

Initial Application Date: 5-20-15

Application # 1550030198

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.harnett.org/permits

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

LANDOWNER: Rowland + Cheryl Reinert Mailing Address: 221 Rexford Lane  
City: Cary State: NC Zip: 27518 Contact No: 919-999-6495 Email: \_\_\_\_\_

APPLICANT\*: CR Construction Mailing Address: 421 Holly Oak Ct.  
City: Fuquay Varina State: NC Zip: 27526 Contact No: 919-422-8357 Email: charles@reinertconstruction.com  
\*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Charles Reinert Phone # 919-422-8357

PROPERTY LOCATION: Subdivision: Wyndham Place Lot #: 6 Lot Size: 1.68 AC.  
State Road # 110 State Road Name: Graham Ridge Lane Map Book & Page: 2006 | 1094  
Parcel: 04.0664.0038.37 PIN: 0664.99.6102  
Zoning: R20 Flood Zone: X Watershed: IV Deed Book & Page 3303, 1009 Power Company\*: Progress Electric

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

**PROPOSED USE:**

SFD: (Size 58 x 55) # Bedrooms: 3 # Baths: 2 Basement(w/wo bath): \_\_\_\_\_ Garage:  Deck:  Crawl Space:  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 \_\_\_\_\_ 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 ( ) 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:**

Front	Minimum	<u>35'</u>	Actual	<u>63'</u>
Rear		<u>25'</u>		<u>89'</u>
Closest Side		<u>10'</u>		<u>12'</u>
Sidestreet/corner lot		<u>20'</u>		<u>—</u>
Nearest Building on same lot		<u>10'</u>		<u>—</u>


Comments: \_\_\_\_\_

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: \_\_\_\_\_

Wyndham Place

Lot 4

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

5/20/15

Date

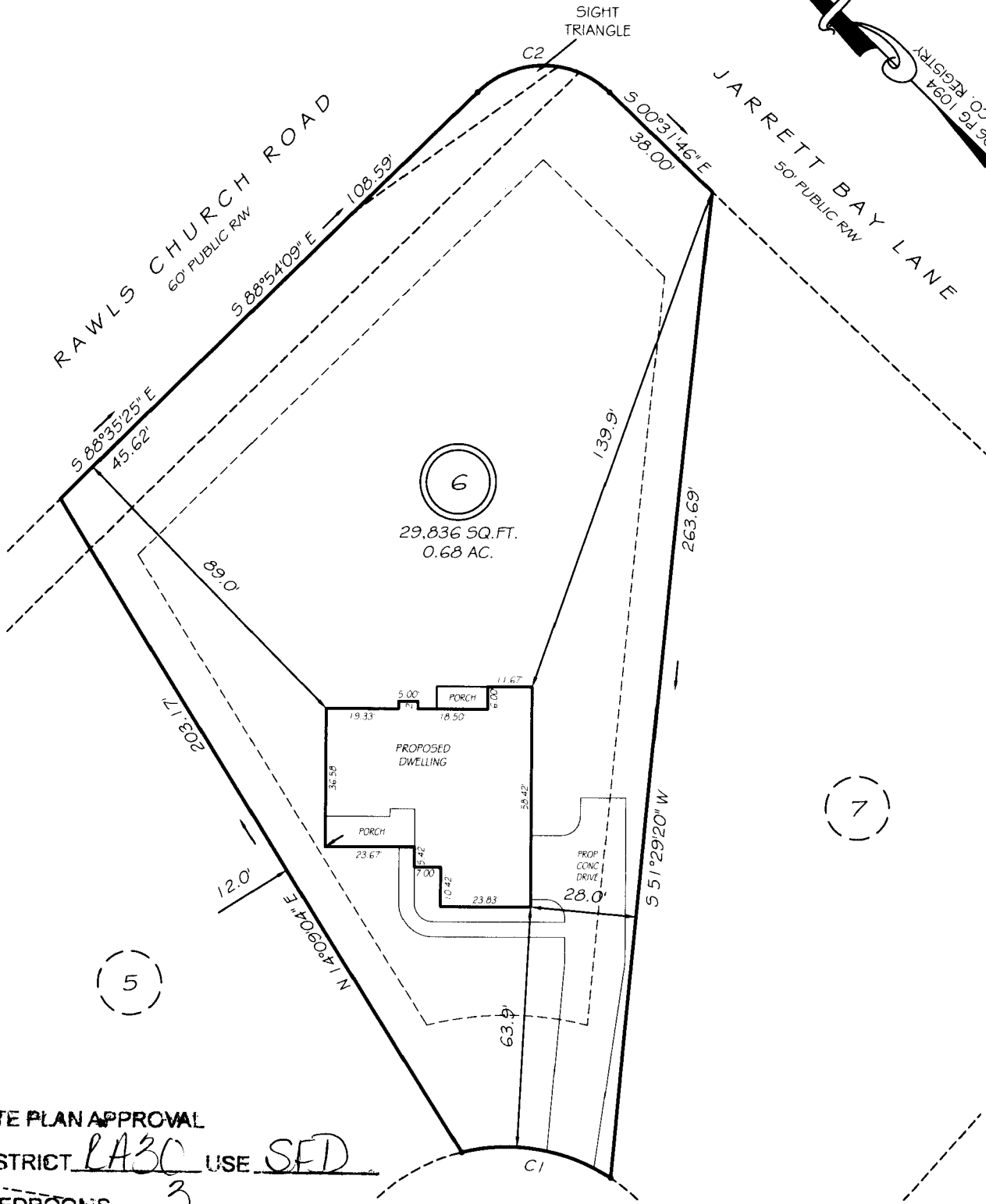
**\*\*\*It is the owner/applicants responsibility to provide the county with any applicable information about the subject property, including but not limited to: boundary information, house location, underground or overhead easements, etc. The county or its employees are not responsible for any incorrect or missing information that is contained within these applications.\*\*\***

**\*\*This application expires 6 months from the initial date if permits have not been issued\*\***

I, MICHAEL P. GRIFFIN, certify that under my direction and supervision this map was drawn from an actual field survey; that the error of closure of the survey as calculated by coordinates is 1:10,000+; that the area shown hereon was calculated by coordinates.

Witness my hand and seal this day of MONTH 2015.

BK 2006 PG 1094  
HARNETT CO. REGISTRY



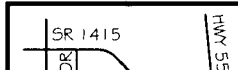
SITE PLAN APPROVAL  
DISTRICT LA30 USE SFD  
#BEDROOMS 3  
5.20.15  
ZONING ADMINISTRATOR

SETBACKS

FRONT	35'
REAR	25'
SIDE	10'
CORNER SIDE	20'

C1 R=50.00' L=41.15' N34°01'41" W 40.00'  
C2 R=25.00' L=38.56' S44°42'57" E 34.85'

LEGEND



NAME: Charles Reivent

APPLICATION #: 1550036198

**\*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 \_\_\_\_\_

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.**

  
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

5-20-15.  
DATE

09/09/11

Application #

1550036198

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 Rowland + Cheryl Reimer Date 9-20-15  
Site Address 110 Graham ridge Lane Phone 919-999-6495  
Directions to job site from Lillington 401 To Rauls Church Rd RHT TO Wyndham Place RHT TO Grahamridge Rd. LHT To End of culdesac  
Subdivision Wyndham Place Lot 6  
Description of Proposed Work single Family Home # of Bedrooms 3  
Heated SF 1710 Unheated SF 849 Finished Bonus Room? no Crawl Space  Slab

**General Contractor Information**

CDA Construction 919-422-8357  
Building Contractor's Company Name Telephone  
421 Holly Oak Ct Fuquay Varina NC Charles@reimerconstruction.com  
Address 27526 Email Address  
70546  
License #

**Electrical Contractor Information**

Description of Work wire new house Service Size 200 Amps T-Pole  Yes  No  
Swartz Electric 919-957-2350  
Electrical Contractor's Company Name Telephone  
118 Ann Drive Richboro Pa 18954  
Address Email Address  
21096  
License #

**Mechanical/HVAC Contractor Information**

Description of Work HVAC new home  
Louis Heating + cooling 919-839-1722  
Mechanical Contractor's Company Name Telephone  
5813 Lease Lane Raleigh NC 27617  
Address Email Address  
8779  
License #

**Plumbing Contractor Information**

Description of Work Plumb new Home # Baths 2  
All Max Plumbing 919-678-0111  
Plumbing Contractor's Company Name Telephone  
2428 Reliance Ave Apex NC 27539  
Address Email Address  
29022  
License #


**Insulation Contractor Information**

Insulation Services Pobox 46226 Raleigh NC 27620 919-478  
Insulation Contractor's Company Name & Address 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

 CDR CONSTRUCTION  
Signature of Owner/Contractor/Officer(s) of Corporation

5-20-15  
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

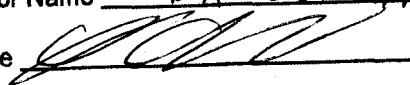
Has one (1) or more subcontractors(s) and has obtained workers compensation insurance to cover them

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 CDR CONSTRUCTION Charles D. Reinert

Sign w/Title  owner Date 5-20-15

B3303 - P969

For Registration Kimberly S. Hargrove  
Register of Deeds  
Harnett County, NC

Electronically Recorded  
2015 May 06 11:22 AM NC Rev Stamp \$ 62.00  
Book: 3303 Page: 969 Fee: \$ 26.00  
Instrument Number: 2015006070

HARNETT COUNTY, NC  
GIS DEED STAMP FORM

PARCEL ID:

040884-0038-97

Brief Property Description:

Lot 6, Wyndham Place Subdivision, Phase II

Book of Maps 2008, Page 1094

BY: Michele Temple

GIS/Land Records Staff Signature

Date: 5/6/2015

This document is to be attached to the face of the conveying instrument.



HARNETT COUNTY, NC  
GIS DEED STAMP FORM

PARCEL ID:

040664-0038-37

Brief Property Description:

Lot 6, Wyndham Place Subdivision, Phase II

Book of Maps 2008, Page 1094

BY: Michele Temple

GIS/Land Records Staff Signature

Date: 5/6/2015

This document is to be attached to the face of the conveying instrument.





**NORTH CAROLINA GENERAL WARRANTY DEED**

Excise Tax: \$ 62.00

Parcel Identifier No. 040664-0038-37 Verified by \_\_\_\_\_ County on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_  
By: \_\_\_\_\_

Mail/Box to: Grantee

This instrument was prepared by: Wayne A. Roper, Attorney at Law, P.A.

Brief description for the Index: LOT 6, Wyndham Place Subdivision, Phase II

THIS DEED made this 6th day of May, 2015 by and between

GRANTOR

Donald R. Andrews, widower  
235 Summerwinds Dr  
Cary, NC 27511

GRANTEE

Rowland Reinert and wife,  
Cheryl Reinert  
2211 Rexford Lane  
Cary, NC 27518

Enter in appropriate block for each Grantor and Grantee: name, mailing address, and, if appropriate, character of entity, e.g. corporation or partnership.

The designation Grantor and Grantee as used herein shall include said parties, their heirs, successors, and assigns, and shall include singular, plural, masculine, feminine or neuter as required by context.

WITNESSETH, that the Grantor, for a valuable consideration paid by the Grantee, the receipt of which is hereby acknowledged, has and by these presents does grant, bargain, sell and convey unto the Grantee in fee simple, all that certain lot or parcel of land situated in the City of Fuquay Varina, Black River Township, Harnett County, North Carolina and more particularly described as follows:

BEING all of Lot 6 in Wyndham Place Subdivision, Phase II as shown on plat recorded in Book of Maps 2006, Page 1094, Harnett County Registry.

The property hereinabove described was acquired by Grantor by instrument recorded in Book \_\_\_\_\_ page \_\_\_\_\_.

All or a portion of the property herein conveyed \_\_\_ includes or X does not include the primary residence of a Grantor.

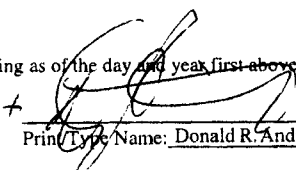
A map showing the above described property is recorded in Plat Book 2006 page 1094.

TO HAVE AND TO HOLD the aforesaid lot or parcel of land and all privileges and appurtenances thereto belonging to the Grantee in fee simple.

And the Grantor covenants with the Grantee, that Grantor is seized of the premises in fee simple, has the right to convey the same in fee simple, that title is marketable and free and clear of all encumbrances, and that Grantor will warrant and defend the title against the lawful claims of all persons whomsoever, other than the following exceptions: Restrictive covenants recorded in Book 1851, Page 945, and Book 1860, Page 001, and Book 1999, Page 961, Harnett County Registry.

Easements and Restrictions of record.

IN WITNESS WHEREOF, the Grantor has duly executed the foregoing as of the day and year first above written.

\_\_\_\_\_  
 (Entity Name) +  (SEAL)  
 By: \_\_\_\_\_  
 Print/Type Name & Title: \_\_\_\_\_  
 Print/Type Name: \_\_\_\_\_  
 By: \_\_\_\_\_  
 Print/Type Name & Title: \_\_\_\_\_  
 Print/Type Name: \_\_\_\_\_  
 By: \_\_\_\_\_  
 Print/Type Name & Title: \_\_\_\_\_  
 Print/Type Name: \_\_\_\_\_

State of NC - County or City of Wayne  
 I, the undersigned Notary Public of the County or City of Wayne and State aforesaid, certify that Donald R. Andrews, widower personally appeared before me this day and acknowledged the due execution of the foregoing instrument for the purposes therein expressed. Witness my hand and Notarial stamp or seal this 6th day of May, 2015.

My Commission Expires: 6-8-2019  
 (Affix Seal)  Wayne Arthur Rober Notary Public  
 Notary's Printed or Typed Name

State of \_\_\_\_\_ - County or City of \_\_\_\_\_  
 I, the undersigned Notary Public of the County or City of \_\_\_\_\_ and State aforesaid, certify that \_\_\_\_\_  
 \_\_\_\_\_ of \_\_\_\_\_, a North Carolina or \_\_\_\_\_  
 corporation/limited liability company/general partnership/limited partnership (strike through the inapplicable), and that by authority  
 duly given and as the act of such entity, he signed the foregoing instrument in its name on its behalf as its act and deed. Witness  
 my hand and Notarial stamp or seal, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

My Commission Expires: \_\_\_\_\_  
 (Affix Seal) \_\_\_\_\_  
 Notary's Printed or Typed Name

State of \_\_\_\_\_ - County or City of \_\_\_\_\_  
 I, the undersigned Notary Public of the County or City of \_\_\_\_\_ and State aforesaid, certify that \_\_\_\_\_  
 Witness my hand and Notarial stamp or seal, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

My Commission Expires: \_\_\_\_\_  
 (Affix Seal) \_\_\_\_\_  
 Notary's Printed or Typed Name