Initial Application D	ate: 3-1	1-	14	

Residential Land Use Application

Application # _	450038222
	CU#

Central Permitting

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION 108 E. Front Street, Lillington, NC 27546

Phone: (910) 893-7525 ext:2

Fax: (910) 893-2793 www.harnett.org/permits

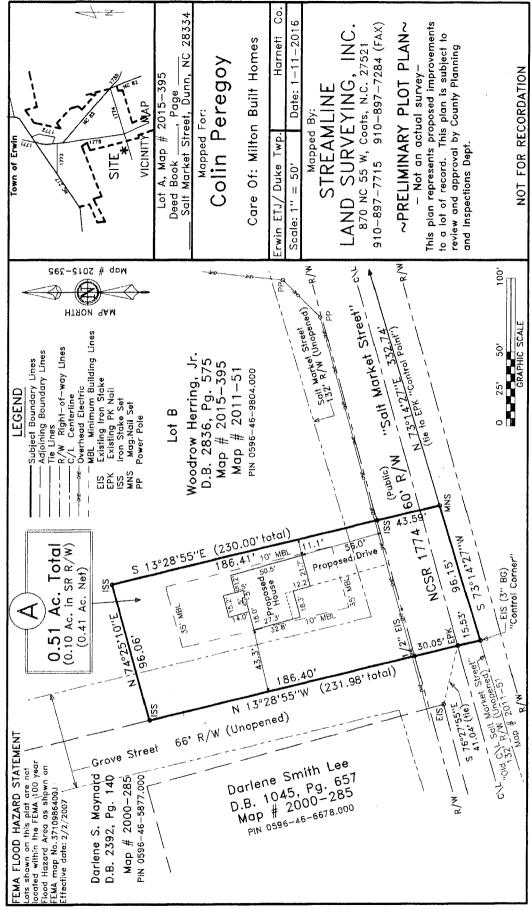
03/11

\*\*A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION\*\* Mailing Address:\_\_\_\_ Contact No: \_\_\_\_\_ Email: State: APPLICANT\*: STEPHEN T. MILTON Mailing Address: 3183 US 421 N., LILLINGTON State: NC Zip: 7754 Contact No: 910, 303, 1967 Email: CONTACT NAME APPLYING IN OFFICE: STEPHEN T. MILTON Phone # 910.303.1967 PROPERTY LOCATION: Subdivision: Lot #: A Lot Size: 4/ Acce State Road Name: SALT MARKET ST. Map Book & Page: ZCIS / 395 State Road # 1774 0 hsq 6 018601 PIN: 0596-40-8765.000 Zonind Flood Zone: Watershed: A Deed Book & Page: OTP Power Company\* PROGRESS \*New structures with Progress Energy as service provider need to supply premise number PROPOSED USE: SFD: (Size 40 x 60 ) # Bedrooms: 3 # Baths: Basement(w/wo bath): Garage: Deck: Crawl Space: Slab: Monolithic (Is the bonus room finished? (\_\_\_) yes (\_\_\_) no w/ a closet? (\_\_\_) yes (\_\_\_) no (if yes add in with # bedrooms) \_) # 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 County \_\_\_\_\_ Existing Well \_\_\_\_\_ New Well (# of dwellings using well \_\_\_\_\_\_) \*Must have operable water before final Sewage Supply: V 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 (X) no Does the property contain any easements whether underground or overhead ( ) yes ( ) no Structures (existing or proposed): Single family dwellings: OCOPOSed Manufactured Homes: Other (specify): Required Residential Property Line Setbacks: Comments: Actual 56 Minimum 35 Front 70 Rear Closest Side Sidestreet/corner lot 20 **Nearest Building** on same lot

SPECIFIC DIRE	ECTIONS	TO THE P	ROPERTY	FROM LILLING	TON:	KE 4	21 5	. Tow	ARDS	DUNN.
TURN	RIG		AT	LIGHT		BOERLI		ALLE	Y TO	WARDS
ERWI	N.	<u> ۲</u>	EGHT	LEFT	OTUO	IRIS	BRYK	WT RD	, SL	IGHT
RIGH	T 0	NTO	C +	TCORA	RD.	TURN	R-	C 6-17	ONTO	SALT
MAR	KET	S.	Τ-	House	WILL	BE	8~	THE	RIGH!	Γ
		4	-forms to all	ordinanoon and Is	ous of the State	of North Caroli	na regulatir	ig such work a	nd the specifica	ations of plans submitted.
If permits are gi I hereby state the	ranted i ag hat foregoi	ree to cor	ents are ac	curate and correc	t to the best of	my knowledge.	Permit sub	ject to revocati	on if false infor	mation is provided.
		1	やフ	25				3-11-16	_	
		Si	gnature 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.\*\*\*

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



NAME:				APPLICATION #:
		*This application to be	filled out when applying	for a septic system inspection.*
County	Health D	epartment Applicat	tion for Improvement	t Permit and/or Authorization to Construct
IF THE INFO	RMATION II	N THIS APPLICATION IS:	FALSIFIED, CHANGED, O	R THE SITE IS ALTERED. THEN THE IMPROVEMENT
PERMIT OR	AUTHORIZA on documental	TION TO CONSTRUCT S	HALL BECOME INVALID.	The permit is valid for either 60 months or without expiration ete plat = without expiration)
910	)-893-7525	option 1	me pian – 60 months, Compre	CONFIRMATION #
		ealth New Septic Syst	temCode 800	
• All	property i	rons must be made v	visible. Place "pink pro	perty flags" on each corner iron of lot. All property
line	s must be c	learly flagged approxim	nately every 50 feet bety	ween corners.
• Pla	ce orange huildings s	nouse corner flags" at	each corner of the prope	osed structure. Also flag driveways, garages, decks developed at/for Central Permitting.
• Pia	ce orange E	Environmental Health c	ard in location that is ea	sily viewed from road to assist in locating property.
<ul> <li>If p</li> </ul>	roperty is th	nickly wooded, Environ	mental Health requires t	that you clean out the <b>undergrowth</b> to allow the soi
eva	lluation to b	e performed. Inspector	rs should be able to wall	k freely around site. <i>Do not grade property</i> .
• All	lots to be a	<u>addressed within 10 b</u>	ousiness days after co	nfirmation. \$25.00 return trip fee may be incurred
• Afte	er preparing	proposed site call the	voice permitting system	property lines, etc. once lot confirmed ready.  at 910-893-7525 option 1 to schedule and use code
800	(after sele	cting notification permi	it if multiple permits exis	st) for Environmental Health inspection. Please note
<u>con</u>	<u>ifirmation nu</u>	umber given at end of re	recording for proof of reg	quest.
				eed to Central Permitting for permits.
			<u>spections</u> Code 800 flags and card on proper	***
• Pre	pare for ins	spection by removing s	soil over <b>outlet end</b> of	tank as diagram indicates, and lift lid straight up ( <i>i.</i>
pos	<i>sible</i> ) and t	hen <b>put lid back in pi</b> a	ace. (Unless inspection i	is for a septic tank in a mobile home park)
		LIDS OFF OF SEPTIC 1		
				at 910-893-7525 option 1 & select notification permit
		recording for proof of r		lealth inspection. Please note confirmation number
				ed to Central Permitting for remaining permits.
SEPTIC				
				can be ranked in order of preference, must choose one.
{_}} Accep			( Conventional	
{}} Altern	ative	{}} Other		
The applican	t shall notify	the local health departme	ent upon submittal of this a	application if any of the following apply to the property in
question. If t	the answer is	"yes", applicant MUST	ATTACH SUPPORTING	G DOCUMENTATION:
{}}YES	I NO	Does the site contain an	ny Jurisdictional Wetlands?	
	(12) NO		irrigation system now or in	
	12/10 12/10	•		
{}}YES	1/		ng contain any <u>drains</u> ? Plea	•
{}YES	{ NO			r Wastewater Systems on this property?
{}}YES	{∑} NO	, ,	•	e other than domestic sewage?
{_}}YES {_∕}YES	{ <b>⊻</b> } NO		proval by any other Public	•
	{_} NO	·	ts or Right of Ways on this	• • •
{}}YES	{√} NO	Does the site contain an	y existing water, cable, ph	one or underground electric lines?
		If yes please call No Co	uts at 800-632-4949 to loca	ate the lines. This is a free service.
Have Read	This Applicat	ion And Certify That The	Information Provided Here	in 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. 1-8-16 DATE

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)



# Town of Erwin

# Zoning Application & Permit Planning & Inspections Department · 100 West F St., Erwin, NC 28339

Permit #

V 910-897-5140 · Fax 910-897-5543

Rev Mar2015

Each application should be submitted with an attached plot/site plan with the proposed use/structure showing lot
shape, existing and proposed buildings, parking and loading areas, access drives and front, rear, and side yard
dimensions.

shape, existing and pr	oposed build	ings, parking and load	ing areas, acces	ss drive	es and front, rear	and side yard
dimensions.	No:11 0	11	I P		15 1	
Name of Applicant		wilt Homes	Property Ow		Moodrow H	
Home Address	3183 Hw	y 421 N	Home Addre		4035 161h	Street
City, State, Zip	Lillington	n'c 27546	City, State, Z	Zip	Erwin MC	28339
Telephone	910-30	3-1967	Telephone		919-820-	
Email	Stophentmil	tono moil. com	Email			
Address of Proposed	Property	116 Salt Morket	Street Di	Onn Onn	nc 28334 ed Project Cost #	
Parcel Identification	Number(s) (P		5-000 E	Estimate	ed Project Cost	000 OXI
What is the applicant the proposed use of t		build / what is	Sinde fomili	م اوج	denial 11/2	Story
Description of any prop to the building or prope		nents Construct			nily dwelling	
What was the Previou			vacont-sub	91919e	d From PIN ó	596-46-9804 - 0c
Does the Property Ac			yes			
Number of dwelling/	<del></del>	the property already	<del>/</del>		ty/Parcel size	.Slacres
Floodplain SFHA	_Yes √_No	WatershedYes \/	_No Wetland		es No	
MUST circle one that ap	oplies to proper				Or	
		Existing/Proposed Owner/Applicant M	· · · · · · · · · · · · · · · · · · ·			
The undersigned property answers, statements, and and belief. The undersign application. Upon issuan regulations, and the laws The undersigning party a to this application as application as application as application.	other informat ning party undo ce of this perm of the State of I uthorizes the T	ly authorized agent/repre ion herewith submitted a erstands that any incorrec it, the undersigning party North Carolina regulating	sentative thereof re in all respects ct information su agrees to confor g such work and	f certified true and abmitted rm to ald to the s	d correct to the best I may result in the I applicable town of pecifications of pla	of their knowledge revocation of this ordinances, zoning ans herein submitted.
STEPHEN T.	MILTON	$\mathcal{A}$	$\sim$		(- 1 <b>7</b> -	11-
Print Name	7.12210.2	Signature of Owner o	r Representative	-		<u>7Ψ</u>
For Office Has						
For Office Use  Zoning District	R-15	Existing Nonconforming	og Uses or Featu	res		
Front Yard Setback		Other Permits Require	<del></del>		BuildingFi	re MarshalOther
	35'	Requires Town Zonin				ior to C. of O.
Side Yard Setback	10'	Zoning Permit Status	Appro		Denied	
Rear Yard Setback	35'	Fee Paid: 10.00		13.16		ÐC.
Comments Consti	uction of	new residential:				
Signature of Town Repr	esentative:	KD N.V	D	ate App	proved/Denied: 1	13/16
	<del>-</del>					

### Adams Soil Consulting 1676 Mitchell Road Angier, NC 27501 919-414-6761

December 14, 2015 Project # 351

Stephen Milton

1

RE: Soil/Site evaluation for lots #A & #B of the minor subdivision for Woodrow Herring, Jr. and Colin Pergoy located adjacent to adjacent to Salt Market St. in Harnett County, NC.

Mr. Milton:

Adams Soil Consulting (ASC) completed a soils evaluation per your request for the above referenced minor subdivision in Harnett County. The soil/site evaluation was performed using hand auger borings, under moist soil conditions, based on the criteria found in the State Subsurface Rules, 15ANCAC 18A .1900 "Laws and Rules for Sewage Treatment and Disposal Systems".

At the time of the evaluation there was an existing dwelling serviced by a septic system located on Lot #B. No evidence of septic system failure was observed at the time of evaluation. The soils on lot #B contain sufficient suitable soils for conventional or an LPP type repair septic system for the existing single family residence located on the lot for at least one 3-bedroom home. Lot #B contains greater than 10,000 ft² of suitable soils that consist of sandy loam, sandy clay, or clay subsoils that can support a daily loading rate of 0.3-0.6 gallons/day/ft². Lot #A contained greater than 12,000 ft² of potentially suitable soil and could support potentially a 3-bedroom home with a foot print of at least 40' X 40'.

The specific septic systems and loading rates for each lot will be assigned by the Harnett County Health Department. The area for the proposed septic field shall not be impacted by home sites, pools, or garages and shall not be mechanically altered from the natural lay of the land.

The lots will require a detailed soils evaluation by the Harnett County Health Department prior to issuance of any permits. Depending on the location and size of the proposed home, well, garage, pool area etc. a septic system layout may be required before a permit can be issued on the above referenced lots demonstrating available space for a septic system and repair area. Due to the subjective nature of the permitting process and the variability of naturally occurring soils, ASC cannot guarantee that areas delineated as suitable for on-site wastewater disposal systems will be permitted by the governing agency. Only a portion of the property was evaluated per the client's request. It should be noted that a more detailed soils evaluation is needed to access the potential soil constraints that may limit future land subdivision.

Please give me a call if you have any questions. Sincerely,

------

Alex Adams

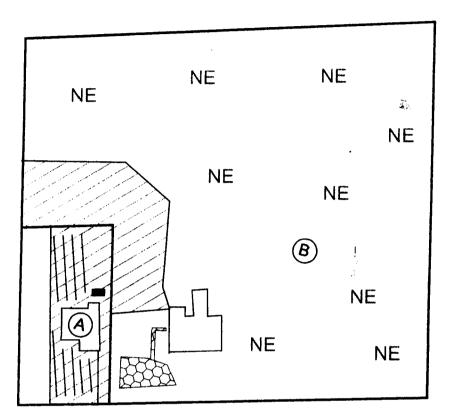
NC Licensed Soil Scientist #1247

Encl: Soil Map

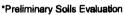


# Preliminary Soils Evaluation Woodrow Herring Jr. and Colin Pergoy Lot A & Lot B Harnett County, NC

باليبية



"Salt Market Street"



\*Soil boundary was sketched onto a preliminary map of the property supplied by the client's surveyor.

\*Not a Survey.

\*Septic system setbacks listed below for new lots.

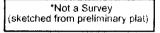
- 1) 10' from property lines.
- 2) 100' from wells for primary systems.
- 3) 50' from surface waters (streams, ponds, lakes).

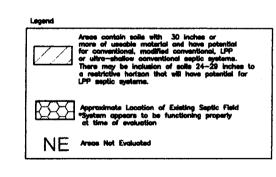
\*Any mechanical disturbances such as grading, cutting and filling

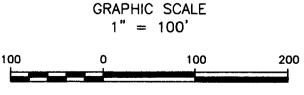
of the suitable soil areas can render areas unsuitable for future septic systems.

\*See accompanying report for additional information.

\*Due to Soil Variability, Adams soil consulting cannot guarantee that the areas shown as suitable will be permitted by the local Health Department.







Adams Soil Consulting 919-414-6761 Project #351 Harnett County Central Permitting PO Box 65 Lillington NC 27546 910 893 7525 Fax 910 893 2793 www harnett org/permits

Application # 1650038227

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**

Owners Name MILTON BUILT HOMES, LLC	Date 3-28-16
Site Address 116 SALT MARKET ST, DUNN	Phone 910, 303, 1967
Directions to job site from Lillington TAKE 421 S TOWARDS	ERWIN. TURN RIGHT
ONTO N 13th ST. AT STOP LIGHT AT BUFFA	LOE LNS BOWLING ALLGY
TAKE LEFT ONTO IRIS BRYANT RD, TAKE RICH	T ONTO CHICORA DD, RIGHT ON MARK
Subdivision	Lot
Description of Proposed Work NEW CONSTRUCTION	
Heated SF 1858 Unheated SF 583 Finished Bonus Room?	YES Crawl Space ✓ Slab n
MILTON BUILDERS,	910.303, 1967
Building Contractor's Company Name	Telephone
Address US UZI N, Lillington NC 27546	Email Address
72052	
License # Electrical Contractor Information	on
Description of Work NEW CONSTRUCTION Service Size	200 Amps T-Pole YesNo
DAWSON'S ELECTRIC	919, 201, 3841
Electrical Contractor's Company Name	Telephone
609 COTTON RD, FV, NC 27526	
Address	Email Address
25948- L	
License #  Mechanical/HVAC Contractor Information  Mechanical/HVAC Contractor Informat	mation
	Trust of t
Description of Work CA NEW CONSTRUCTION	910 (162 676)
CAPE FEAR AC + HEATING	910. 483, 8790 Telephone
Mechanical Contractor's Company Name	•
1139 Robeson St., FAYETTEUILLE, 28305	Email Address
Address	Email Address
07 7 3 2 License #	
Plumbing Contractor Informati	<u>on</u>
Description of Work NEW CONSTRUCTION	# Baths Z . 5
WAGNER PLUMBENG, INC.	910,890,2299
Plumbing Contractor's Company Name	Telephone
SSS TIRZAH DR, Lillington 27546	
Address	Email Address
31576	
License #	
Insulation Contractor Informat	
TATUM INSULATION 579 OLD DRUG STORE	RD 919.661.7255
Insulation Contractor's Company Name & Address GALNER,	Telephone
27529	

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

is as per current fee schedule	
SDT. no	6 3-28-16
Signature of Owner/Contractor/Officer(s) of Corporation	Date
Affidavit for Worker's Comp The undersigned applicant being the	ensation N C G S 87-14
General Contractor Owner	Officer/Agent of the Contractor or Owner
Do hereby confirm under penalties of perjury that the perse set forth in the permit	on(s) firm(s) or corporation(s) performing the work
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 them	ained workers compensation insurance to cover
Has one (1) or more subcontractors(s) who has the covering themselves	own policy of workers compensation insurance
Has no more than two (2) employees and no subco	ntractors
While working on the project for which this permit is sough Department issuing the permit may require certificates of of to issuance of the permit and at any time during the permit carrying out the work	overage of worker's compensation insurance prior
Company or Name MILTON BUILDERS	LLC.
Sign W/Title Show MANAGE	Date 3-28-/L

# **Payment Receipt Confirmation**

Your payment was successfully processed.

# **Transaction Summary**

Description	Amount
Liens NC	\$25.00
Total Amount Paid	\$25.00

#### **Customer Information**

Customer Name Stephen T. Milton

Local Reference ID 148126
Receipt Date 3/28/2016

Receipt Time 02:52:07 PM EDT

### **Payment Information**

Payment Type Credit Card
Credit Card Type AMEX
Credit Card Number \*\*\*\*\*2002
Order ID 17209118
Billing Name Stephen T Milton

## **Billing Information**

Billing Address 3183 US 421 N

Billing City, State LILLINGTON, NC

ZIP/Postal Code 27546

Country US

Phone Number 910-303-1967

Fax Number

This receipt has been emailed to the address below.

**Email Address** 

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 . . . . 16-50038222 Date 4/01/16 Property Address . . . . . 94010 \*UNASSIGNED Property Zoning . . . . . . ERWIN Contractor Owner \_\_\_\_\_\_ OWNER HERRING WOODROW JR 403 S 16TH STREET NC 28339 ERWIN (910) 892-2127 Applicant \_\_\_\_\_\_ HERRING JR WOODROW 403 S 16TH STREET NC 28339 ERWIN Structure Information 000 000 40X60 3BDR CRAWL W/ GARAGE Flood Zone . . . . . . . FLOOD ZONE X 300000.00 Other struct info . . . . # BEDROOMS PROPOSED USE SFD SEPTIC - EXISTING? NEW TANK WATER SUPPLY COUNTY Permit . . . . . BLDG, MECH, ELEC, PLB, INSU PERMIT 0 Valuation . . . . 

and local laws, ordinances & regulations

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 Date 4/01/16 Application Number . . . . 16-50038222

Subdivision Name . . . . . EUGENE LEE HEIRS Property Zoning . . . . . ERWIN

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

Additional desc . .

Phone Access Code . 1133156

#### 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		_/_/_
20	104	B104	R*FOUND & SETBACK VERIF SURVEY		_/_/_
30-999	105	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		_/_/_
50-60	209	E209	R*ELEC TEMP POWER CERT		_/_/
999		H824	ENVIR. OPERATIONS PERMIT		_/_/