

Initial Application Date: 10-2-15

Application # 1550037214

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:** McKee Homes, LLC Mailing Address: 101 Hay Street

City: Fayetteville State: NC Zip: 28301 Contact No: (910) 475-7100 ext 728 Email: wbynum@mckeehomesnc.com

**APPLICANT:** McKee Homes, LLC Mailing Address: 101 Hay Street

City: Fayetteville State: NC Zip: 28301 Contact No: (910) 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

**PROPERTY LOCATION:** Subdivision: Oakmont Lot #: 133 Lot Size: 0.85

State Road # 175 State Road Name: Bunting Drive Map Book & Page: 2013 1346

Parcel: 03050701 0046 36 PIN: 0507-42-0543.000

Zoning: RA203 Flood Zone: X Watershed: NA Deed Book & Page: 3165 / 675 Power Company\*: Central Electric

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

**PROPOSED USE:**

SFD: (Size 44'3" x 44') # Bedrooms: 4 # Baths: 3 1/2 Basement(w/wo bath): \_\_\_\_\_ Garage: \_\_\_\_\_ Deck: \_\_\_\_\_ Crawl Space: \_\_\_\_\_ Slab: \_\_\_\_\_ Slab:  Monolithic  
(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:**

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

Front Minimum \_\_\_\_\_ Actual 60

Rear \_\_\_\_\_ 224.33

Closest Side \_\_\_\_\_ 20

Sidestreet/corner lot \_\_\_\_\_

Nearest Building on same lot \_\_\_\_\_

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

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.

William F. Bynum  
Signature of Owner or Owner's Agent

08/19/2015  
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: \_\_\_\_\_

APPLICATION #: \_\_\_\_\_

**\*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.

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

02/19/2015  
 DATE

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 McKee Homes, LLC Date 08/19/2015  
Site Address 175 Bunting Drive Phone (910) 475-7100 x728  
Directions to job site from Lillington \_\_\_\_\_

Subdivision Dakmont Lot 132  
Description of Proposed Work Single Family Residential # of Bedrooms \_\_\_\_\_  
Heated SF 3961 Unheated SF 989 Finished Bonus Room? N/A Crawl Space \_\_\_\_\_ Slab X

**General Contractor Information**

GML Development Inc \_\_\_\_\_ (910) 475-7100 ext 728  
Building Contractor's Company Name \_\_\_\_\_ Telephone \_\_\_\_\_  
101 Hay Street, Fayetteville NC 28301 \_\_\_\_\_ wbynum@mckeehomesnc.com  
Address \_\_\_\_\_ Email Address \_\_\_\_\_  
63970 \_\_\_\_\_  
License # \_\_\_\_\_

**Electrical Contractor Information**

Description of Work Single Family Residential Service Size 200 Amps T-Pole X Yes     No  
J.M. Pope Electric \_\_\_\_\_ (919) 776-5144  
Electrical Contractor's Company Name \_\_\_\_\_ Telephone \_\_\_\_\_  
409 Chatham Street, Sanford, NC 27330 \_\_\_\_\_ jmpopeelectric@gmail.com  
Address \_\_\_\_\_ Email Address \_\_\_\_\_  
21326-L \_\_\_\_\_  
License # \_\_\_\_\_

**Mechanical/HVAC Contractor Information**

Description of Work Single Family Residential  
Certified Heating & A/C \_\_\_\_\_ (910) 858-0000  
Mechanical Contractor's Company Name \_\_\_\_\_ Telephone \_\_\_\_\_  
PO Box 1071, Hope Mills, NC 28348 \_\_\_\_\_ certifiedheatair@embarqmail.com  
Address \_\_\_\_\_ Email Address \_\_\_\_\_  
20012 H3-1 \_\_\_\_\_  
License # \_\_\_\_\_

**Plumbing Contractor Information**

Description of Work Single Family Residential # Baths \_\_\_\_\_  
Dell Haire Plumbing \_\_\_\_\_ (910) 818-4863  
Plumbing Contractor's Company Name \_\_\_\_\_ Telephone \_\_\_\_\_  
7612 Documentary Drive, Fayetteville, NC 28306 \_\_\_\_\_ dellhaireplumbing@hotmail.com  
Address \_\_\_\_\_ Email Address \_\_\_\_\_  
24204 PL \_\_\_\_\_  
License # \_\_\_\_\_

**Insulation Contractor Information**

Cumberland Insulation \_\_\_\_\_ (910) 484-7118  
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

William F. Bynum  
Signature of Owner/Contractor/Officer(s) of Corporation

08/19/2015  
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 McKee Homes, LLC

Sign w/Title William F. Bynum (Pre-Con Coordinator) Date 08/19/2015

**DO NOT REMOVE!**

## Details: Appointment of Lien Agent

Entry #: 340967

Filed on: 08/19/2015

Initially filed by: jbwaltwalter

### Designated Lien Agent

First American Title Insurance Company

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

### Project Property

Lot 132 Oakmont  
175 Bunting Drive  
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: [jbwaltwalter@mckeehomesnc.com](mailto:jbwaltwalter@mckeehomesnc.com)  
Phone: 910-475-7100

### Date of First Furnishing

09/21/2015

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

Technical Support Hotline: (888) 690-7384

Plan Box # DA

Date 10-2-15  
Job Name McKee

App # 37216

Valuation 380256

Heated SQ Feet 3961

Garage 501  
= 4462

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  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.

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Application Number . . . . .	15-50037216	Date	11/05/15
Property Address . . . . .	175 BUNTING DR		
PARCEL NUMBER . . . . .	03-0507-01- -0046- -36-		
Application type description	CP NEW RESIDENTIAL (SFD)		
Subdivision Name . . . . .	OAKMONT PH1 SC3 52LOTS		
Property Zoning . . . . .	RES/AGRI DIST - RA-20R		

Owner

Contractor

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MCKEE HOMES LLC  
5112 PINE BIRCH DRIVE  
RALEIGH NC 27606

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GML DEVELOPMENT INC  
5112 PINE BIRCH DRIVE  
RALEIGH NC 27606  
(919) 793-5237

Applicant

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MCKEE HOMES INC #132  
101 HAY ST  
FAYETTEVILLE NC 28301  
(910) 475-7100

--- Structure Information 000 000 66.2X44 4BDR MONO W/ GARAGE

Flood Zone . . . . .	FLOOD ZONE X	
Other struct info . . . . .	# BEDROOMS	4000000.00
	PROPOSED USE	SFD
	SEPTIC - EXISTING?	NEW TANK
	WATER SUPPLY	COUNTY

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Permit . . . . .	BLDG,MECH,ELEC,PLB,INSU PERMIT		
Additional desc . . . . .			
Phone Access Code . . . . .	1111772		
Issue Date . . . . .	11/05/15	Valuation . . . . .	0
Expiration Date . . . . .	11/04/16		

Special Notes and Comments

T/S: 10/02/2015 08:16 AM JBROCK ----  
OAKMONT #132  
XX  
PERMIT INCLUDES BLDG,ELEC,MECH,PLUMB  
INSULATION AND LAND USE.  
XX  
Work must conform and comply with the  
STATE BUILDING CODE and all other State  
and local laws, ordinances & regulations

Page 2  
Date 11/05/15

Application Number . . . . . 15-50037216  
Property Address . . . . . 175 BUNTING DR  
PARCEL NUMBER . . . . . 03-0507-01- -0046- -36-  
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 . . . . . 1111772

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
10-999	309	P309	R*PLUMB UNDER SLAB	_____	___/___/___
10-999	205	E205	R*ELEC UNDER SLAB	_____	___/___/___
20-30	814	A814	ADDRESS CONFIRMATION	_____	___/___/___
20-999	114	B114	R*BLDG MONO SLAB/TEMP SVC POLE	_____	___/___/___
30-50	129	I129	R*INSULATION INSPECTION	_____	___/___/___
30-60	425	R425	FOUR TRADE ROUGH IN	_____	___/___/___
30-60	125	R125	ONE TRADE ROUGH IN	_____	___/___/___
30-60	325	R325	THREE TRADE ROUGH IN	_____	___/___/___
30-60	225	R225	TWO TRADE ROUGH IN	_____	___/___/___
40-60	429	R429	FOUR TRADE FINAL	_____	___/___/___
40-60	131	R131	ONE TRADE FINAL	_____	___/___/___
40-60	329	R329	THREE TRADE FINAL	_____	___/___/___
40-60	229	R229	TWO TRADE FINAL	_____	___/___/___
999		H824	ENVIR. OPERATIONS PERMIT	_____	___/___/___
999		H828	ENVIRO. WELL PERMIT	_____	___/___/___