

Initial Application Date: 8/04/2015

Application # 1550036810

CU# _____

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Central Permitting 208 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**

SCANNED

LANDOWNER: Comfort Homes, Inc. Fish Brothers, Inc. Mailing Address: ~~P O Box 369~~ 7440 Kennebec Rd

City: Clayton Willow Spring State: NC Zip: 27528 Contact No: 919 553 3242 Email: comfrthomes@aol.com

APPLICANT*: Comfort Homes, Inc. Mailing Address: P O Box 369

City: Clayton State: NC Zip: 27528 Contact No: 919 553 3242 Email: comfrthomes@aol.com

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Julian Stewart Phone # 919 422 1481

PROPERTY LOCATION: Subdivision: Stetson Lot #: 27 Lot Size: 51 acre

State Road # 1448 State Road Name: Rawls Church Road / 571 Moonlight Dr Map Book & Page: 2008, 193-200

Parcel: 040674 0046 27 PIN: 0664-89-6267.000

Zoning: RA-30 Flood Zone: - Watershed: IV Deed Book & Page: 2445, 752 Power Company*: Duke Progress Energy

*New structures with Progress Energy as service provider need to supply premise number 29314750 from Progress Energy.

PROPOSED USE:

SFD: (Size 52'10" x 35'4") # Bedrooms: 3 # Baths: 2 Basement(w/w bath): _____ Garage: Deck: Crawl Space: 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/w 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: proposed Manufactured Homes: _____ Other (specify): _____

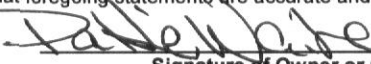
Required Residential Property Line Setbacks:

	Minimum	Actual
Front	35'	51'
Rear	25'	85'
Closest Side	10'	41'
Sidestreet/corner lot	n/a	
Nearest Building on same lot	n/a	

Comments: _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 401 N, right on Rawls Church Rd, left on Atkins road, subdivision on right

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

8/4/15
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****

NAME: Comfort Homes, Inc.

APPLICATION #: 36810

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 # 011359-LB-8-6-15

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? unknown
 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? - only @ street right of way
 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.

[Signature]
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

7-28-15
DATE

PLOT PLAN FOR COMFORT HOMES BLACK RIVER TOWNSHIP HARNETT COUNTY NORTH CAROLINA

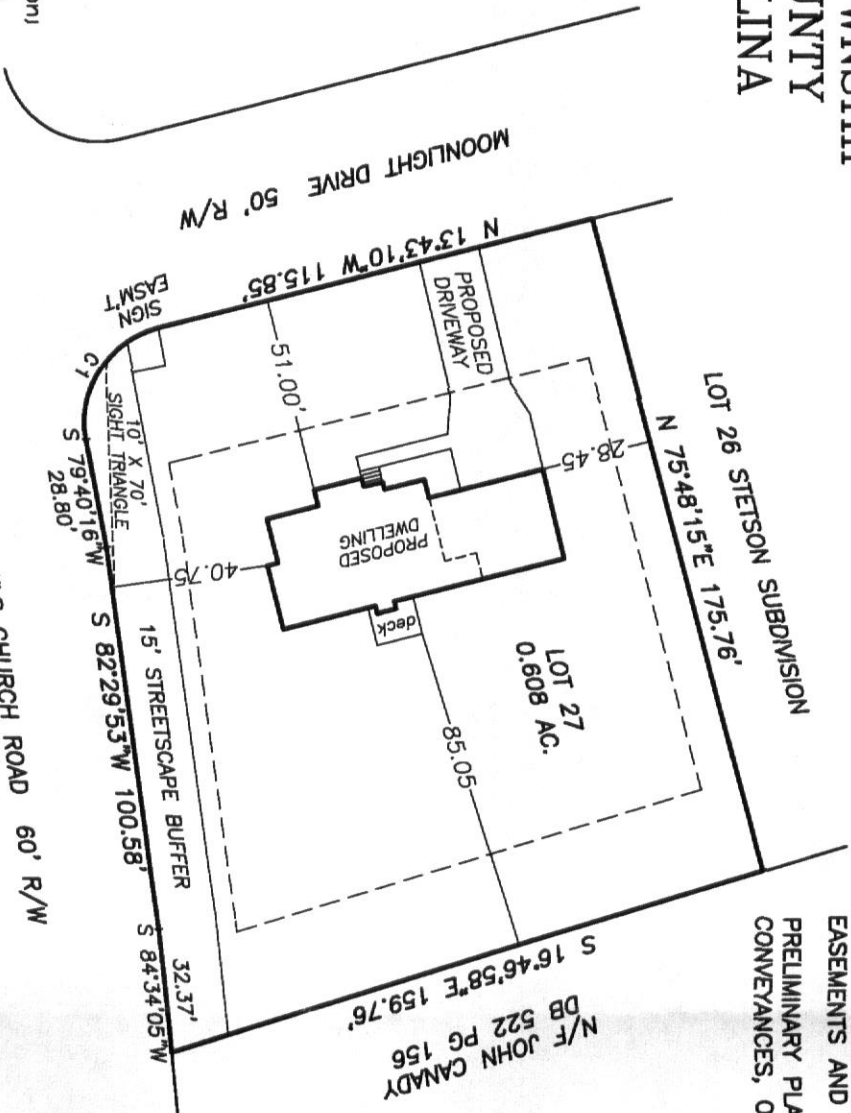
VICINITY MAP



Curve	Radius	Length	Chord	Chord Bear.
C1	25.00'	37.79'	34.29'	N 67°01'27" W

NOTE: THIS PROPERTY IS SUBJECT TO EASEMENTS AND RESTRICTIONS OF RECORD. PRELIMINARY PLAN - NOT FOR RECORDATION, CONVEYANCES, OR SALES.

DEED NORTH 1841 PG 532

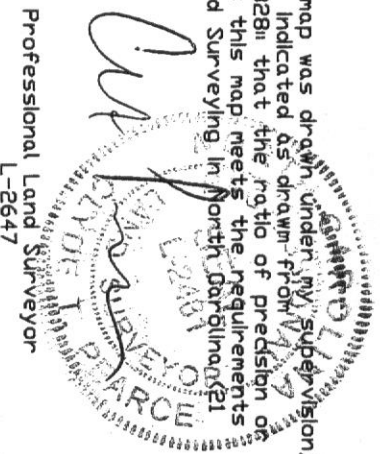


- NOTE: BEING LOT 27 OF STETSON SUBDIVISION, RECORDED IN MAP NUMBER 2008 PGS. 193-196 AND RE-RECORDED IN MAP NUMBER 2008 PGS. 199-200.
- NOTE: AREA COMPUTED BY COORDINATE METHOD.
- NOTE: NO NCGS CONTROL MONUMENT WITHIN 2000'.
- NOTE: LOTS TO BE SERVED BY HARNETT COUNTY WATER AND INDIVIDUAL SEPTIC SYSTEMS.
- IMPERVIOUS SURFACE COVERAGE
- 2060 SQ.FT. - HOUSE & GARAGE
- 117 SQ.FT. - WALK & STEPS
- 1071 SQ.FT. - DRIVEWAY
- 3248 TOTAL SQ.FT. - PROPOSED COVERAGE
- 9532 SQ.FT. - ALLOWABLE COVERAGE
- 6284 SQ.FT. - AVAILABLE COVERAGE

I, CLYDE T. PEARCE, certify that this map was drawn under my supervision that the boundaries not surveyed are indicated as drawn from maps. Information in Book of Maps 2005 Pg. 1828; that the ratio of precision of positional accuracy is 1:10,000, and that this map meets the requirements of The Standards of Practice for Land Surveying in North Carolina, NCAC 56.16003.

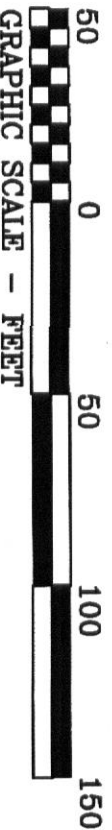
This 27TH day of JULY, 2015

Seal



Professional Land Surveyor
L-2647

NOTE: NOT AN ACTUAL FIELD SURVEY. INFORMATION TAKEN FROM BOOK OF MAPS 2005 PG. 1828.



PLAN "DENISE"

FILE: STETSON/PLOT PLANS
PLOT PLAN LOT 27
STETSON
SCALE: 1" = 50'
DATE: 07-27-2015

WILLIAMS - PEARCE and ASSOC., P.A.
PROFESSIONAL LAND SURVEYORS, P.A.

1000 N. ARENDELL AVE.
P.O. BOX 892, ZEBULON, N.C. 27597
PHONE: 919-269-9605 LIC. # C-0243



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 Comfort Homes Inc. Date 7-28-15
Site Address 571 Moonlight Drive, Fuquay Phone 919-553-3242
Directions to job site from Lillington 401 North, Right on Rawls Church Rd, left on Atkins Road, subdivision on right
Subdivision Stetson Lot 27
Description of Proposed Work Construction of Single Family Home # of Bedrooms 3
Heated SF 1556 Unheated SF 670 Finished Bonus Room? NO Crawl Space Slab

General Contractor Information

Comfort Homes Inc Telephone 919-553-3242
Building Contractor's Company Name
PO Box 309, Clayton NC 27528 Email Address comforthomes@aol.com
Address
33184
License #

Electrical Contractor Information

Description of Work Rough in + trim out Service Size 200 Amps T-Pole Yes No
Summerfield Electric Telephone 919-975-0599
Electrical Contractor's Company Name
705 Thanksgiving Vol. Fire Dep. Rd. Selma NC Email Address
Address
22825
License #

Mechanical/HVAC Contractor Information

Description of Work Rough in + trim out + other Ventilation
Stephenson Heating + Air Telephone 919-329-0686
Mechanical Contractor's Company Name
343 Shipwash Dr. Garner NC - 27529 Email Address
Address
18644
License #

Plumbing Contractor Information

Description of Work Rough in + Trimouts # Baths _____
Ambit Plumbing Telephone 919-934-1379
Plumbing Contractor's Company Name
755 Rock Pillar Rd. Clayton NC 27520 Email Address
Address
20823
License #

Insulation Contractor Information

Tatum Insulation - 519 old Drug Store Rd. Garner Telephone 919-661-0999
Insulation Contractor's Company Name & Address

*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

Rallie White
Signature of Owner/Contractor/Officer(s) of Corporation

7-28-15
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 Comfort Homes Inc

Sign w/Title Rallie White assist Secy Date 7-28-15

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 333851

Filed on: 08/04/2015

Initially filed by: ComfortHomes

Designated Lien Agent

WFG National Title Insurance Company

Online: www.liensnc.com (<http://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 (<mailto:support@liensnc.com>)

Project Property

Stetson Lot 27
571 MOONLIGHT DRIVE
FUQUAY-VARINA, NC 27526
Harnett County

Property Type

1-2 Family Dwelling

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.

Owner Information

Comfort Homes, Inc.
P O Box 369
Clayton, NC 27528
United States
Email: comfrthomes@aol.com
Phone: 919-553-3242

[View Comments \(0\)](#)

Technical Support Hotline: (888) 690-7384

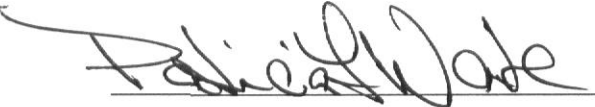
July 28, 2015

Comfort Homes, Inc. has an option to purchase Lots 1, 27, 28, and 53 in Stetson Subdivision, recorded in Map Book 2008, Pages 193-200, Harnett County Register of Deeds.


_____ (Seal)

I, Patricia F. Waite, do hereby certify that Julian R. Stewart, President of Comfort Homes, Inc., personally appeared before me this day and acknowledged the due execution of the foregoing instrument.

Witness my hand and Notarial Seal, this 28th day of July 2015.


_____ (Notary Public)

My commission expires 4/2/17.

