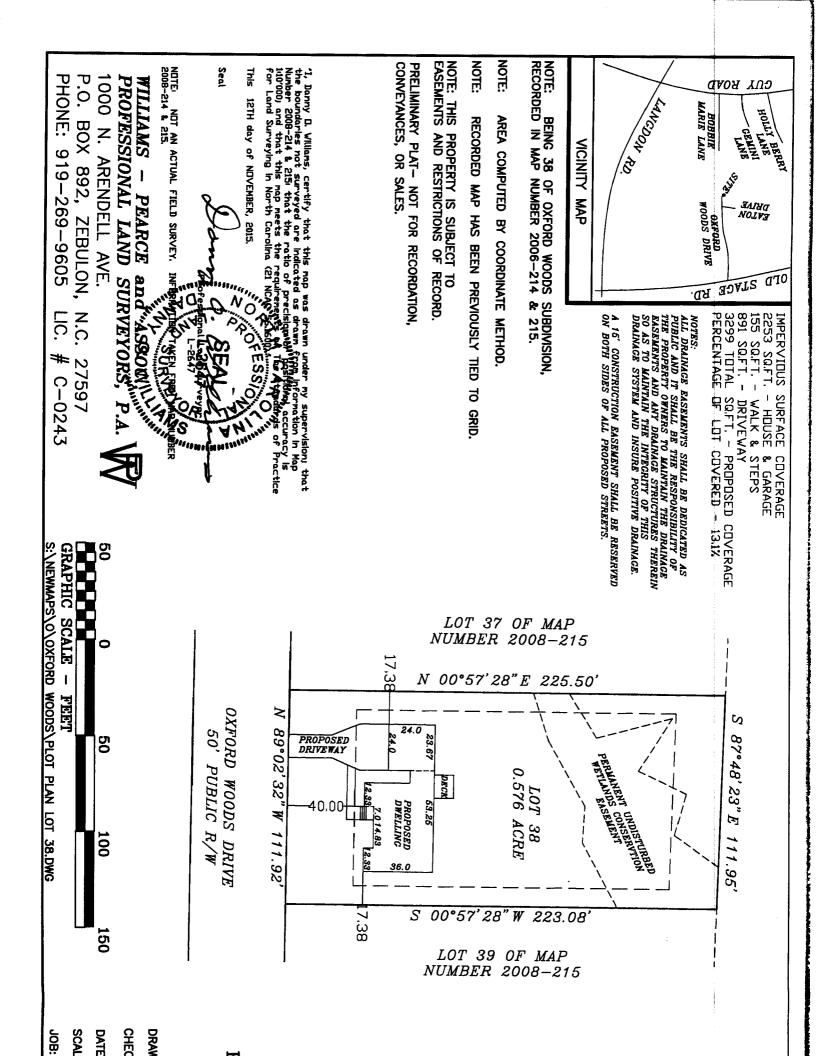
Initial Application Date: 11	.12412015			Application #	\mathcal{L}	411	
Central Permitting	17.9.15 COUNTY	' OF HARNET ton, NC 27546	T RESIDENTIAL LAND USE 5 Phone: (910) 893-7525 e	APPLICATION ext:2 Fax: (910) 8	CU# 93-2793	www.harne	ett.org/permits
"A RECORDED SI	URVEY MAP, RECORDED DEED (OR OFFER TO F	PURCHASE) & SITE PLAN ARE RE				• • •
LANDOWNER: Comfort	Homes, Inc.		Mailing Address: POB	lox 369			
City: Clayton	State: NC	Zip: 27528	Mailing Address: P O B Contact No: 919 553 324	2 Email: CC	mfrthome	es@aol.con	n .
Clavton	- NC	Mailing Ad	ddress: 919 553 3241	2	mfrthome	ns@ool.com	
City: Please fill out applicant inform	State: nation if different than landowner	_ Zip:	ddress: P O Box 369 _ Contact No: 919 553 3242	Email: C		es@aoi.con	
CONTACT NAME APPLYING IN OFFICE: Julian Stewart							
PROPERTY LOCATION:	Subdivision: Oxford Woods	;		Lot#	. 38	Lot Size: .	576 acre
	State Road Name: OI		nd N	Lot #	Book & Pac	= 300g	31442
Parcel: 040692 0017 33			PIN: 0682-98-1847.00				<u></u>
Zoning: RA-30 Flood 2	Zone: Watershed:	/ Deed	Book & Page:/	Power Comp	any*: Duk	e Progress	Energy
			oply premise number 173701				
	(Is the second floor finished	ed? () yes	nt (w/wo bath) Garage:_ () no Any other site built) # Bedrooms: Gara	additions? () yes	(<u>)</u> no		
Duplex: (Sizex) No. Buildings:	No.	. Bedrooms Per Unit:				; ; ;
Home Occupation: # F	Rooms:Use:		Hours of Operation	on:		_ #Employe	es:
Addition/Accessory/Ot	ther: (Sizex) Use	ə: <u> </u>	- SANTA CONTRACTOR OF THE CONT	Ck	osets in add	dition? ()	yes () no
Vater Supply: _ ✓ Cour	nty Existing Well	New Well	(# of dwellings using well	<i>)</i> *Must have	operable v	water before	e final
			_Existing Septic Tank (Compl				
			d home within five hundred fe) no
oes the property contain a	any easements whether unde	rground or ove	erhead (✓) yes () no				: :
tructures (existing or prop	osed): Single family dwellings	s: proposed	Manufactured Homes:	o	ther (speci	fy):	
equired Residential Pro		Commer	nts:				-
ront Minimum 35'	Actual 40'					,	
ear		<u></u>					·
losest Side							
idestreevcorner lot	_						
earest Building <u>n/a</u> n same lot		<u></u>					
	and Use Application		Page 1 of 2			03	/11

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON	NC 210 N; right on Benson Road; right on Old Stage; subdivision on right			
	·			
If permits are granted I agree to conform to all ordinances and laws of	of the State of North Carolina regulating such work and the specifications of plans submitted			
Thereby states that folegoing statements are accurate and correct to t	he best of my knowledge. Permit subject to revocation if false information is provided. 11/24/15			
Signature of Owner or Owner's A	******			

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: Confort Homes, Inc.

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 SystemCcde 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 { Conventional {__} Accepted {__} 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 Juris dictional Wetlands? { }YES 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? IYES Is the site subject to approval by any other Public Agency? Are there any Easements or Right of Ways on this property? Does the site contain any existing water, cable, phone or underground electric lines? - only Street ria {__}}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

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 Complete Site Evaluation Can Be Performed.

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

Each section below to be filled out by whomever performing work Must be owner or licensed contractor Address company name & phone must match Harnet 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

Owner's Name Londont dones buc	Date 11-234	_
Site Address 204 Oxford Words Or Anales	10 20 010	,5 >
Directions to job site from Lillington 100-310 10: 50	11 3333	949
right on Old Sage Subdivision	Expo Bonson Ka	3.'
0 544	an trigger	
Subdivision Oxford Woods	10, 20	
Description of Proposed Work Constanting of Single	Danity of Bedrooms	
Heated SF 150 Unheated SF 572 Finished Bonus Room?		
General Contractor Informatio	Crawl Space Was Slab	
Building Contractor's Company Name	919.553.3242	
PO SON 369 Clare NC 27538	Telephone	_
Address	Comfet homes @aol	coul
33184 License #		
Electrical Contractor Information		
Description of Works Dughin & Thing Dut Service Size	200 Amps T-Pole Yes No	
Electrical Contractor's Company Name	919-975-0599	
205 That coins a light and and all all all	Telephone 20576	
Address Address	Email Address	
<u> </u>	-	
Mechanical//IVAC Contractor Inform	lation	
Description of Work Zouth in thin out of Otton De	aildian	
Sections Waling I Pix	919.329.0686	
Mechanical Contractor's Company Name 343 Shipuxosh Dr. (-2000) Company	Telephone	
Address Address	Email Address	
18644	cinali Address	
License #	de de la companya de	
Description of Work Tough in the first out		
Thomboi's Phinbirg	# Baths 2	
Plumbing Contractor's Company Name	714-550-4833 Telephone	
Sec Il news D. bor noon O Odle)	
Address 3	Email Address	
License #	The state of the s	
Insulation Contractor Information	1	
Insulation Contractors Comments of Sing Song Song Song Song Song Song Song So	1990-100-1009 PIP	
Insulation Contractor's Company Name & Address Gares	Telephone	
*NOTE General Contractor must fill out and gran the asset	To a contract of the contract	

*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
Falle Wate 11.23-15
Signature of Owner/Contracto Officer(s) of Corporation Date
Affidavit for Worker's Compensation N C G S 87-14 The undersigned applicant being the
General Contractor Owner 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 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 Contest Hones In
Sign w/Title Pallie White Coust bar's Date 11-33-15

100

Friday In

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 382676

Filed on: 11/18/2015

Initially filed by: ComfortHomes

Designated Lien Agent

Project Property

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(multo support@liensnc.com)

Oxford Woods lot 38 204 OXFORD WOODS DRIVE ANGIER, NC 27501 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

Plan Box #	b5		Date Job Name_	12·10 Contr	15 CLHW
App #		Valuation_	<u>15840</u> 0	Heated SQ Fe	eet <u> 6 ⁵</u>
Inspections for S	SFD/SFA		•		=
Crawl	Slab	Mono		Basement	·
Footing	Footing	Plum U	nder Slab	Footing	
Foundation	Foundation	Ele. Und	der Slab	Foundation	
Address	Address	Address	5	Waterproofing	
Open Floor	Slab	Mono S	lab	Plum Under slab	
Rough in	Rough In	Rough I	n	Address	
Insulation	Insulation	insulatio	on .	Slab	
Final	Final	Final		Open Floor	
		•		Rough In	
				Insulation	
			•	Final	
Foundation Survey	/	Envir. Health	<u>new</u> o	ther	
	•••••		•••••	**********	
Additions / Other					,
ooting					
oundation					
				•	
lab					٠.
lono		•			
pen Floor				· · · · · · · · · · · · · · · · · · ·	
ough In					
7					
sulation					

November 24, 2015

Comfort Homes, Inc. has an option to purchase Lots 14, 16, 35, 37, and 38 in Oxford Woods Subdivision, recorded in Map Book 2008, Pages 214-215, Harnett County Register of Deeds.



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 24th day of November 2015.

(Notary Public)

My commission expires 4/2/17.

