	F-27-1	-
nitial Application Date:_	5 01-1)

Application # _	5500	362	55
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COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Central Permitting

Nearest Building 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: Kandy Anderson Mailing Address: 98 Curtis Dr. State: NC Zip: 28339 Contact No: 910-897-4522 Email: APPLICANT*: Char Anderson Mailing Address: 31 White toil Porth State: NC Zip: 28339 Contact No: 910-810-6870 Email: Stand Sure Homes & Grail CONTACT NAME APPLYING IN OFFICE: PROPERTY LOCATION: Subdivision: 54 Oak Valley formed Lot #: B Lot Size: 1.09 State Road Name: Dak Valley Form Rd 03 PIN: 1509-Zoning: Rayo Flood Zone: X Watershed: Deed Book & Page 30 82 169 Power Company*: *New structures with Progress Energy as service provider need to supply premise number ___ from Progress Energy. PROPOSED USE: SFD: (Size 26° x 40) # Bedrooms: 3 # Baths 3 Basement(w/wo bath):___ Garage: 1 Deck:__ Crawl Space: 1 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 Manufactured Homes:_____ Other (specify):___ Structures (existing or proposed): Single family dwellings: Required Residential Property Line Setbacks: Comments: Front Rear Closest Side Sidestreet/corner lot

SPECIFIC DIRECTION	ONS TO THE PROPE	RTY FROM LILLINGTON	-Take	Red Hill	Chroh	Rd. Cet	77 GB
- D1 C	are will	ed Lots	2 miles	05 6	ight.		
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							- 5)
<u> </u>							
If permits are granted I hereby state that fo	d I agree to conform to pregoing statements are	o all ordinances and laws of accurate and correct to	of the State of North the best of my know	Carolina regulating ledge. Permit subj	g such work and the ect to revocation if f	specifications of plan alse information is pro	s submitted
	Chad a	of Owner or Owner's A		5	-27-15		
	Signature	e of Owner or Owner's A	gent		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**

S 03° 03' 28" W 82.70 FIP By STAR LUN Monament SKB Subdivision Agministrator 25' Minimum Rear Setback Line Deed Book 1505, Page 183 Minimum Side Setbook Line William T. Tart, Sr. Minimum Side Setbock Line 10' Minimum Side Settock Line Pate 1.09 Acres By Deduction Parcel "B" 249.25 ò 76.10 Proposed Dwelling . ဝ ° 88 23. 00 Z .9 S 겅 CP Concrete Man Proposed Drive 3/8" SRB (F) 26.10 91 31291 M/H 333.256 | | FIP by Power Pole 3 "Oak Valley Farm Road" .09 B/W C M/H SITE PLAN APPROVAL DISTRICT RAYO USESFO #BEDROOMS

Zening Administrator

ument

are horizontal serwise noted.

HAL OWEN & ASSOCIATES, INC.

SOIL & ENVIRONMENTAL SCIENTISTS

P.O. Box 400, Lillington NC 27546-0400 Phone (910) 893-8743 / Fax (910) 893-3594 www.halowensoil.com

29 October, 2014

Mrs. Lucia Turlington Turlington Real Estate Group lcturlington.treg@gmail.com

Reference: Preliminary Soil Investigation 54 Oak Valley Farm Road 1.09 Acres

Dear Mrs. Turlington,

A site investigation has been conducted for the above referenced property, located on the eastern side of Oak Valley Farm Road, in Harnett County, North Carolina. The purpose of this investigation was to determine the site's ability to support subsurface sewage waste disposal systems. All sewage disposal ratings and determinations were made in accordance with "Laws and Rules for Sewage Treatment and Disposal Systems, 15A NCAC 18A .1900". This report represents my professional opinion as a Licensed Soil Scientist but does not guarantee or represent permit approval for any lot by the local Health Department. An improvement permit for all residences will need to be obtained from the Health Department that specifies the proposed home size and location, and the design and location of the septic system to be installed. It is my understanding that public water is available and will be utilized.

This lot was observed to be underlain by soils that are rated as provisionally suitable soils for subsurface sewage waste disposal (see attached map). These provisionally suitable soils were observed to be firm clays to greater than 36 inches and will support long term acceptance rates of 0.3 gal/day/sqft. You should expect that approximately 133 feet of conventional drainline would be required for each bedroom in the proposed home. It appears that the soils on this lot are adequate to support a conventional septic system and repair area for a four or five bedroom residence.

I appreciate the opportunity to provide this service and trust that you will feel free to call on me again in the future. If you have any questions or need additional information, please contact me at your convenience.

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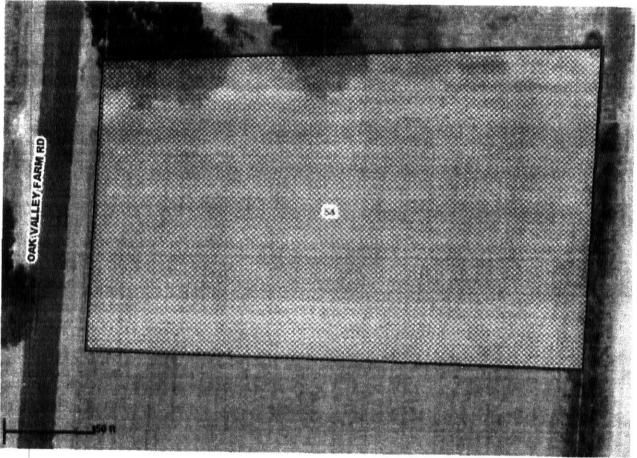
Sincerely.

Hal Owen

Licensed Soil Scientist

Preliminary Soil Investigation 54 Oak Valley Farm Road (1.09 Acres) 29 October 2014

Figure 1. Soil Suitability Map



Scale 1 in = 50 ft

Provisionally Suitable Soils

Provisionally Suitable Soils

NAME: Ch	ad Anderson		APPLICATION #:
	This application to be fill	led out when applying f	or a septic system inspection.
County F			Permit and/or Authorization to Construct
IF THE INFORM	MATION IN THIS APPLICATION IS FA	LSIFIED, CHANGED, OR	THE SITE IS ALTERED, THEN THE IMPROVEMENT
PERMIT OR AU	THORIZATION TO CONSTRUCT SHA	ALL BECOME INVALID.	The permit is valid for either 60 months or without expiration
depending upon	documentation submitted. (Complete site	plan = 60 months; Complet	te plat = without expiration)
910-8	93-7525 option 1		CONFIRMATION #
Environn	nental Health New Septic Systen	nCode 800	No. 1
All p	roperty irons must be made vis	ible. Place "pink prop	erty flags" on each corner iron of lot. All propert
lines	must be clearly flagged approxima	tely every 50 feet betw	reen corners.
 Place 	"orange house corner flags" at ea	ch corner of the propo	sed structure. Also flag driveways, garages, decks
out bi	uildings, swimming pools, etc. Plac	ce flags per site plan d	eveloped at/for Central Permitting.
 Place 	orange Environmental Health card	d in location that is eas	ily viewed from road to assist in locating property.
 If pro 	perty is thickly wooded, Environme	ental Health requires th	nat you clean out the undergrowth to allow the so
			freely around site. Do not grade property.
 All lo 	ts to be addressed within 10 bus	siness days after con	firmation. \$25.00 return trip fee may be incurre
for fa	ilure to uncover outlet lid, mark	house corners and p	roperty lines, etc. once lot confirmed ready.
 After 	preparing proposed site call the vo	ice permitting system	at 910-893-7525 option 1 to schedule and use cod
) for Environmental Health inspection. Please not
	mation number given at end of rec		
 Use 0 	lick2Gov or IVR to verify results.	Once approved, procee	ed to Central Permitting for permits.
	nental Health Existing Tank Insp		
 Follow 	v above instructions for placing flag	gs and card on property	y.
 Prepa 	re for inspection by removing soi	I over outlet end of ta	ank as diagram indicates, and lift lid straight up (
			s for a septic tank in a mobile home park)
	OT LEAVE LIDS OFF OF SEPTIC TAI		
			t 910-893-7525 option 1 & select notification perm
			ealth inspection. Please note confirmation number
	at end of recording for proof of rec		
	lick2Gov or IVR to hear results. O	nce approved, proceed	d to Central Permitting for remaining permits.
SEPTIC			
If applying for	authorization to construct please indicate	e desired system type(s): c	can be ranked in order of preference, must choose one.
{}} Accepted	d {} Innovative	{★} Conventional	{}} Any
{}} Alternati	ve {}} Other		
	hall notify the local health department answer is "yes", applicant MUST A T		pplication if any of the following apply to the property in GOCUMENTATION:
()VEC (NO Does the site contain any	Juriediational Watlands?	

{}} Acce	epted	{}} Innovative	{	{}} Any
{}} Alter	rnative	{}} Other		_
		the local health department s "yes", applicant MUST AT		olication if any of the following apply to the property in DOCUMENTATION :
{}}YES	{∠} NO	Does the site contain any J	urisdictional Wetlands?	
{}}YES	{ ∠ } NO	Do you plan to have an irri	gation system now or in the	ne future?
{}}YES	{ ∠ } NO	Does or will the building co	ontain any drains? Please	explain
{}}YES	{ <u></u> ★} NO	Are there any existing well	s, springs, waterlines or V	Vastewater Systems on this property?
{}}YES	{≯} NO	Is any wastewater going to	be generated on the site of	ther than domestic sewage?
{}}YES	{ ⊻ } NO	Is the site subject to approv	al by any other Public Ag	ency?
{}}YES	{ ★ } NO	Are there any Easements or	r Right of Ways on this pr	operty?
{\times}YES	{}} NO	Does the site contain any ex	xisting water, cable, phone	e 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	l This Applicat	tion And Certify That The Info	ormation Provided Herein	Is True, Complete And Correct. Authorized County And
State Officia	als Are Grante	d Right Of Entry To Conduct	Necessary Inspections To I	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

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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 Randy Anderson	Date 6-/5-/5
Site Address 54 Oak Valley Farm Rd Coats	vc 2734Phone 910-890-6810
Directions to job site from Lillington	h KO NIGHE LETT
onto came will lot will be about ?	niles on right
Subdivision	Lot
Description of Proposed Work build 3 ked 2 ball Home	# of Bedrooms
Heated SF /748 Unheated SF 837 Finished Bonus Room? 4 General Contractor Information	<u>rs</u> Crawl Space <u></u> ★ Slab 1
Stand Suce Custom Homes Tree. Building Contractor's Company Name	9/0 - 890 - 6870 Telephone
P.O. Box 1072 Coots NC 22521 Address	Standsur Hones @ 6mg/26m
70922 License #	
Description of Work electrical rough in 1 Tolor and Service Size	200_Amps T-PoleYesNo
Chris Sinclair Electrical C	910-892-0090
Electrical Contractor's Company Name	Telephone
1/9 Brightwood Circle Durn NC 28334	Email Address
27819	
License # Mechanical/HVAC Contractor Inform	mation
Description of Work HUAC Rough in & Trin ast	
Cape Fear Ac & Heating Co. Mechanical Contractor's Company Name	9/6 - 483 - 8790 Telephone
1/39 Robeson St. Fayetheville 28305	Telephone 10 G Cap for Av . con Email Address
30052	
License #	on
Plumbing Contractor Informati	# Baths 2
Description of Work Pleasing rough in & Trimost	919- 820- 2378
Mitche Plumbing Secure Plumbing Contractor's Company Name	Telephone
654 Red Hill Church Rd. Owner NC 28334 Address	Email Address
14438	
License # Insulation Contractor Informat	<u>ion</u>
Tatum Insulation II 579 010 Drug Store Insulation Contractor's Company Name & Address & 6. Comp. 2750	919-661-0999
Insulation Contractor's Company Name & Address & A. Conv. 2750	74 Telephone

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 Stand Sura Custom Homes Inc.	Date <u>9-8-/5</u>
Site Address	Phone
Directions to job site from Lillington	The state of the s
4-7-8-page	
Subdivision Greenbrian	Lot
Description of Proposed Work Build 3 ted 2 both home	# of Bedrooms
Heated SF 12/7 Unheated SF 286 Finished Bonus Room?	<u> </u>
General Contractor Informatio	
J Stand Sure Custom Homes Inc.	910 - 890 - 68 70 Telephone
Building Contractor's Company Name	•
P.O. Box 1072 Coats, N.C. 27521	Standsuchomes @ (smail a on Email Address
70922	
License #	na
Description of Work Rough in a trim at here Service Size	200 Amps T-Pole VYes No
- Mahry's Electrical Service Inc.	919-639-4837
Electrical Contractor & Company Name	Telephone
5 731 Maby Rd Angier, NL 27501	Email Address
Address	Ellian Address
/5077 U	
Mechanical/HVAC Contractor Inform	
Description of Work Rough in A Trim at twee (Hum	<u> </u>
Mechanical Contractor's Company Name	910 - 897 - 55 01 Telephone
724 Turlington Rd. Dum, NL 28334	Tolophono
Address Ro. Won, rec 23.4	Email Address
17164	
License # Plumbing Contractor Informati	on
Description of Work Rough in & Trim at Plumbig	# Baths 2
Mitches Plumbing Services	919-820-2378
Plumbing Contractor s Company Name	Telephone
654 Red Hill Church Rd Ours, N. 28374	Const Address
Address	Email Address
14438 Vicense #	
Insulation Contractor Informat	
Tatum Insulation 11 519 010 Drug Store Rd	919 - 427 - 5693 Telephone
Insulation Contractor's Company Name & Address	i elebilotie

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

Chad anders 6-15-15	
Signature of Owner/Contractor/Officer(s) of Corporation Date	99900000000000000000000000000000000000
Affidavit for Worker's Compensation N C G S 8 The undersigned applicant being the	7-14
General Contractor Owner Officer/Agent of the Contra	actor or Owner
Do hereby confirm under penalties of perjury that the person(s) firm(s) or corporation set forth in the permit	n(s) performing the work
Has three (3) or more employees and has obtained workers compensation in	surance to cover them
Has one (1) or more subcontractors(s) and has obtained workers compensation	ion insurance to cover
Has one (1) or more subcontractors(s) who has their own policy of workers covering themselves	ompensation insurance
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 Department issuing the permit may require certificates of coverage of worker's compto issuance of the permit and at any time during the permitted work from any person carrying out the work	ensation insurance prior
Company or Name Stand Sun Custom Hamer Inc.	

Sign w/Title Ched anders Assident Date 6-15-15

		Date	5-27-15	
Plan Box #_	D7	Job Na	me Anderson	
App # 3 G	5255 for SFD/SFA	Valuation 190.711	Heated SQ Feet_ Garage	
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	/eyEn	vir. Health	Other	
Additions / Other				••••
Footing Foundation				
Slab				
Mono				
Open Floor				
Rough In				
Insulation				
Final				

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. Date 6/19/15 Application type description CP NEW RESIDENTIAL (SFD) Subdivision Name Property Zoning RES/AGRI DIST - RA-40 Owner Contractor -----ANDERSON RANDY LEE & CONNIE M STAND SURE CUSTOM HOMES INC 98 CURTIS DR PO BOX 1072 ERWIN NC 28339 COATS NC 27521 (910) 890-6870 Applicant -----ANDERSON CHAD #B 31 WHITE TAIL PATH ERWIN NC 28339 (910) 890-6870 Structure Information 000 000 76.10X40 3BDR CRAWL W/ GARAGE Flood Zone FLOOD ZONE X Other struct info # BEDROOMS # BEDROOMS PROPOSED USE SEPTIC - EXISTING? 3000000.00 SFD NEW TANK WATER SUPPLY COUNTY Permit BLDG, MECH, ELEC, PLB, INSU PERMIT Additional desc . . Phone Access Code . 1090752
Issue Date . . . 6/19/15
Expiration Date . . 6/18/16 Valuation Special Notes and Comments T/S: 05/27/2015 02:08 PM JBROCK ----MANN RD OFF OF CANE MILL RD PERMIT INCLUDES BLDG, ELEC, MECH, PLUMB INSULATION AND LAND USE.

HARNETT COUNTY CENTRAL PERMITTING

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 6/19/15

Subdivision Name

Property Zoning RES/AGRI DIST - RA-40

Permit BLDG, MECH, ELEC, PLB, INSU PERMIT

Additional desc . .

Phone Access Code . 1090752

Required Inspections

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