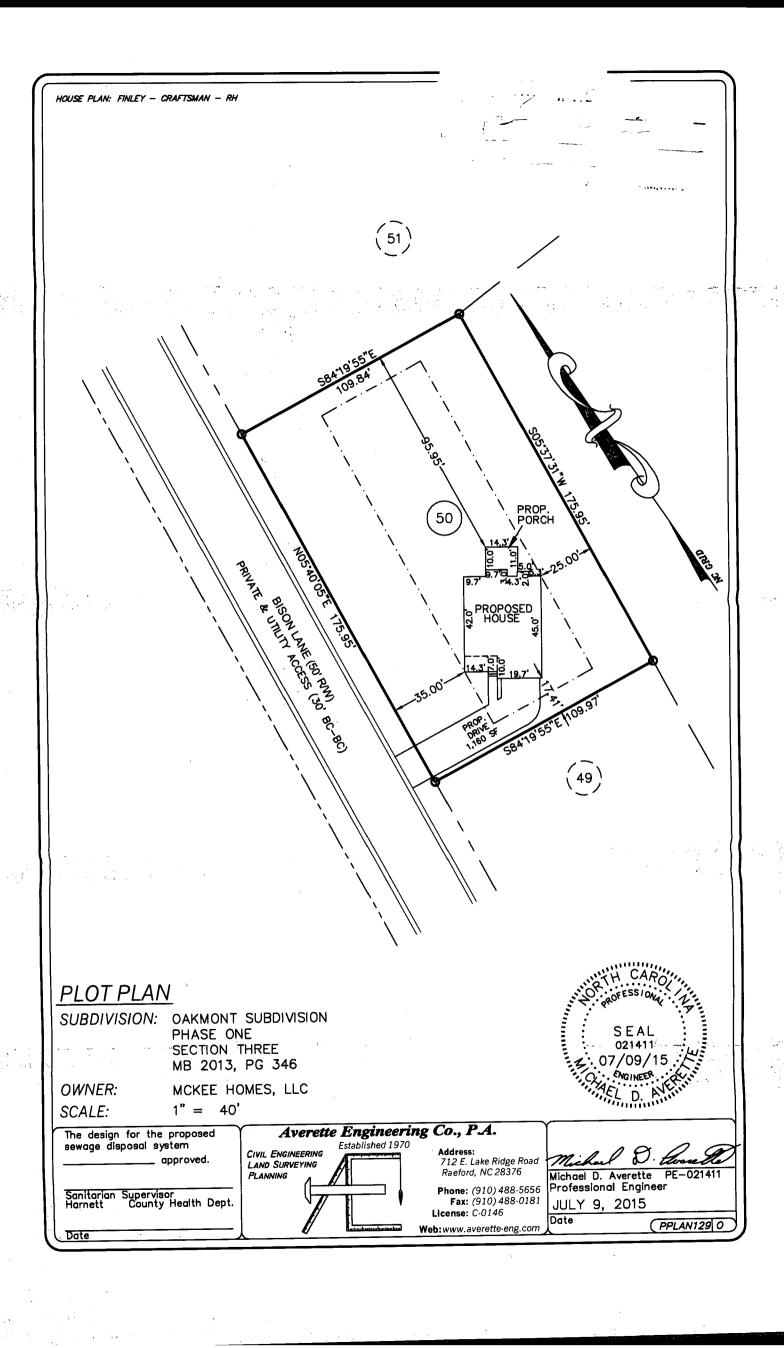
B-1

Initial Application Date: 9-9-15	Application #15-50037067
	CU# ESIDENTIAL LAND USE APPLICATION
Central Permitting 108 E. Front Street, Lillington, NC 27546	Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.hamett.org/permits
A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURC LANDOWNER: MCKee Homes, LLC AKMONT DEVELOPME	HASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION
LANDOWNER: WICKER HOMES, LEE OF MODE OF LOTHER	Mailing Address: 101 Hay Street
City: Fayetteville State: NC Zip: 28301 C	ontact No: (910) 475-7100 ext 728 Email: wbynum@mckeehomesnc.com
APPLICANT*: McKee Homes, LLC Mailing Addre	ess: 101 Hay Street
City: Fayetteville State: NC Zip: 28301 C	ontact No: 475-7100 ext 728 Email: wbynum@mckeehomesnc.com
*Please fill out applicant information if different than landowner	
CONTACT NAME APPLYING IN OFFICE: William Bynum	Phone #_(910) 475-7100 ext 728
	Lot #: <u>50</u> Lot Size <u>: 0, 45 aCre. Map Book & Page: <u>30/3 / 346</u></u>
•	
Parcel: Wetershod: NA Dood Bo	PIN: _ <i>0504-31-8436, 0000</i> ok & Page: _ <i>3165 615</i> _Power Company*: Central Electric
	premise number from Progress Energy.
New structures with Progress Energy as service provider need to supply	premise numbernon-regions 2.10.39.
PROPOSED USE:	Monalithia
☑ SFD: (Size <u>48' x.34'</u>) # Bedrooms: <u>4</u> # Baths: <u>3</u> Basement(w/wo bath): Garage: Deck: Crawl Space: Slab: Slab: Slab: Slab: Slab: W
(Is the bonus room finished? (🎾 yes) () no_w/ a closet? (🔏) yes () no (if yes add in with # bedrooms)
	w/wo bath) Garage: Site Built Deck: On Frame Off Frame _) no Any other site built additions? () yes () no
☐ Manufactured Home:SWDWTW (Sizex) # Bedrooms: Garage:(site built?) Deck:(site built?)
Duplex: (Sizex) No. Buildings: No. B	edrooms Per Unit:
☐ Home Occupation: # Rooms: Use:	Hours of Operation:#Employees:
•	Clocate in addition? () vas () no
Addition/Accessory/Other: (Sizex) 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) E	xisting Septic Tank (Complete Checklist) County Sewer
Does owner of this tract of land, own land that contains a manufactured l	nome within five hundred feet (500') of tract listed above? () yes 😕 no
Does the property contain any easements whether underground or overt	nead () yes (义) no
Structures (existing or proposed): Single family dwellings:	Manufactured Homes: Other (specify):
Required Residential Property Line Setbacks: Comments	s:
Front Minimum 35 Actual 35	
Rear 25' 25'	
Closest Side /O' 17'	
Sidestreet/corner lot	
Nearest Building	
on same lot Residential Land Use Application	Page 1 of 2 03/11
APPLICATIO	ON CONTINUES ON BACK

SPECIFIC DIRECTIONS TO	THE PROPERTY FROM LILLINGTON:	:		· · · · · ·
	<u></u>			
,				
	ı			
I hereby state that foregoing	to conform to all ordinances and laws of statements are accurate and correct to the Cliam J. Bynum	the best of my knowledge. I	Permit subject to revocation if fa	specifications of plans submitted. alse information is provided.
I hereby state that foregoing	to conform to all ordinances and laws of statements are accurate and correct to the Liam J. Bynum Signature of Owger or Owner's Ag	the best of my knowledge. I	a regulating such work and the Permit subject to revocation if fa 	specifications of plans submitted. alse information is provided.

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



APPLICATION#: 1550037067)
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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) CONFIRMATION #_ 910-893-7525 option 1 vironmental Health New Septic System Code 800 TIMS # 002716154

All property irons must be made visible. Place "pink property flags" on each corner iron of lot. All property ☑ / Environmental Health New Septic SystemCode 800 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. {□} Innovative {□} Conventional {□} Accepted {**□**} 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: Does the site contain any Jurisdictional Wetlands? {□}YES {**X**} NO Do you plan to have an irrigation system now or in the future? {□}YES Does or will the building contain any drains? Please explain. {□}YES Are there any existing wells, springs, waterlines or Wastewater Systems on this property? {□}YES Is any wastewater going to be generated on the site other than domestic sewage? $\{\square\}$ YES {□}YES Is the site subject to approval by any other Public Agency? Are there any Easements or Right of Ways on this property? {□}YES (**AZT**)NO Does the site contain any existing water, cable, phone or underground electric lines? {□}YES 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

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.

Milliam F. Bynum
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

08/14 | 3015 DATE Harnett County Central Permitting
PO Box 65 Lillington NC 27546
910 893 7525 Fax 910 893 2793 www harnett org/permits

Application # 15-506 37067

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	McKee Homes, LLC	Date <u>09/17/30/</u>
Site Address 34	of Bison Lane	Phone (9/0) 445-4100 ×
Directions to job sil		
Subdivision <u>Oak</u>		Lot50
Description of Prop	posed Work Single Family Residential	# of Bedrooms
leated SF <u>2266</u>	Unheated SF <u>241</u> Finished Bonus I General Contractor In	Room? X Crawl Space Slab X
GML Developmen	it Inc	(910) 475-7100 ext 728
Building Contracto	rs Company Name	Telephone
. •	ayetteville NC 28301	wbynum@mckeehomesnc.com
Address		Email Address
63970		
.ıcense #		
	Electrical Contractor I	nformation
		vice Size 200 Amps T-Pole X Yes No
.M. Pope Electric		(919) 776-5144
Electrical Contractor's Company Name 409 Chatham Street, Sanford, NC 27330		Telephone
	eet , Sanford, NC 27330	jmpopeelectric@gmail.com
\ddress		Email Address
21326-L		
_icense #	Mechanical/HVAC Contrac	tor Information
		NOT INTO THAT IS
Description of Wor	K Single Family Residential	(010) 050 0000
Certified Heating		(910) 858-0000
	actor's Company Name	Telephone
PO Box 1071, Hop	pe Mills, NC 28348	certifiedheatair@embarqmail.com
\ddress	•	Email Address
20012 H3-1	<u> </u>	
icense #	Disambas Contractor	
	Plumbing Contractor	
	rk Single Family Residential	# Baths
Dell Haire Plumbi	ng	(910) 818-4863
	tor's Company Name	Telephone
7612 Documentar	ry Drive, Fayetteville, NC 28306	dellhaireplumbing@hotmail.com
Address		Email Address
24204 PL		·
License #		lafo madion
Occurrence of the state of the	Insulation Contractor	
Cumberland Insu		(910) 484-7118
Insulation Contract	ctor 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 tractor/Officer(s) of Corporation Affidavit for Worker's Compensation N C G S 87-14 The undersigned applicant being the **General Contractor** Officer/Agent of the Contractor or Owner Owner Do hereby confirm under penalties of periury 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 McKee Homes, LLC

Sign W/Title William f. Bynum (Pre-Con Coordinator) Date 08/14/2015

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 346375

Filed on: 08/31/2015

initially filed by: jbuckwalter

Designated Lien Agent

First American 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@lienanc.com)

Project Property

Lot 50 Oakmont 361 Bison Lane Lillington, NC 27546 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

McKee Homes 101 Hay St

Fayetteville, NC 28301

United States

Email: jbuckwalter@mckeehomesnc.com

Phone: 910-475-7100

Date of First Furnishing

10/05/2015

View Comments (0)

Technical Support Hotline: (888) 690-7384

App #	# <u>B</u>	<u>3</u> 706	ー ソaluation <u>2</u>	<u>М</u> . 21753С	Heated SQ Fe	Developm nes llc et 2266 ge 414
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Crawl		Slab	Mono) E	Basement	_
Footing Foundation Address Open Floor Ough In Insulation Inal		Footing Foundation Address Slab Rough In Insulation Final		ss Slab In Ion	Footing Foundation Waterproofing Plum Under slab Address Slab Open Floor Rough In nsulation	
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ndation_						

LILLINGTON, NC 27546 For Inspections Call: (910) 893-7525 Fax: (910) 893-2793 Bldg Insp scheduled before 2pm available next business day. Date 9/29/15 Property Zoning RES/AGRI DIST - RA-20R Contractor Owner ______ GML DEVELOPMENT INC OAKMONT DEV PTNRS LLC #50 5112 PINE BIRCH DRIVE 5112 PINE BIRCH DRIVE NC 27606 RALEIGH RALEIGH (919) 793-5237 Applicant MCKEE HOMES #50 101 HAY ST NC 28301 FAYETTEVILLE (910) 475-7100 Structure Information 000 000 48X34 4 BDS GARAGE MONO SLAB Flood Zone FLOOD ZONE X
Other struct info # BEDROOMS # BEDROOMS
PROPOSED USE SFD
SEPTIC - EXISTING? NEW SEPTIC
COUNTY WATER SUPPLY ______ Permit BLDG, MECH, ELEC, PLB, INSU PERMIT Additional desc . . Phone Access Code . 1108604
Issue Date . . . 9/29/15
Expiration Date . . 9/28/16 Valuation Special Notes and Comments T/S: 09/09/2015 03:45 PM KGOINS ----210 TO 27 T/R TO DOC RD T/L 1 1/2 MILE DOWN TO EXCUTIVE DR TO BISON LANE ON RIGHT 361 BISON LANE PERMIT INCLUDES BLDG, ELEC, MECH, PLUMB INSULATION AND LAND USE. 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

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 Date 9/29/15

Application description . . . CP NEW RESIDENTIAL (SFD) Subdivision Name OAKMONT PH1 SC3 52LOTS Property Zoning RES/AGRI DIST - RA-20R

Permit BLDG, MECH, ELEC, PLB, INSU PERMIT

Additional desc . .

Phone Access Code . 1108604

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
Seq 	Insp# 814 309 205 114 104 129 425 125 325 225 429 131	A814 P309 E205 B114 B104 I129 R425 R125 R325 R225 R429 R131	ADDRESS CONFIRMATION R*PLUMB UNDER SLAB R*ELEC UNDER SLAB R*BLDG MONO SLAB/TEMP SVC POLE R*FOUND & SETBACK VERIF SURVEY 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		//
40-60	329	R329	THREE TRADE FINAL		
40-60 40-60	329 229	R229	TWO TRADE FINAL		'/'/
999	227	H824	ENVIR. OPERATIONS PERMIT		