| Initial Application Date:_ | 12 | 8 | 0 |
|----------------------------|----|---|---|
| | | | • |

| Application # | 51 | 112 | |
|---------------|----|-----|--|
| | | | |

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Central Permitting

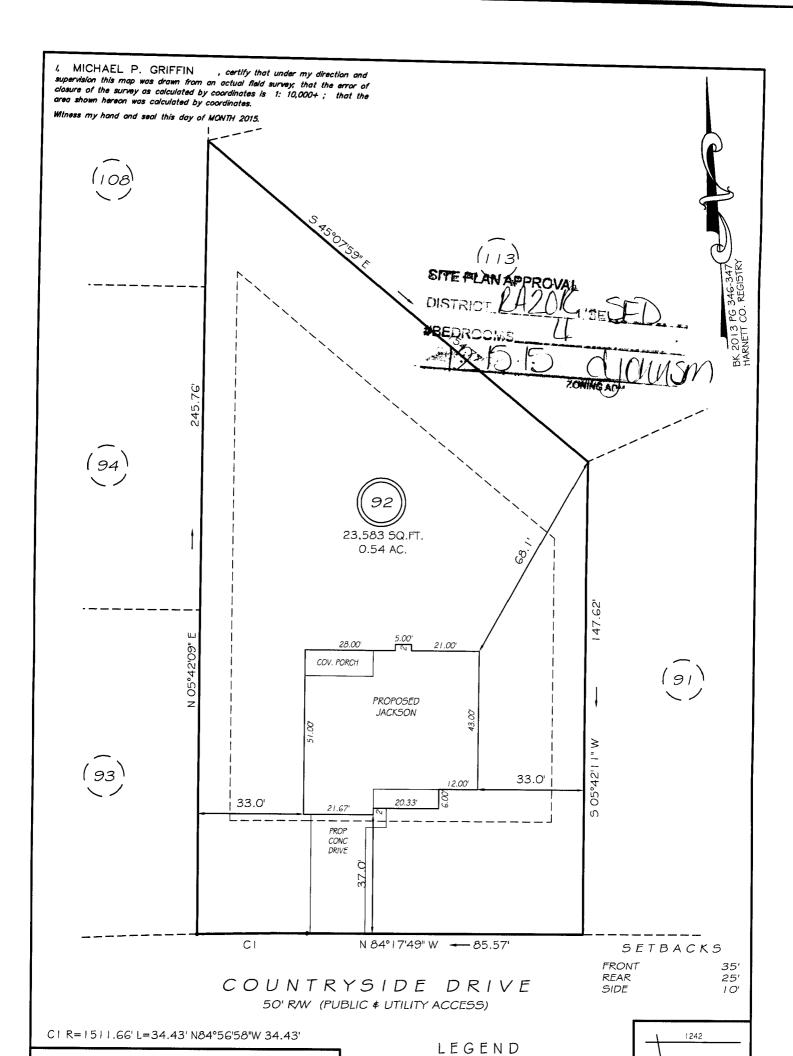
108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits

A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION ____ Mailing Address: 2919 Breezewood Avenue, Ste. 400 LANDOWNER:_H&H Constructors of Fayetteville, LLC. State: NC Zip: 28303 Contact No: 910-486-4864 Fayetteville APPLICANT*: H&H Constructors of Fayetteville, LLC. Mailing Address: 2919 Breezewood Avenue, Ste. 400 __State: NC __Zip: 28303 __Contact No: 910-486-4864 ___Email: leannahair@hhhomes.com *Please fill out applicant information if different than landov _____ Phone # ⁹¹⁰⁻⁴⁸⁶⁻⁴⁸⁶⁴ CONTACT NAME APPLYING IN OFFICE: Leanna Hair PROPERTY LOCATION: Subdivision: Oakmont _____ State Road Name: Docs Road Zoning: RA-20R Flood Zone: Watershed: Deed Book & Page 15/190/ MU *New structures with Progress Energy as service provider need to supply premise number PROPOSED USE: 1) Let Basement(w/wo bath):____ Garage:____ Deck:___ 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:_ _____ Closets in addition? (___) yes (___) no Addition/Accessory/Other: (Size ____x___) Use:_____ Water Supply: _____ County _____ Existing Well _____ New Well (# of dwellings using well ______) *Must have operable water before final Sewage Supply: Vew 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: Proposed Other (specify):____ Manufactured Homes:____ Required Residential Property Line Setbacks: Comments: Minimum 35 Front 25 Rear 5/10 Closest Side Sidestreet/corner lot **Nearest Building** on same lot

| SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: | Take Hwy. 27 to Docs Road, turn left, go about 1.5, turn let into | | |
|---|---|--|--|
| subdivision. | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| If permits are granted I agree to conform to all ordinances and laws of I hereby state that foregoing statements are accurate and correct to the Signature of Owner or Owner's Agreements | f the State of North Carolina regulating such work and the specifications of plans submitted. he best of my knowledge. Permit subject to revocation if false information is provided. | | |
| Signature of Owner of Switch a Ag | part | | |

^{***}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**



| Oak | mont | - Lot-92 191 Countryside DR. |
|---|--|--|
| NAME: | 14 H COO | Structors of Fay. UC. APPLICATION#: |
| Count IF THE INF PERMIT Of depending to Envir A lir P If ev | ty Health Deformation In R AUTHORIZA' apon documentation 10-893-7525 commental Health property in the smust be collece "orange had buildings, so lace orange Exproperty is the valuation to be all lots to be a per failure to un | *This application to be filled out when applying for a septic system inspection.* epartment Application for Improvement Permit and/or Authorization to Construct I THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT TION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration ion submitted. (Complete site plan = 60 months; Complete plat = without expiration) |
| 80 • U • Fright • P • D • Ari if gi • U SEPTIC | oo (after selection of the confirmation number of the confirmation number of the confirmation and the confirmation of the conf | cting notification permit if multiple permits exist) for Environmental Health inspection. Please note imber given at end of recording for proof of request. or IVR to verify results. Once approved, proceed to Central Permitting for permits. alth Existing Tank Inspections Code 800 astructions for placing flags and card on property. spection by removing soil over outlet end of tank as diagram indicates, and lift lid straight up (in the put lid back in place. (Unless inspection is for a septic tank in a mobile home park) LIDS OFF OF SEPTIC TANK g outlet end call the voice permitting system at 910-893-7525 option 1 & select notification permit in the proof of request. or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits. |
| | | on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one. |
| {} Acc | • | {} Innovative {} Conventional {} Any |
| The application. 1 | ant shall notify | {}} Other the local health department upon submittal of this application if any of the following apply to the property in "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION: |
| {}}YES | { <u>X</u> } NO | Does the site contain any Jurisdictional Wetlands? |
| {}}YES | { ∠ } NO | Do you plan to have an <u>irrigation system</u> now or in the future? |
| {}}YES | { <u>X</u> } NO | Does or will the building contain any drains? Please explain. |
| {}}YES | { <u>\X`</u> } NO | Are there any existing wells, springs, waterlines or Wastewater Systems on this property? |
| {}}YES | {X_}} 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 | { <u>⊁</u> } 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.

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

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

| | Λ |
|--|--|
| Owner's Name: HE H CONStructors of Faye | Hev, 16, UCDate: 126/16 |
| Site Address: 345 Cherry Hill Drive | Phone: 910-4810-4804 |
| Directions to job site from Lillington: Take Hwy 27+0 | Docs Rd, Turn |
| left, go about 15 miles. Turr | left into |
| Subdivision. | |
| Subdivision: Oakmont. | Lot: <u>92</u> |
| Description of Proposed Work: New Single Family | 1 Dwell # of Bedrooms: 3 |
| Heated SF: <u>2711</u> Unheated SF: <u>643</u> Finished Bonus Room? <u>General Contractor Information</u> | Crawl Space: Slab: |
| HE H Constructors of Fagetherile, U | 7910-486-4864 |
| building Contractor's Company Name | I CIEDI IONE |
| Address NC 2833 | meaganbradshaw Chhhomes |
| Address ALC 28303 | Email Address |
| License # | |
| Electrical Contractor Informatio | |
| | Amps T-Pole: V Yes No |
| Electrical Contractor's Company Name | 919-776-5144 Telephone |
| 901 Chathan Street Sanford NC | |
| Address 37330 | electricoppe e windstrewn, net. Com Email Address |
| 21326_ | |
| License # Mechanical/HVAC Contractor Inform | nation |
| Description of Work | |
| Carolina Comfort Air, Inc | 919-934-1000 |
| Mechanical Contractor's Company Name | Telephone |
| | |
| 5212 US Hwy 70 Bus Clayton NC | Cardinacomfortair Qualios. Co |
| Address | Carolina Comfortair Pyahoo. Co Email Address |
| Address 37530 | Carolina Comfortair Pyahoo. Co Email Address |
| Address | Email Address |
| Address <u>39071 H-3-1</u> License # | Email Address |
| Address 37530 License # Plumbing Contractor Information Description of Work | Email Address on _# Baths 3 |
| Address 37530 License # Plumbing Contractor Information Description of Work Vance Johnson Plumbing Co, Inc Plumbing Contractor's Company Name | Email Address on # Baths C(10-404-6718 Telephone |
| Address 37530 License # Plumbing Contractor Information Description of Work Vance Johnson Plumbing Co, Inc Plumbing Contractor's Company Name 3242 mid Pine Rd. Fay. NC 28306 | Email Address on # Baths 3 CIO-404-6718 Telephone Vanish noon Curolumbing Com |
| Address 37530 Description of Work Vance Johnson Plumbing Contractor Information Plumbing Contractor's Company Name 3242 mid Pine Rd. Fay. NC 28306 Address | Email Address on # Baths CIO-404-6718 Telephone |
| Address 37530 Plumbing Contractor Information Description of Work Vance Johnson Plumbing Co, Inc Plumbing Contractor's Company Name 3242 mid Pine Rd. Fay. NC 28306 Address 07756 P-1 License # | Email Address on # Baths 3 C10-404-6712 Telephone Vanish noone Uplumbing Com Email-Address |
| Address 37530 Plumbing Contractor Information Description of Work Vance Johnson Plumbing Co, Inc Plumbing Contractor's Company Name 3242 mid Pine Rd. Fay. NC 28306 Address 07756 P-1 License # Insulation Contractor Information | Email Address on # Baths 3 CIO-404-6710 Telephone Van Johnson Cyplumbing Com Email-Address |
| Address 27530 Plumbing Contractor Information Description of Work Vance Johnson Plumbing Co, Inc Plumbing Contractor's Company Name 3242 Mid Pine Rd. Fay. NC 28306 Address 07756 P-1 License # Insulation Contractor Information True Att Joseph Contractor Information Insulation Contractor Information True Att Joseph Contractor Information Address Contractor Information Information Information Information Information True Att Joseph Contractor Information Information Informatio | Email Address on # Baths 3 CIO-404-6718 Telephone Vanish none Uplumbing Com Email-Address |
| Address 37530 Plumbing Contractor Information Description of Work Vance Johnson Plumbing Co, Inc Plumbing Contractor's Company Name 3242 mid Pine Rd. Fay. NC 28306 Address 07756 P-1 License # Insulation Contractor Information | # Baths 3 CIO-404-6712 Telephone Wanch noon Cyplumbing Com Email-Address |

*NOTE: General Contractor / owner 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.

| 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. |

permitting Coordinatione:

Company or Name: HEH Constructors of Fayetteville, LU

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 390467

Filed on: 12/08/2015

initially filed by: meaganbradshaw

Designated Lien Agent

First American Title Insurance Company

Online: 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

Lillington, NC 27546 Harnett County

Project Property

OKM092 Lot 92 Oakmont 191 COUNTRYSIDE DRIVE

1-2 Family Dwelling

Property Type

Owner Information

H&H Constructors, Inc. 2919 Breezewood Avenue Ste.400 Fayetteville, NC 28303

United States

Email: leannahair@hhhomes.com

Phone: 910-486-4864

Date of First Furnishing

09/18/2015

View Comments (0)

Technical Support Hotline: (888) 690-7384

Print & Post



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.