Initial Application	Date: 10/20/2015
• • •	

on same lot

Residential Land Use Application

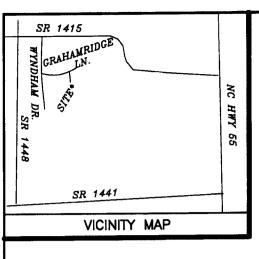
Application #	155003	7378
	CLIF	

Central Permitting 108 E	E. Front Street, Lillington	n, NC 27546 F	SIDENTIAL LAND USE APF Phone: (910) 893-7525 ext:2	Fax: (910) 893-2793	www.harnett.org/permits
Comfort Homes			Mailing Address: P O Box 3		AND USE AFFEIGATION
City: Clayton	State: NC	Zip:_27528 Cor	ntact No: 919 553 3242	Email: comfrthor	mes@aol.com
APPLICANT*: Comfort Homes,	Inc.	_ Mailing Addres	s: <u>P O Box 369</u>		
City: Clayton *Please fill out applicant information if o	State: NC different than landowner	Zip: 27528 Cor	ntact No: 919 553 3242	Email: comfrthor	nes@aol.com
CONTACT NAME APPLYING IN				Phone # 919 422 148	
PROPERTY LOCATION: Subdivis	sion: Wyndham Place	9		Lot #:_12	Lot Size: 1.591
State Road #S	State Road Name: Rav	vls Church Rd		Map Book & P	age: <u>2006/1094</u>
Parcel: 040664 0038 43			PIN: 0664-98-7237.000		
Parcel: 040664 0038 43 Zoning: RA-30 Flood Zone: 2	Watershed: IV	Deed Book	& Page OTP /	Power Company*: D	uke Progress Energy
*New structures with Progress End	ergy as service provide	need to supply p	remise number 62728027	from	m Progress Energy.
PROPOSED USE:					
SFD: (Size 68' x 48'4") # 6			wo bath): Garage:_✓ no_w/ a closet? () yes_(✓		
☐ Mod: (Sizex) # E			/wo bath) Garage: no Any other site built addi		FrameOff Frame
☐ Manufactured Home:SW	VDWTW (Size	•x)	# Bedrooms: Garage:_	(site built?) Deck	:(site built?)
Duplex: (Sizex)	No. Buildings:	No. Bed	rooms Per Unit:		
☐ Home Occupation: # Rooms:	Use:_		Hours of Operation:		#Employees:
☐ Addition/Accessory/Other: (Si	izex) Use:			Closets in a	addition? () yes () no
Water Supply: <u>√</u> County	Existing Well	_ New Well (# of	dwellings using well) *Must have operabl	e water before final
Sewage Supply: <u>✓</u> New Septi	c Tank <i>(Complete Che</i> d	cklist)Exis	sting Septic Tank (Complete	Checklist) Count	y Sewer
Does owner of this tract of land, ov	wn land that contains a	manufactured hor	ne within five hundred feet (5	600') of tract listed above	? () yes (<u><</u>) no
Does the property contain any eas	ements whether underg	round or overhea	d () yes (<u>✔</u>) no		
Structures (existing or proposed):	Single family dwellings:	proposed	Manufactured Homes:	Other (spe	ecify):
Required Residential Property l	Line Setbacks:	Comments:_			•
Front Minimum 35'	Actual				
Rear 25'	500'				
Closest Side 10'	11'				
Sidestreet/corner lot		-			
Nearest Building n/a					

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 401 N, right on i	Rawls Church Rd, left on Atkins road, subdivision	on on left
f permits are granted I agree to conform to all ordinances and laws of the State of North hereby state that foregoing statements are accurate and correct to the best of my know	Carolina regulating such work and the specifications ledge. Permit subject to revocation if false information	of plans submitted
S. La. V. O	10/20/15	irio provided.
Signature of Owner or Owner's Agent	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



Curve	Radius	Length	Chord	Chord Bear.
C1	50.00'	41.15'	40.00'	N 89°46'09" E

IMPERVIOUS SURFACE COVERAGE 2158 SQ.FT. - HOUSE & GARAGE 164 SQ,FT. - WALK & STEPS 2485 SQ.FT. - DRIVEWAY 4807 TOTAL SQ.FT. - PROPOSED COVERAGE PERCENTAGE OF LOT COVERED - 6.9%

PLOT PLAN FOR COMFORT HOMES GRAHAMRIDGE LANE 50' PUBLIC R/W BLACK RIVER TOWNSHIP HARNETT COUNTY C1 NORTH CAROLINA

LOT 12 1.591 ACRES



11.58

BEING 12 OF WYNDHAM PLACE SUBDMISION, PHASE II, RECORDED IN MAP NUMBER 2006-1094.

AREA COMPUTED BY COORDINATE METHOD. NOTE:

RECORDED MAP HAS BEEN PREVIOUSLY TIED TO GRID. NOTE:

NOTE: THIS PROPERTY IS SUBJECT TO EASEMENTS AND RESTRICTIONS OF RECORD.

PRELIMINARY PLAT- NOT FOR RECORDATION, CONVEYANCES, OR SALES.

I, Danny II. Williams, certify that this map was drawn under my supervision; that the boundaries not surveyed are indicated as arrays. From information in Map Number 2006-1094; that the ratio of precision or postingal accuracy is 1:10'000; and that this map neets the requirements of The standards of Practice for Land Surveying in North Carolina (21 NOCC 1000)

This 14TH day of OCTOBER, 2015.

Seal

NOTE 2006-1094.

NOT AN ACTUAL FIELD SURVEY. INTERNATION TRACE FROM MAP NUMBER

05°17' 39" & 386.73'

NAME: Confort bones on APPLICATION #:____

This application to be filled out when applying for a septic system inspection.

Department Application for Improvement Permit and/or Authorization

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 SystemCode 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 <u>undergrowth</u> 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. <u>Please note confirmation number given at end of recording for proof of request.</u>
- 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. <u>Please note confirmation number given at end of recording for proof of request.</u>
- Use Click2Gov or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits

<u>SEPTIC</u>			an be ranked in order of preference, must choose one.	
{} Accepted		Conventional		
{}} Alternative				
	the local health departmen "yes", applicant MUST A		plication if any of the following apply to the property in DOCUMENTATION:	
{}}YES	Does the site contain any	Jurisdictional Wetlands?	unknown	
	Do you plan to have an irr		• •	
{_}}YES { ∑ } NO	Does or will the building of	contain any <u>drains</u> ? Please	explain	
	Are there any existing wel	lls, springs, waterlines or V	Wastewater Systems on this property?	
YES {\(\frac{1}{2}\) NO	Is any wastewater going to	o be generated on the site of	other than domestic sewage?	
{_}}YES {\\ \ \ \ \ \ \ \ NO	Is the site subject to appro	wal by any other Public Ag	gency?	
	Are there any Easements of	or Right of Ways on this p	roperty?	
_)YES NO	Does the site contain any e	existing water, cable, phon	e or underground electric lines? - Only @ Street جنوز ک سعب	5
	If yes please call No Cuts	at 800-632-4949 to locate	the lines. This is a free service.	
Have Read This Application	on And Certify That The Inf	formation 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.				
Understand That I Am So	lely Responsible For The Pro	oper Identification And Lab	peling Of All Property Lines And Corners And Making	

PROPERTYOWNERS OR OWNERS LEGAL' REPRESENTATIVE SIGNATURE (REQUIRED)

10/10

DATE

Comfort Homes, Inc. has an option to purchase Lots 10, 11, 12, and 13 in Wyndham Place Subdivision, recorded in Map Book 2006, Page 1094, Harnett County Register of Deeds.

Jul Bust (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 20th day of October 2015.

Rotary Public)

My commission expires 4/2/17.

Each section below to be filled out by whomever performing work Must be owner or licensed contractor Address company name & phone must match Harnett County Central Permitting
PO Box 65 Lillington NC 27546
910 893 7525 Fax 910 893 2793 www.harnett.org/permits

Application for Residential Building and Trades Permit

C C C C C C C C C C C C C C C C C C C	ng trades Permit
Owner's Name Control Home	
Site Address 54 broken tidas Caro Fug.	Date 10- 30 -15
Directions to job site from Lillington 401 Wath 5	Phone 919-553-3042
Church Rd Jeff on Alling	iast on Rank
or let	ood, Subdivision
Subdivision Wysodbom Place	
Description of Proposed Work Charles alice	Lot 12
Heated SF 1545 Unheated SF 569 Finished Bonus Room Gineral Contractor Informa	Somily how # of Bedrooms 3
General Contractor Informa	2 110 0
comment blomer has	Q
Building Contractor's Company Name	910-223-3943
POBOX 319 Claylor NC 20538	Telephone
7 1001 000	Concrthomes @ aol. Con Email Address
33184	Email Address
License #	
Description of Work Roush in + Trim.out Service Size	COOMES T Polo
Summerfield Electric	
Electrical Contractor's Company Name	9/9-975-0599 Telephone
705 Thunksgiving Val Fire Ded. Rd. Selma NC	· Olophianic
Auditaa	Email Address
22825 License #	
Mechanical/HVAC Contractor Infor	mation
Description of Work Rough in + trimout + other Ventale	Matton Land
Stephenson Heating + Air	
Mechanical Contractor's Company Name	<u>919-329-0686</u> Telephone
343 Shipwash Dr. Garner NC. 27529	relephane
Address	Email Address
18644	and riddiess
License #	
Plumbing Contractor Information	<u>on</u>
Description of Work Rough in + In mouts	_# Baths
Plumbing Contractor's Company Name	919-934-1379
DEC P. A. R. L. D. L. A. L.	Telephone
755 Rack Pillan Rd. Clayton NC 27520 Address	
30823	Email Address
License #	
TJ Insulation Contractor Information	<u>n</u>
latin tosulation - 519 oldfrigtould. Comer	919-661-0999
Insulation Contractor's Company Name & Address	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

Signature of Owner/Contractor Officer(s) of Corporation

Date

Affidavit for Washer L. O.				
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) rfirm(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 cert ficates 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 Confint Hones In				
Sign w/Title Labe Wife with being Date 10-30-15				

19:4

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 368994

Filed on: 10/20/2015

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 (multa support@liensnc.com)

Project Property

Wyndham Place lot 12 54 GRAHAMRIDGE LANE 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