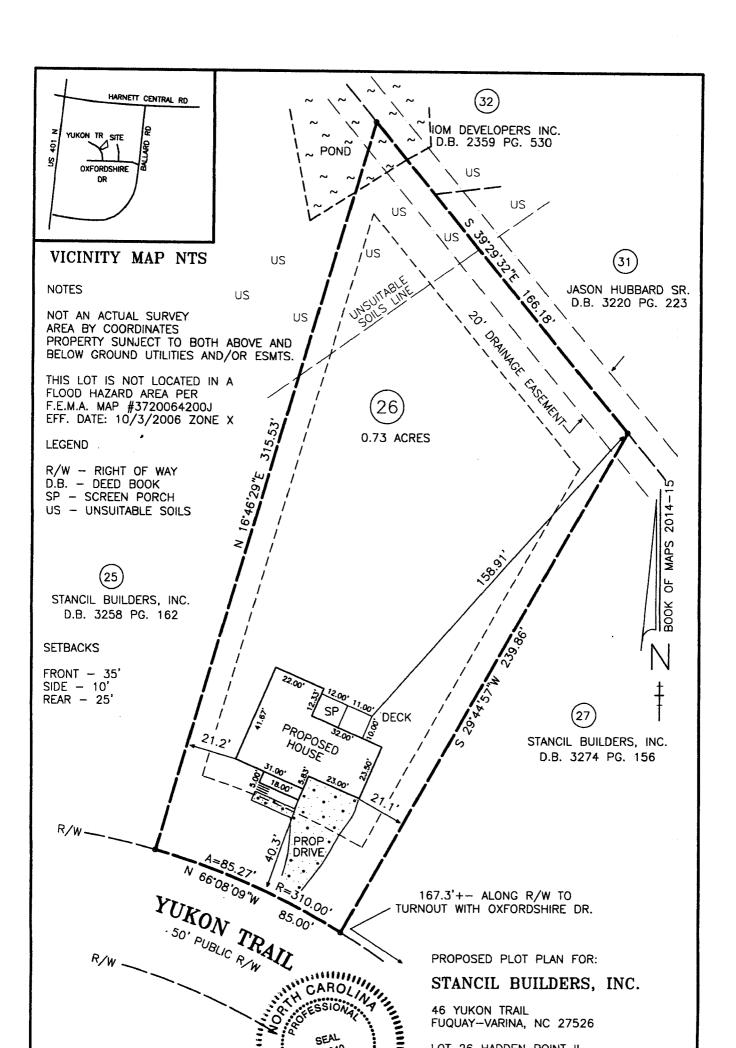
108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits

"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION" LANDOWNER: Stancil Builders Inc. ____ Mailing Address: 466 Stancil Road City: Angier State: NC Zip: 27501 Contact No: 919-639-2073 Email: bgoldston@embarqmail.com APPLICANT*: Stancil Builders Inc. _____ Mailing Address:_466 Stancil Road State: NC Zip: 27501 Contact No: 919-639-2073 Email: bgoldston@embarqmail.com City: Angier CONTACT NAME APPLYING IN OFFICE: Richard Denning PROPERTY LOCATION: Subdivision: Hadden Pointe Ph II Parcel: 08-0652-0024-39 *New structures with Progress Energy as service provider need to supply premise number _____ PROPOSED USE: SFD: (Size 46.8 x 45) # Bedrooms: 3 # Baths: 2 Basement(w/wo bath): V Garage: V Deck: V Crawl Space: Slab: Slab: 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 (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: Manufactured Homes: Other (specify): Required Residential Property Line Setbacks: Actual 40 Minimum 35 Front Rear Closest Side Sidestreet/corner lot **Nearest Building**

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:	Take 401 N towards Fuquay Varina, Take Right on Ballard Road, S/D
down on Left.	
Thereby state that foregoing statements are accurate and correct four	f the State of North Carolina regulating such work and the specifications of plans submitted. the best of my knowledge. Permit subject to revocation if false information is provided.
Signature of Owner or Owner's Ag	ent 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



NAME: Stancil Builders 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. If applying for authorization to construct please indicate desired system type(s): can be ranked in order of preference, must choose one. (Conventional Accepted [__] Innovative 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 |<u>~</u>| NO Does the site contain any Jurisdictional Wetlands? {__}}YES (∠) NO Do you plan to have an irrigation system now or in the future? {__}}YES I № NO Does or will the building contain any drains? Please explain. (___)YES Are there any existing wells, springs, waterlines or Wastewater Systems on this property? { NO {__}}YES Is any wastewater going to be generated on the site other than domestic sewage? {__}}YES Is the site subject to approval by any other Public Agency? _\YES 12 NO Are there any Easements or Right of Ways on this property? {_}}YES { <u>▶</u>} NO Does the site contain any existing water, cable, phone or underground electric lines?

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

If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service.

The Site Accessible So That A Complete Site Evaluation Can Be Performed.

PROPÉRTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

1-12-15 DATE Each section below to be filled out by whomever performing work Must be owner or licensed contractor. Address company name & phone must match.

Harnett County Central Permitting PO Box 65 Lillington NC 27546 910 893 7525 Fax 910 893 2793 www harnett org/permits

Application for Residential Building and Trades Permit

Owners Name Stancil Builders Inc.	Date
Site Address 46 Yu Kon Trail Fuguay Varina NC 27526	Phone 9/9-439-2013
Directions to job site from Lillington Take 401 N Towards Fugu	ev Uhrina, Tuen Right
on Ballard Rd., S/D down on Left.	,
Subdivision Hadden Pointe PhII	Lot <u>26</u>
Description of Proposed Work SFD	# of Bedrooms
	Crawl Space 😕 Slab
General Contractor Information	
Stancil Builders Inc.	919-639-2013
Building Contractor's Company Name	Telephone
	baoldston embarg mail.com
Address	Email Address
34533	
License # Electrical Contractor Information	
Description of Work SFD Service Size	200_Amps T-Pole XYesNo
SNO Electric	919-431-6952
missing continuous a company manne	Telephone
19655 NC 210 Hwy Angier NC 27501	E Add
, , , , , , , , , , , , , , , , , , , ,	Email Address
13075-C License #	
Mechanical/HVAC Contractor Informa	ition
Description of Work SFD	
. 1	919-329-0686
Stephenson Heating: Air. Inc. Mechanical Contractor's Company Name	Telephone
343 Shipwash Dr. Garner NC 27529	
Address	Email Address
18644	
License #	
Plumbing Contractor Information	#Baths 2
	919-422-2133
Plumbing Contractor's Company Name	Telephone
239 Millwood come Arajer NC 27501	Talophono
Address	Email Address
P11135	
License #	,
Insulation Contractor Information	919-661-0999
Tatum Insulation I Irc 519 Old Drug Store Rd. Insulation Contractor's Company Name & Address Garner NC	Telephone
27529	

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 Hamett 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
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 Stancil Builders Inc.

1.7

Sign w/Title

Date 2-11-15

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 250513

Filed on: 02/11/2015

Initially filed by: StancilBuildersInc

Designated Lien Agent

Fidelity National Title Company, LLC

Online: www.liensnc.com date (a real benefit cont)

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

NC 27601

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

Email: support@liensnc.com antibe support@liensus com

Owner Information

Stancil Builders Inc 466 Stancil Road Angier, NC 27501 United States

Email: bgoldston@embarqmail.com

Phone: 919-639-2073

Project Property

Lot 26 Hadden Pointe Ph II Book of Maps 2014 Page 15 Deed Book 3263 Page 320 46 Yukon Trail Fuquay Varina, NC 27526 Harnett County

Property Type

1-2 Family Dwelling

Date of First Furnishing

03/11/2015

View Comments (0)

Technical Support Hotline: (888) 690-7384

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.

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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 Number . . . . . 15-50035523
                                           Date 3/17/15
   Application type description CP NEW RESIDENTIAL (SFD)
   Subdivision Name . . . . . HADDEN POINTE II 18LOTS
   Property Zoning . . . . . . RES/AGRI DIST - RA-20M
                               Contractor
   Owner
                               _____
   STANCIL BUILDERS & FREDDIE
                               OWNER
   STANCIL
   466 STANCIL ROAD
                  NC 27501
   ANGIER
   Structure Information 000 000 46.8X45 3 BR ATT GARAGE DECK CRAWL BSMT
   Flood Zone . . . . . . . FLOOD ZONE X
   Other struct info . . . . # BEDROOMS
                                                 3.00
                        PROPOSED USE
                                            SFD
                                            NEW
                        SEPTIC - EXISTING?
                                            COUNTY
                        WATER SUPPLY
______
   Permit . . . . BLDG, MECH, ELEC, PLB, INSU PERMIT
   Additional desc . .
   Phone Access Code . 1074061
  Issue Date . . . . 3/17/15 
Expiration Date . . 3/16/16
                             Valuation . . . .
-
   Special Notes and Comments
    T/S: 02/13/2015 03:59 PM DJOHNSON --
    HADDEN POINTE PHS 2 LOT 26
    46 YUKON TRL
```

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 2 Date 3/17/15

Permit BLDG, MECH, ELEC, PLB, INSU PERMIT

Additional desc . .

Phone Access Code . 1074061 ______

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
10 20	101 103	B101 B103	R*BLDG FOOTING / TEMP SVC POLE R*BLDG FOUND & TEMP SVC POLE		_/_/_
20-30 30-999	814 105	A814 B105	ADDRESS CONFIRMATION R*OPEN FLOOR		_/,_/_
40-50	129	I129	R*INSULATION INSPECTION		
40-60 40-60	425 125	R425 R125	FOUR TRADE ROUGH IN ONE TRADE ROUGH IN		-/-/-
40-60	325	R325	THREE TRADE ROUGH IN		
40-60 50-60	225 429	R225 R429	TWO TRADE ROUGH IN FOUR TRADE FINAL		-/-/
50-60	131	R131	ONE TRADE FINAL		
50-60 50-60	329 229	R329 R229	THREE TRADE FINAL TWO TRADE FINAL		-//-
999	223	H824	ENVIR. OPERATIONS PERMIT		

	· 1—	Date	21010	
Plan Box #	HT	Job Name	Shunce	•.
App # <u>15500</u>	35523	Valuation 4/// 847	Heated SQ Feet <u>パ80</u> Garage <u> ち</u> 41	• •
Inspections for	SFD/SFA		= 1721	•
Crawl	Slab	Mono	Basement	
Footing Foundation Address Open Floor Rough In Insulation Final	Footing Foundation Address Slab Rough In Insulation Final	Plum Under Slab Ele. Under Slab Address Mono Slab Rough In Insulation Final	Footing Foundation Waterproofing Plum Under slab Address Slab Open Floor Rough In Insulation Final	
Foundation Surv	ey	Envir. Health 1 101	Other	
				•
Additions / Othe Footing Foundation	<u>r</u>			
Slab Mono Open Floor Rough In nsulation				