Initial Application Date:	0-	19-	15

Application #	1550037324
	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" TENNIFER LANDOWNER: Mailing Address: 139 NED LANE State: NC Zip: 28584 Contact No: 910-459-9129 Email: Mailing Address: 780 COKESBURY PORIC LN APPLICANT\*: State: NC Zip: 2/526 Contact No: 919-538-274/Email: ERIC & SOUTHERNTRIOITIONS Please fill out applicant information if different than landowner CONTACT NAME APPLYING IN OFFICE: PROPERTY LOCATION: Subdivision: CONRAD L. ADAMS II AND WIFE Lot #: 6 Lot Size: 14.474 ALDES \_\_\_\_\_ State Road Name: \_\_\_\_\_\_\_ Ro 07/509 0002 05 PIN: 1519-16-7925,000 Zoning: RASD Flood Zone: AE Watershed: Deed Book & Page: 3345 515 Power Company\*: \*New structures with Progress Energy as service provider need to supply premise number \_\_\_\_\_ PROPOSED USE: SFD: (Size 48.4 x 69.9 # Bedrooms: 5 # Baths: 3 Basement(w/wo bath): 10 Garage: 2 Deck: Crawl Space: X Slab: Slab: (Is the bonus room finished? (X) yes (\_\_) no w/ a closet? (\(\chi\_{\mathbb{L}}\)) 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 (2) yes (\_\_) no Structures (existing or proposed): Single family dwellings:\_\_\_\_\_ Manufactured Homes:\_\_\_\_\_ Other (specify): Required Residential Property Line Setbacks: Comments: Minimum 35 Actual 191.34 Front Rear Closest Side Sidestreet/corner lot NA

**Nearest Building** on same lot

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:	SEE	ATTACHED
If permits are granted I agree to conform to all ordinances and laws of the S I hereby state that foregoing statements are accurate and correct to the bes	tate of North Ca t of my knowled	arolina regulating such work and the specifications of plans submitted.  ge. Permit subject to revocation if false information is provided.  Date
***It is the owner/applicants responsibility to provide the county with a to: boundary information, house location, underground or overhead incorrect or missing information the	ad easements,	etc. The county or its employees are not responsible for any

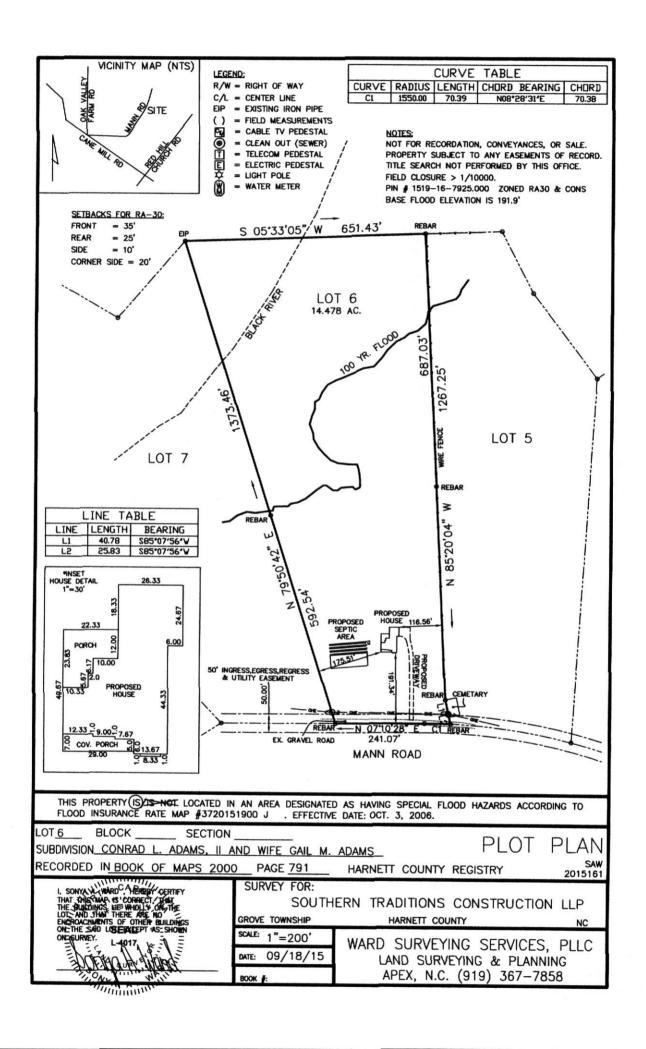
\*\*This application expires 6 months from the initial date if permits have not been issued\*\*

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: {X}YES Does the site contain any Jurisdictional Wetlands? { | NO  $\{ \_ \} YES$ Do you plan to have an irrigation system now or in the future? {XI}YES Does or will the building contain any drains? Please explain. {X} NO Are there any existing wells, springs, waterlines or Wastewater Systems on this property? {\_\_\_}}YES {\_\_}}YES {X1} NO Is any wastewater going to be generated on the site other than domestic sewage? {X} NO {\_\_}}YES Is the site subject to approval by any other Public Agency? YES Are there any Easements or Right of Ways on this property? {\_\_}} NO {\_\_}}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

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 J Am Sofely 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.

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)



Owner:

**ROBERT KING** 

Address:

LOT 6 CONRAD L ADAMS II MAP

Location: 1519-16-7925.000

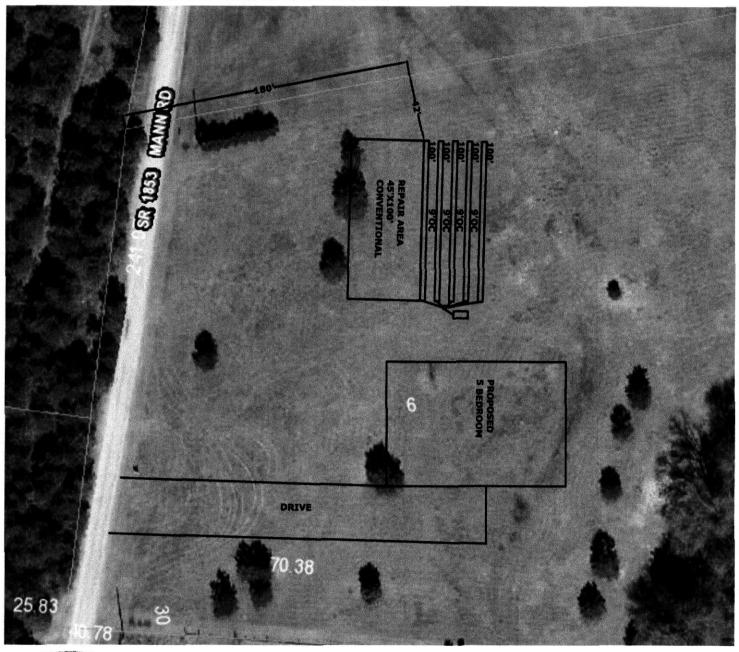
MANN ROAD

## PITTMAN SOIL CONSULTING

910-330-2784

SEPTIC PROPOSAL

MAP FROM HARNETT COUNTY GIS





### INITIAL

5 BEDROOM

LTAR .4

5-100' CONVENTIONAL LINES

24"TB

>6" SOIL COVER REQUIRED OVER SYSTEM AND 5' BEYOND SYSTEM

TYPICAL SOIL PROFILE

0-6 SL 2.5Y 4/3

6-20 SL 2.5Y 6/4 20-36 CL 10YR 5/8

36-48 CL 10YR 5/8 2.5Y 6/1

## REPAIR AREA

5 BEDROOM

LTAR .4

5-100' CONVENTIONAL LINES

24"TB

>6" SOIL COVER REQUIRED OVER SYSTEM AND 5' BEYOND SYSTEM

APPROX SCALE 1"=60'

# **Harnett County Department of Public Health**

## **Well Construction Permit Application**

If the information in the application for a Well Construction Permit is falsified, changed, or the site is altered, then the Well Construction Permit shall become invalid.

Street Address, City, State, Zip Code  The Applicant must submit a Site Plan. The Site Plan is a map/drawing of the proposed and/or proposed property lines and easements with dimensions;  2. the location of the facility and appurtenance;  3. the location for the proposed well;  4. the location of existing or proposed sewer lines and/or sewage disposal systems with success of any existing wells within 100 feet of the property; surface water bode above ground and/or underground storage tanks;  7. and any other known sources of contamination within 100 feet of the proposed well.  The Applicant shall notify the Harnett County Health Director through or by we Division of Environmental Health if any of the following occur prior to well cons.  1. there is a relocation of the proposed facility;  2. there is a change in the intended use of the facility;  3. there is a need for installing the waste water system in an area other than indicated.  4. there are landscape changed that affect site drainage.  Contact information: Environmental Health Division - 910-  PROPERTY INFORMATION  Proposed use of well  Single-Family Multifamily Church Restaurant Bestaurant	0 ) 459-9129
Street Address, City, State, Zip Code  The Applicant must submit a Site Plan. The Site Plan is a map/drawing of the property in the location of the facility and appurtenance;  the location of the facility and appurtenance;  the location of existing or proposed sewer lines and/or sewage disposal systems with the location of any existing wells within 100 feet of the property; surface water bode, above ground and/or underground storage tanks;  and any other known sources of contamination within 100 feet of the proposed well.  The Applicant shall notify the Harnett County Health Director through or by we Division of Environmental Health if any of the following occur prior to well consolates: there is a relocation of the proposed facility; there is a need for installing the waste water system in an area other than indicated there are landscape changed that affect site drainage.  Contact information: Environmental Health Division - 910-  PROPERTY INFORMATION  Proposed use of well  Single-Family Multifamily Church Restaurant Bestaurant	ne Number
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Proposed use of well  Single-Family Multifamily Church □ Restaurant □ B	truction: on the well permit; or
Single-Family Multifamily Church □ Restaurant □ B	
Street Address Maid Ro Subdivision/L	usiness   Irrigation
Parcel #PIN #	ot #
Directions to the Site	
US 421 S -> TURN LEFT ON 274	1 -> Stight RT
BRKK MILL RD CONTINUE ON W HAME	L ST 7 LEFT ON
S MCKINGY ST -> TAKE S CIACOLA ST	-> COSTIJUE OF

I understand that I am solely responsible for the proper identification and labeling of all property lines, underground utility lines, and making the site accessible so that a will can be properly constructed according to the permit.

I have thoroughly read and completed this Application and certify that the information provided herein is true, complete and correct to the best of my knowledge and is give in good faith. Representatives of the Harnett County Health Department and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable rules.

# Google Maps Lillington, NC to Mann Rd, Coats, NC 27521 Drive 13.3 miles, 19 min

# Lillington, NC

Take US-421	S to	<b>Brick</b>	Mill	Rd	in	<b>Neills</b>	Creek
-------------	------	--------------	------	----	----	---------------	-------

t	1.	Head north on S Main St toward E Harnett St	8 min (6.6 mi)
'	1.	Head Horth on S Main St toward E Harriett St	1.5 mi
r	2.	Turn right onto US-421 S	
4	3.	Turn left onto NC-27 W	5.0 mi
			427 ft
Follo	w Br	rick Mill Rd to S McKinley St in Coats	
,	,	Olimba simba anta Printa NAIII Del	5 min (3.4 mi)
r	4.	Slight right onto Brick Mill Rd	3.2 mi
Ť	5.	Continue onto W Hamer St	
			0.2 mi
4	Tur	rn left onto S McKinley St	
			36 s (0.2 mi)
Take	S Li	incoln St and Cane Mill Rd to Mann Rd	
L+	7	Turn right at the 3rd cross street onto E Main St	5 min (3.1 mi)
•	7.	Turringht at the 3rd cross street onto E Main St	0.4 mi
t	8.	E Main St turns slightly right and becomes S Lincoln St	10
t	9.	Continue onto Cane Mill Rd	1.0 mi
	4.5		1.4 mi
7	10.	. Slight left onto Mann Rd	0.4 mi

## Mann Rd

Coats, NC 27521

These directions are for planning purposes only. You may find that construction projects, traffic, weather, or other events may cause conditions to differ from the map results, and you should plan your route accordingly. You must obey all signs or notices regarding your route.

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

Application # 1550037326

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**

	1
Owner's Name JENNIFER MUZTON	DateDate
Site Address LOT 6 MANN RO COATS NC	Phone 910-459-9129
Directions to job site from Lillington US 421 5 -7	LEFT ON ZTW
	T, R ON & MAIN ST,
	of MANA, Lot or R
SubdivisionMANA RD	Lot
Description of Proposed Work New SINCIE FAMILY	# of Bedrooms 5
Heated SF 3274 Unheated SF Finished Bonus Room?	Crawl Space Slab
General Contractor Information	
SOUTHERA TRADITIONS CONSTRUCTION LLP	919-538-2741
Building Contractor's Company Name	Telephone
780 CEKESBURY PARK LA FUQUAY VARIAN NC	ERIL & SOUTHERATRADITIONS NO. CO
Address	Email Address
70685	
License #	
Electrical Contractor Information	1 Zao Ampe T.Dole & Ves No.
Description of Work NEW SNUK FAMILY Service Size	919-740-7086
	Telephone
Blectrical Contractor's Company Name  336 JERIBEL DRIVE WILLOW STRIJE NC 27592	Meuserivenelletrice small.
	Email Address
Address 30031	Linaii Addioss
License #	
Mechanical/HVAC Contractor Inform	ation
Description of Work NEW SINGLE FAMILY	
STEPHENSON HEATING + AIR INC	919 - 329-0686
Mechanical Contractor's Company Name	Telephone
343 SHIPWASH DR. GARKE NC 27592	
Address	Email Address
18644	
License #	
Plumbing Contractor Information	_
Description of Work New STACKE FRANK	_# Baths3
J.L. WILKHS PLYMBIAG CO. INC	919-639-6201
Plumbing Contractor's Company Name	Telephone
840 MASSEALIL BOD RO Angier NC 27501	PLUMBSMART @ CENTURY WIK, 187
Address	Email Address
10421	
License #	
Insulation Contractor Information	
PRIME ENGLIGY GROVE 407 GOLMAN ST	919-921-3288
Insulation Contractor's Company Name & Address Local # NC	Telephone

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 10/9/15 Signature of Owner/Contractor/Officer(s) of Corporation 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 TRADITIONS Company or Name \_\_\_ Date \_\_ \\ /3/15

Sign w/Title

### DO NOT REMOVE!

## Details: Appointment of Lien Agent

Entry #: 375701

Filed on: 11/03/2015

Initially filed by: STraditions

### Designated Lien Agent

Chicago Title Company, LLC

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.apport@liensnc.com

### **Project Property**

Lot 6 Mann Rd coats NC Lot 6 Mann Rd Coats NC Coats , NC 27521 Harnett County

### Property Type

1-2 Family Dwelling

### Date of First Furnishing

11/09/2015

#### Owner Information

Jennifer Morton 139 Ned Lane Swansboro, NC 28584 United States

Email: morton4513@yahoo.com

Phone: 910-459-9129

## 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.

View Comments (0)

Technical Support Hotline: (888) 690-7384

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.

Additional desc . .

Phone Access Code . 1115724

### Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
10 20 20-30	101 103 814	B101 B103 A814	R*BLDG FOOTING / TEMP SVC POLE R*BLDG FOUND & TEMP SVC POLE ADDRESS CONFIRMATION		
30-99		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		

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
Application Number . . . . 15-50037326 Date 11/24/15

Special Notes and Comments and local laws, ordinances & regulations

LILLINGTON, NC 27546 For Inspections Call: (910) 893-7525 Fax: (910) 893-2793 Bldg Insp scheduled before 2pm available next business day. ------Application Number . . . . . 15-50037326 Date 11/24/15 Property Address . . . . . . 68887 \*UNASSIGNED Property Zoning . . . . . . RES/AGRI DIST - RA-40 Contractor MORTON JENNIFER L SOUTHERN TRADITIONS CONST. 139 NED LANE 780 COKESBURY PARK LN FUQUAY VARINA NC 27526 SWANSBORO NC 28584 (919) 534-2741 Applicant -----SOUTHERN TRADITIONS CONST Structure Information 000 000 48.8X69 SFD 5BDR W/GARAGE CRAWL Flood Zone . . . . . . . FLOOD ZONE X Other struct info . . . . # BEDROOMS 5.00 PROPOSED USE SFD SEPTIC - EXISTING?
WATER SUPPLY
NEW WELL Permit . . . . . BLDG, MECH, ELEC, PLB, INSU PERMIT Additional desc . . Phone Access Code . 1115724
Issue Date . . . 11/24/15 Valuation . . . .
Expiration Date . . 11/23/16 Special Notes and Comments T/S: 10/19/2015 03:07 PM LBENNETT --US 421 SOUTH TURN LEFT ON 27 W - SLIGHT RIGHT ON BRICK MILL RD- CONTINUE ON W HAMER ST - LEFT ON S MCKINLEY ST - TAKE

HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65