

Initial Application Date: 9.3.15

Application # 15-50037037

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: RUSSELL HART Mailing Address: 296 MOONLIGHT DR.
City: FUQUAY VARINA State: NC Zip: 27526 Contact No: 919-762-6556 Email: RHHOMES50@GMAIL.COM

APPLICANT: SAME Mailing Address: SAME
City: _____ State: _____ Zip: _____ Contact No: _____ Email: _____

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: _____ Phone # _____

PROPERTY LOCATION: Subdivision: MAGNOLIA CREST Lot #: 27 Lot Size: 29,071
State Road # 29 State Road Name: ALBAN ROW Map Book & Page: 2007/39
Parcel: 06-0655-0067-28 PIN: 0655-52-9389
Zoning: R30 Flood Zone: X Watershed: IV Deed Book & Page: 3271 1955 Power Company*: DUKE

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

PROPOSED USE:

SFD: (Size 66 x 38) # Bedrooms: 3 # Baths: 2 Basement(w/wo bath): _____ Garage: 1 Deck: 1 Crawl Space: 1 Slab: _____ Monolithic 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: 1 Manufactured Homes: _____ Other (specify): _____

Required Residential Property Line Setbacks:

Front Minimum 35 Actual 35.9
Rear 25 59
Closest Side 10 55'
Sidestreet/corner lot 20 34'
Nearest Building on same lot 10 6

Proposed
Comments: _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 401 (NORTH), RT ONTO RAWLS
CHURCH, LEFT ONTO RAWLS CLUB, RT ONTO ALBAN ROW

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.

Russell Ford
Signature of Owner or Owner's Agent

09-03-15
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

SURVEY FOR

HART HOMES

LOT 27, MAGNOLIA CREST SUBDIVISION, MAP # 2007-39

HECTOR'S CREEK TOWNSHIP HARNETT COUNTY NORTH CAROLINA

SCALE: 1: 40'

PIN # 0655-52-9389

CURVE TABLE				
CURVE	LENGTH	RADIUS	BEARING	CHORD DIST.
C- 4	204.70	178.91	N56°01'15"W	193.72
C- 5	46.67	25.00	N30°13'45"E	40.18

MAP # 2007-39



SITE PLAN APPROVAL

DISTRICT *RAPC* USE *SFD*

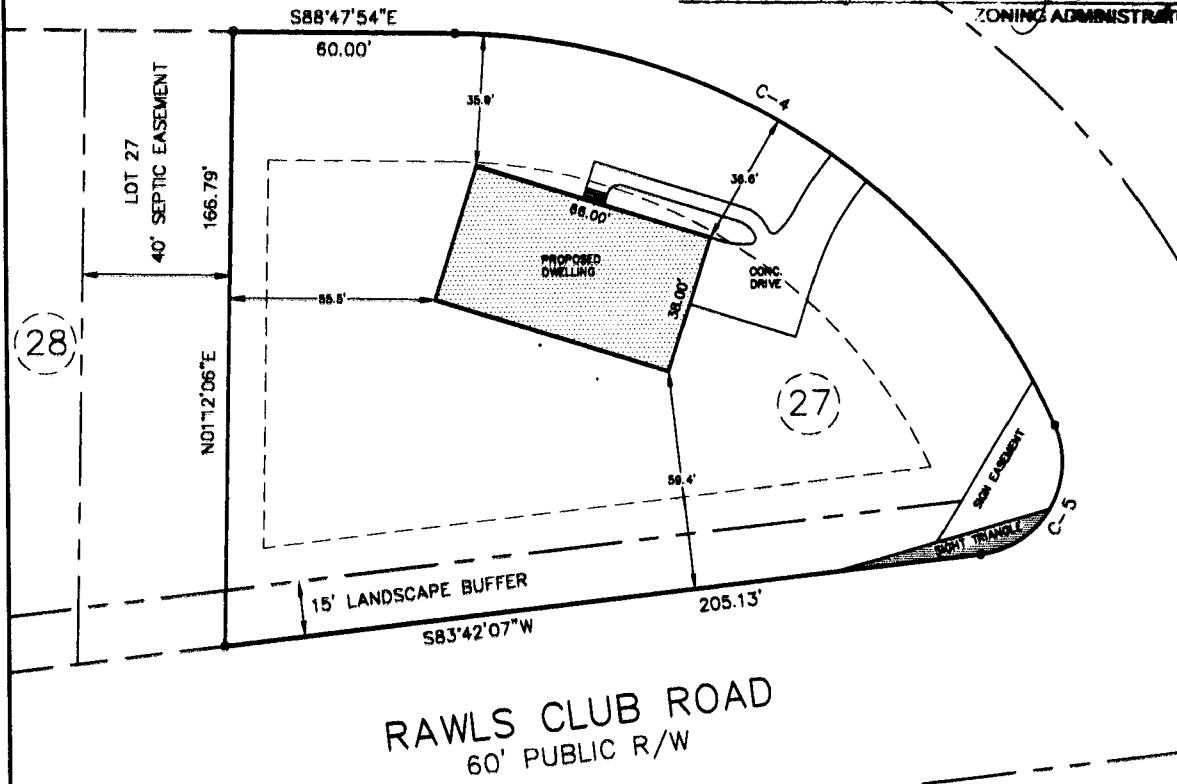
#BEDROOMS *3*

9.3.15

dyoulism

ZONING ADMINISTRATOR

ALBAN ROW
50' PUBLIC R/W



- LEGEND
 EIP - EXISTING IRON PIPE
 IPS - IRON PIPE SET
 NIF - NO IRON FOUND
 PK - PK NAIL
 RRS - RAILROAD SPIKE

ADDRESS:
29 ALBAN ROW
FUQUAY-VARINA, N.C. 27526

AREA
29,071 sq. ft.
0.67 acres

ASHWORTH
LAND SURVEYING

PO BOX 388, FUQUAY-VARINA, N.C. 27526 919-552-1857

08/24/15

PRELIMINARY PLAT

NAME: RUSSELL HART

APPLICATION #: 15-50037037

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.

Russell Hart
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

09-03-15
DATE

For Registration Kimberly S. Hargrove
Register of Deeds

Harnett County, NC

Electronically Recorded

2014 Dec 30 04:53 PM NC Rev Stamp: \$ 46.00

Book: 3271 Page: 955 Fee: \$ 26.00

Instrument Number: 2014017461

HARNETT COUNTY TAX ID#

080655 006728

12-30-14 BY SB

HARNETT COUNTY, NC

GIS DEED STAMP FORM

PARCEL ID:

080655 006728

Brief Property Description:

Lot 27 Magnolia Crest

BY:

Shirley Burt

GIS/Land Records Staff Signature

Date:

12-30-14



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

NORTH CAROLINA SPECIAL WARRANTY DEED

Excise Tax 546.00

Parcel Identifier No. 080655 0067 28 Verified by _____ County on the ____ day of _____, 20____

By: _____

Mail after recording to _____

This instrument was prepared by BRINKLEY WALSER, PLLC, 10 LSB PLAZA, LEXINGTON, NC 27292

Brief Description for the Index: 29 ALBAN ROW, FUQUAY VARINA, NC

THIS DEED made the 29 day of December, 2014, by and between

GRANTOR	GRANTEE
NewBridge Bank, formerly Patriot State Bank Post Office Box 867 Lexington, NC 27293-0867	Russell R. Hart <i>29 Alban Row Fuquay Varina, NC 27506</i>

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 Harnett County, North Carolina and more particularly described as follows:

Being all of Lot 27 Magnolia Crest Subdivision as shown in Map Number 2007-39, Harnett County Registry. The metes and bounds description shown thereon is incorporated herein by reference.

DOCUMENTS PREPARED WITHOUT BENEFIT OF TITLE EXAMINATION. NO TITLE OPINION RENDERED.

The property hereinabove described was acquired by Grantor by instrument recorded in Deed Book 2902, Page 667.
A map showing the above described property is recorded in Plat Book 2007, Page 39.

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 has done nothing to impair such title as Grantor received, and Grantor will warrant and defend the title against the lawful claims of all persons claiming by, under or through Grantor, other than the following exceptions: All easements, rights of way, restrictions, and reservations of record. All City and County ad valorem taxes including those for year 2014 which Grantee herein assumes and agrees to pay.

This property is not the primary residence of the Grantor.

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

NEWBRIDGE BANK, formerly Patriot State Bank

By: *April Cassidy*
Title: Vice-President

State of North Carolina - County of Davidson

I certify that the following person personally appeared before me this day, acknowledging to me that she voluntarily signed the foregoing document for the purpose stated therein and in the capacity indicated:

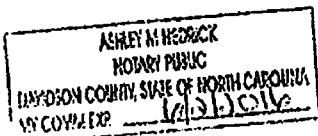
April A Cassidy, VP

Date: 12/29/2014

Ashley M Hedrick
(Official signature of notary)

(Official Seal)

Ashley M Hedrick
(Notary's printed or typed name), Notary Public



My commission expires: 12/21/2016

EXHIBIT "A"

Being all of Lot 27 Magnolia Crest Subdivision as shown in Map Number 2007-39, Harnett County Registry. The metes and bounds description shown thereon is incorporated herein by reference.

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

10 December 2014

Mr. David Owens
Fathom Realty
Dauidsells homesfast@gmail.com

Reference: Preliminary Soil Investigation
Lot 27, Magnolia Crest

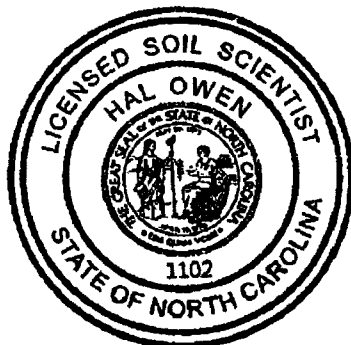
Dear Mr. Owens,

A preliminary soil investigation has been conducted at the above referenced property, located on the southern side of Alban Row, Harnett County, North Carolina. The purpose of the investigation was to determine the ability of this lot to support a subsurface sewage waste disposal system and repair area for a typical four-bedroom home. All soil ratings and determinations were made in accordance with "Laws and Rules for Sewage Treatment and Disposal Systems, 15A NCAC 18A .1900". It is our understanding that individual septic systems and public water supplies will be utilized at this site.

A portion of this lot was observed to be underlain by soils rated as provisionally suitable for subsurface sewage waste disposal. In addition, a forty foot wide easement is provided for septic disposal needs of this lot and is also underlain by provisionally suitable soils. These provisionally suitable soils were observed to be friable sandy clay loams to greater than 36 inches and appear adequate to support a long term acceptance rate of 0.5 gal/day/sqft. In other words, you should expect that approximately 80 feet of conventional drainline would be required for each bedroom in the proposed home. It appears that the soils on this lot (including the easement area) are adequate to support a conventional septic system and repair area for your proposed four-bedroom home. The home will likely need to be sited on the lower end of the lot and a pump utilized to move the sewage effluent uphill to the drainfield.

The soils on the lower end of the lot exhibited characteristics indicating that the soils are too wet for septic disposal, although no actual water was observed during the wet season of the year. This area appears to have been artificially drained by the construction of the subdivision streets, to the extent that foundation stability will not likely be a problem.

I appreciate the opportunity to provide this service and hope to be allowed to assist you again in the future. If you have any questions or need additional information, please contact me at your convenience.



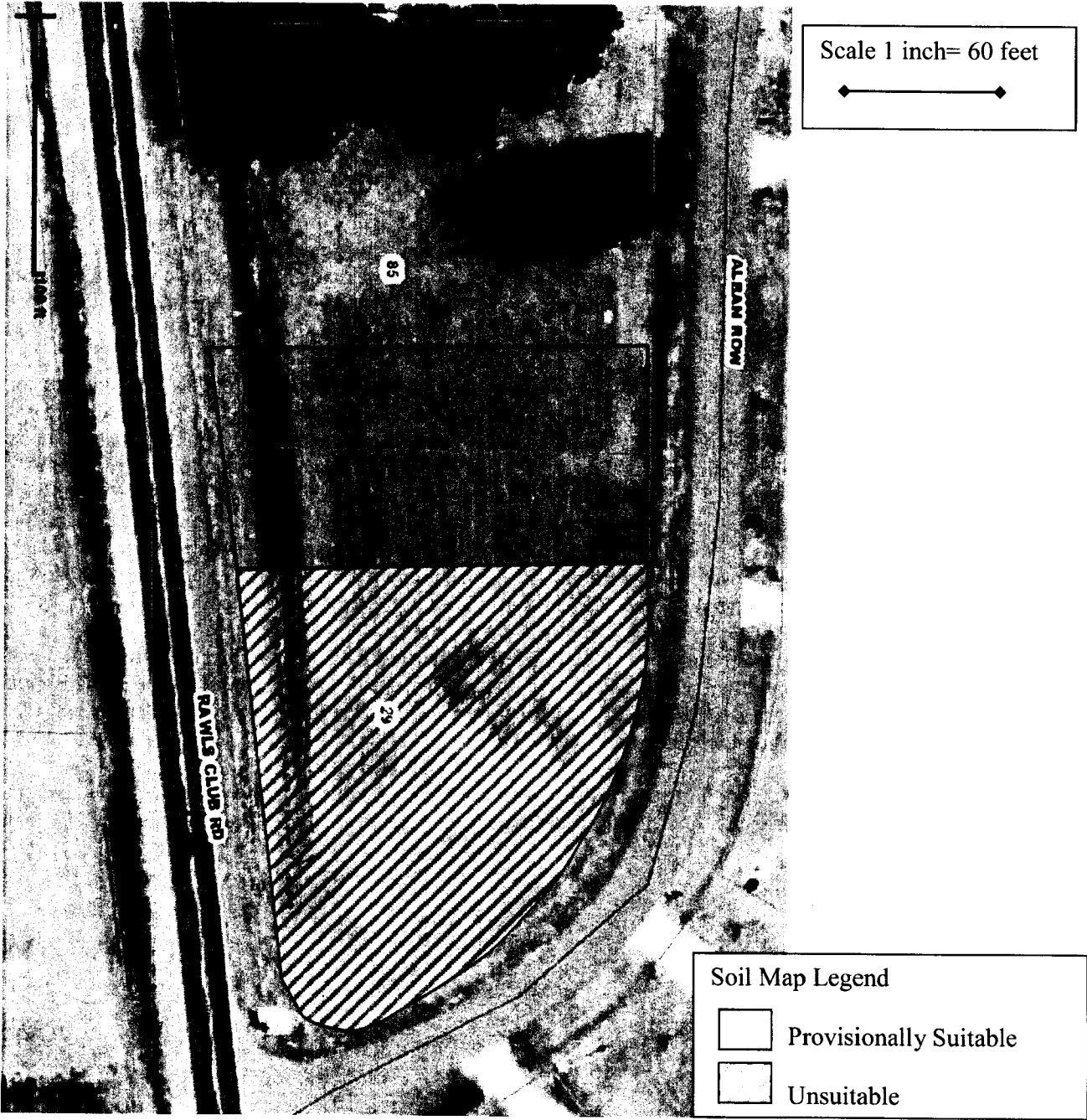
Sincerely,

A handwritten signature in black ink that reads "Hal Owen". The signature is written in a cursive, flowing style.

Hal Owen
Licensed Soil Scientist



Preliminary Soil Investigation
Lot 27 Magnolia Crest Subdivision
10 December 2014



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 RUSSELL HART Date 09-03-15
Site Address 29 ALBAN ROW / EV Phone 919-762-6556
Directions to job site from Lillington GO IN TO RAWLS CHURCH (ON RT), LEFT
ONTO RAWL CLUB, RT ONTO ALBAN ROW

Subdivision MAGNOLIA CREST Lot 27
Description of Proposed Work _____ # of Bedrooms 3
Heated SF 1650 Unheated SF 536/137 Finished Bonus Room? YES Crawl Space Slab

General Contractor Information

x RUSSELL HART
Building Contractor's Company Name _____ Telephone _____
Address _____ Email Address _____
License # _____

Electrical Contractor Information

Description of Work _____ Service Size _____ Amps T-Pole Yes No
x RUSSELL HART
Electrical Contractor's Company Name _____ Telephone _____
Address _____ Email Address _____
License # _____

Mechanical/HVAC Contractor Information

Description of Work _____
x RUSSELL HART
Mechanical Contractor's Company Name _____ Telephone _____
Address _____ Email Address _____
License # _____

Plumbing Contractor Information

Description of Work _____ # Baths _____
x RUSSELL HART
Plumbing Contractor's Company Name _____ Telephone _____
Address _____ Email Address _____
License # _____

Insulation Contractor Information

RUSSELL HART
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

Russell Hunt
Signature of Owner/Contractor/Officer(s) of Corporation

09-03-15
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 Russell Hunt

Sign w/Title Russell Hunt Date 09-03-15

09-03-15

To WHOM IT MAY CONCERN,

I RUSSELL HANT OF 296 MOONLIGHT DR,
FURQUAY VARINA, NC 27526.... WILL BE FUNDING
CONSTRUCTION OF 29 ALBAN ROW/FV ---
NEW SINGLE FAMILY DWELLING WITH CASH
FUNDS DRAWN FROM PERSONAL ACCT @
BANK OF AMERICA.
VERIFICATION OF FUNDS AVAILABLE UPON
REQUEST.

SIGNED: RUSSELL HANT 09-03-15
Russell Hant
296 MOONLIGHT DR.
FURQUAY VARINA, NC 27529
919 762-6556
RHOMES50 @ GMAIL.COM

Plan Box # B2

Date 9.3.15

Job Name Russell Hart

App # 1550037037 Valuation \$ 229248 Heated SQ Feet 2388

Garage 536

= 2924

Inspections for SFD/SFA

Crawl Slab _____ Mono _____ Basement _____

Footing	Footing	Plum Under Slab	Footing
Foundation	Foundation	Ele. Under Slab	Foundation
Address	Address	Address	Waterproofing
Open Floor	Slab	Mono Slab	Plum Under slab
Rough In	Rough In	Rough In	Address
Insulation	Insulation	Insulation	Slab
Final	Final	Final	Open Floor
			Rough In
			Insulation
			Final

Foundation Survey

Envir. Health NEW

Other _____

Additions / Other

Footing _____

Foundation _____

Slab _____

Mono _____

Open Floor _____

Rough In _____

Insulation _____

Final _____

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	15-50037037	Date	9/30/15
Property Address	29 ALBAN ROW		
PARCEL NUMBER	08-0655- - -0067- -28-		
Application type description	CP NEW RESIDENTIAL (SFD)		
Subdivision Name	MAGNOLIA CREST 29LOTS		
Property Zoning	RES/AGRI DIST - RA-30		

Owner

Contractor

HART RUSSELL R
 296 MOONLIGHT DRIVE
 FUQUAY VARINA NC 27526

OWNER

Applicant

HART RUSSELL #27
 296 MOONLIGHT DR
 FUQUAY VARINA NC 27526
 (919) 762-6556

--- Structure Information 000 000 66X38 3 BR ATT GARAGE DECK CRAWL
 Flood Zone FLOOD ZONE X
 Other struct info # BEDROOMS 3.00
 PROPOSED USE SFD
 SEPTIC - EXISTING? NEW
 WATER SUPPLY COUNTY

Permit	BLDG,MECH,ELEC,PLB,INSU PERMIT		
Additional desc			
Phone Access Code	1107572		
Issue Date	9/30/15	Valuation	229248
Expiration Date	9/29/16		

Special Notes and Comments

T/S: 09/03/2015 03:41 PM DJOHNSON --
 MAGNOLIA CREST LOT 27
 29 ALBAN ROW
 XXX
 PERMIT INCLUDES BLDG,ELEC,MECH,PLUMB
 INSULATION AND LAND USE.
 XXX
 Work must conform and comply with the
 STATE BUILDING CODE and all other State
 and local laws, ordinances & regulations

HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

LILLINGTON, NC 27546

For Inspections Call: (910) 893-7525 Fax: (910) 893-2793

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Application description . . .	CP NEW RESIDENTIAL (SFD)		
Subdivision Name	MAGNOLIA CREST 29LOTS		
Property Zoning	RES/AGRI DIST - RA-30		
Permit	BLDG,MECH,ELEC,PLB,INSU PERMIT		
Additional desc			
Phone Access Code	1107572		

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
10	101	B101	R*BLDG FOOTING / TEMP SVC POLE	_____	___/___/___
20	103	B103	R*BLDG FOUND & TEMP SVC POLE	_____	___/___/___
20-999	113	B113	R*BLDG WATER/DAMP PROOFING	_____	___/___/___
20-30	814	A814	ADDRESS CONFIRMATION	_____	___/___/___
20-30	104	B104	R*FOUND & SETBACK VERIF SURVEY	_____	___/___/___
30-999	105	B105	R*OPEN FLOOR	_____	___/___/___
40-50	129	I129	R*INSULATION INSPECTION	_____	___/___/___
40-60	425	R425	FOUR TRADE ROUGH IN	_____	___/___/___
40-60	125	R125	ONE TRADE ROUGH IN	_____	___/___/___
40-60	325	R325	THREE TRADE ROUGH IN	_____	___/___/___
40-60	225	R225	TWO TRADE ROUGH IN	_____	___/___/___
50-60	429	R429	FOUR TRADE FINAL	_____	___/___/___
50-60	131	R131	ONE TRADE FINAL	_____	___/___/___
50-60	329	R329	THREE TRADE FINAL	_____	___/___/___
50-60	229	R229	TWO TRADE FINAL	_____	___/___/___
999		H824	ENVIR. OPERATIONS PERMIT	_____	___/___/___