

Initial Application Date: 1-13-15

Application # 1650037845

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: EMPIRE INVESTMENT GROUP Mailing Address: 8129 STILLBREEZE DR  
City: FUGUAY-VARINA State: NC Zip: 27526 Contact No: 919-868-5150 Email: MARANAHHOMES@aol.com

APPLICANT\*: MARANAH CUSTOM HOMES Mailing Address: 8129 STILLBREEZE DR  
City: FUGUAY-VARINA State: NC Zip: 27526 Contact No: 919-868-5150 Email: MARANAHHOMES@aol.com  
\*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: MARTY SCOTT Phone # 919-868-5150

PROPERTY LOCATION: Subdivision: QUAIL GLEN Lot #: 26 Lot Size: .61  
State Road # \_\_\_\_\_ State Road Name: SEWER COURT/50 SETHER CT Map Book & Page: 2007, 635-638  
Parcel: 110662 0022 29 PIN: 0662-03-4222.000  
Zoning: RA-30 Flood Zone: - Watershed: WS-IV Deed Book & Page: 2911, 608 Power Company\*: DUKE PROGRESS

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

**PROPOSED USE:**

- SFD: (Size 45 x 60) # Bedrooms: 4 # Baths: 3 Basement(w/wo bath): \_\_\_\_\_ Garage:  Deck:  Crawl Space:  Slab: \_\_\_\_\_ Monolithic Slab: \_\_\_\_\_  
(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): \_\_\_\_\_

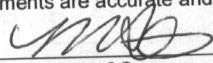
**Required Residential Property Line Setbacks:**

Front	Minimum	Actual
	<u>35</u>	<u>36.5</u>
Rear	<u>25</u>	<u>91.3</u>
Closest Side	<u>10</u>	<u>20.9</u>
Sidestreet/corner lot	<u>25</u>	<u>35.1</u>
Nearest Building on same lot	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

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

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: HWY 210 NORTH, LEFT ON  
HARNETT CENTRAL RD, LEFT ON ENGLISH SPRINGER, RIGHT ON  
SETTER COURT

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.

  
\_\_\_\_\_  
Signature of Owner or Owner's Agent

1/13/16  
\_\_\_\_\_  
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: MARANAH CUSTOM 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 # 013822-LB  
1-14-16

**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.**

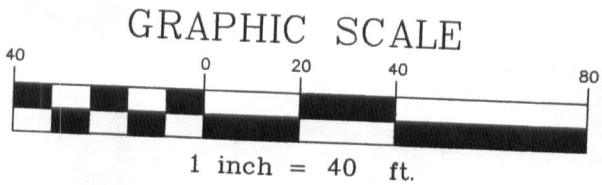
\_\_\_\_\_  
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

1/13/16  
DATE

# MARANAH CUSTOM HOMES

LOT 26, QUAIL GLEN SUBDIVISION, MAP# 2007 PAGES 635-638  
BLACK RIVER TOWNSHIP HARNETT COUNTY NORTH CAROLINA

SCALE: 1" = 40'



SITE PLAN APPROVAL

DISTRICT RA-30 USE SFD

#BEDROOMS 4

Date 1-13-16 Zoning Administrator LB

SETTER COURT  
50' PUBLIC R/W

ENGLISH SPRINGER DRIVE  
50' PUBLIC R/W

27

26

25

20.00' S86°35'34"W 138.00'

24

ADDRESS:  
SETTER COURT  
ANGIER, N.C. 27501

AREA  
26,452 sq. ft.  
0.61 acres





09/09/11

Application #

1650037845

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 EMPIRE INVESTMENT GROUP LLC Date 2/16/16

Site Address \_\_\_\_\_ Phone \_\_\_\_\_

Directions to job site from Lillington ~~WEST~~ NORTH ON 210 LEFT ON HARNETT CENTRAL RD LEFT OF ENGLISH SPRINGER

Subdivision QUAIL GLEN Lot 26

Description of Proposed Work NEW RESIDENTIAL # of Bedrooms 4

Heated SF 2704 Unheated SF 1296 Finished Bonus Room? NO Crawl Space  Slab

**General Contractor Information**

MARANAH CUSTOM HOMES INC

Building Contractor s Company Name

8129 STILLBREEZE DR FUQUAY-VARINA

Address 59752

License # \_\_\_\_\_

919-868-5150

Telephone

MARANAHOMES@aol.com

Email Address

**Electrical Contractor Information**

Description of Work NEW RESIDENTIAL Service Size 200 Amps T-Pole  Yes  No

MABRY'S ELECTRIC

Electrical Contractor s Company Name

791 MABRY RD ANGLIER

Address 150770

License # \_\_\_\_\_

919-639-4987

Telephone

Email Address

**Mechanical/HVAC Contractor Information**

Description of Work NEW RESIDENTIAL

CASEY SERVICES

Mechanical Contractor s Company Name

4900 PURNELL RD WAKE FOREST

Address 10540 H3

License # \_\_\_\_\_

919-556-3338

Telephone

Email Address

**Plumbing Contractor Information**

Description of Work NEW RESIDENTIAL # Baths 4

JC WILKINS PLUMBING

Plumbing Contractor s Company Name

840 MASSENGILL FOND RD ANGLIER

Address 106421P1

License # \_\_\_\_\_

919-639-6201

Telephone

Email Address

**Insulation Contractor Information**

INSULATING INC

Insulation Contractor s Company Name & Address

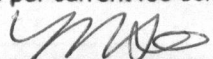
919-772-9000

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

  
Signature of Owner/Contractor/Officer(s) of Corporation

2/16/16  
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 MARANAH CUSTOM HOMES, INC

Sign w/Title  PRESIDENT Date 2/16/16

**DO NOT REMOVE!**

**Details: Appointment of Lien Agent**

Entry #: 419430

Filed on: 02/16/2016

Initially filed by: maranah6703!

**Designated Lien Agent**

Chicago Title Company, LLC

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 26 Quail Glen  
angier, NC 27501  
Harnett County

**Property Type**

1-2 Family Dwelling

**Date of First Furnishing**

02/16/2016

**Owner Information**

scott marty  
8129 stillbreeze dr  
fuquay varina, NC 27526  
United States  
Email: [maranahomes@aol.com](mailto:maranahomes@aol.com)  
Phone: 919-868-5150

**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.

Application Number . . . . . 16-50037845 Page 2  
Property Address . . . . . 50 SETTER CT Date 2/23/16  
PARCEL NUMBER . . . . . 11-0662- - -0022- -29-  
Application description . . . CP NEW RESIDENTIAL (SFD)  
Subdivision Name . . . . . QUAIL GLEN PH1 32LOTS  
Property Zoning . . . . . PENDING

Permit . . . . . BLDG, MECH, ELEC, PLB, INSU PERMIT

Additional desc . . .  
Phone Access Code . . . 1127158

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
10	101	B101	R*BLDG FOOTING / TEMP SVC POLE	_____	___/___/___
20	103	B103	R*BLDG FOUND & TEMP SVC POLE	_____	___/___/___
20-30	814	A814	ADDRESS CONFIRMATION	_____	___/___/___
30-999	105	B105	R*OPEN FLOOR	_____	___/___/___
30	104	B104	R*FOUND & SETBACK VERIF SURVEY	_____	___/___/___
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.

Application Number . . . . . 16-50037845 Date 2/23/16  
Property Address . . . . . 50 SETTER CT  
PARCEL NUMBER . . . . . 11-0662- - -0022- -29-  
Application type description CP NEW RESIDENTIAL (SFD)  
Subdivision Name . . . . . QUAIL GLEN PH1 32LOTS  
Property Zoning . . . . . PENDING

Owner

-----  
EMPIRE INVESTMENTS GROUP LLC  
PO BOX 1528  
FUQUAY VARINA NC 27526

Contractor

-----  
MARANAH CUSTOM HOMES, INC.  
8129 STILLBREEZE DR.  
FUQUAY VARINA, NC  
FUQUAY VARINA NC 27526  
(919) 868-5150

Applicant

-----  
MARANAH CUSTOM HOMES  
8129 STILL BREEZE DR  
FUQUAY VARINA NC 27526  
(919) 868-5150

--- Structure Information 000 000 45X60 SFD 4BDR W/GARAGE W/DECK CRAWL  
Flood Zone . . . . . FLOOD ZONE X  
Other struct info . . . . . # BEDROOMS 4.00  
PROPOSED USE SFD  
SEPTIC - EXISTING? NEW SEPTIC  
WATER SUPPLY COUNTY

Permit . . . . . BLDG, MECH, ELEC, PLB, INSU PERMIT  
Additional desc . . .  
Phone Access Code . . . 1127158  
Issue Date . . . . . 2/23/16 Valuation . . . . . 0  
Expiration Date . . . 2/22/17

Special Notes and Comments  
T/S: 01/13/2016 01:56 PM LBENNETT --  
50 SETTER CT  
HWY 210 N - LEFT ON HARNETT CENTRAL RD  
- LEFT ON ENGLISH SPRINGER - RIGHT ON  
SETTER CT  
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