

Initial Application Date: 3-30-16

Application # 1650038364

CU# _____

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: Signature Home Builders Mailing Address: 1209 N. Main St

City: Lillington State: NC Zip: 27546 Contact No: 910-892-9299 Email: cshemod.shb@gmail.com

APPLICANT*: _____ Mailing Address: _____

City: _____ State: _____ Zip: _____ Contact No: _____ Email: _____

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: _____ Phone # _____

PROPERTY LOCATION: Subdivision: Bickie L Day Lot #: 5 Lot Size: .65AC

State Road # 1741 State Road Name: Antioch Church Map Book & Page 2013/322

Parcel: 061506 0066 02 PIN: 0596-97-4107.000

Zoning: Enw1 Flood Zone: X Watershed: NA Deed Book & Page: 3382, 485 Power Company*: _____

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

PROPOSED USE:

SFD: (Size 4B-4 SFLP x _____) # Bedrooms: 3 # Baths: 2 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: 1 Manufactured Homes: _____ Other (specify): _____

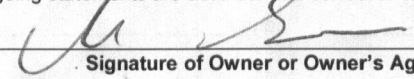
Required Residential Property Line Setbacks:

Front Minimum _____ Actual 50
Rear _____ 25+
Closest Side _____ 25.6
Sidestreet/corner lot _____
Nearest Building on same lot _____

Comments: _____

4128200311 3/30/16
SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: _____

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.



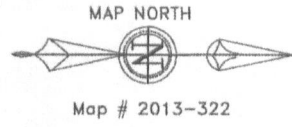
Signature of Owner or Owner's Agent

3/30/16

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

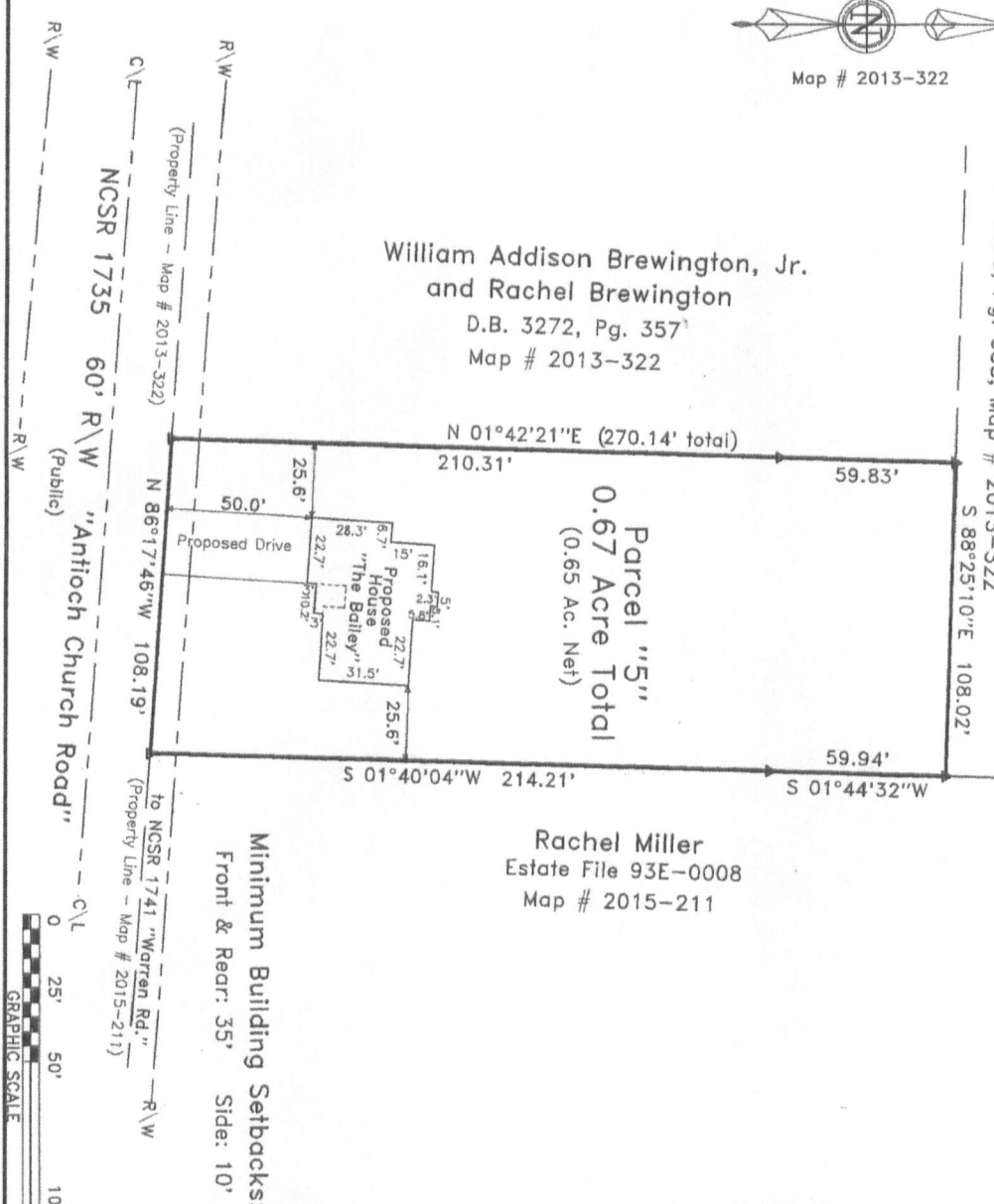


Michael Donald Shean
D.B. 3370, Pg. 588; Map # 2013-322

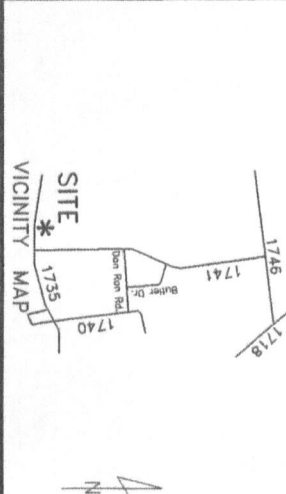
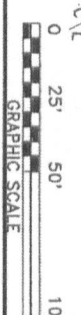
William Addison Brewington, Jr.
and Rachel Brewington
D.B. 3272, Pg. 357
Map # 2013-322

Parcel "5"
0.67 Acre Total
(0.65 Ac. Net)

Rachel Miller
Estate File 93E-0008
Map # 2015-211



Minimum Building Setbacks:
Front & Rear: 35' Side: 10'



Parcel 5 ~ Map # 2013-322
Deed Book 3272, Page 357

Mapped For:
Signature Home Builders, Inc.

Duke Twp. Harnett Co.
Scale: 1" = 50' Date: 3/10/2016

Mapped By:
STREAMLINE LAND SURVEYING, INC.
870 NC 55 W, Coats, N.C. 27521
910-897-7715 910-897-7284 (FAX)

~PRELIMINARY PLOT PLAN~
- Not an actual survey -
This plan represents proposed improvements to a lot of record. This plan is subject to review and approval by County Planning and Inspections Dept.

NOT FOR RECORDATION



Town of Erwin
Zoning Application & Permit
 Planning & Inspections Department

Permit #

Rev Sep2014

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.

Name of Applicant	Signature Home Builders	Property Owner	Signature Home Builders
Home Address	1209 N. Main St.	Home Address	1209 N. Main St.
City, State, Zip	Lillington, NC, 27546	City, State, Zip	Lillington, NC, 27546
Telephone	910-892-9299	Telephone	910-892-9299
Email	cshemod.shb@gmail.com	Email	cshemod.shb@gmail.com

Address of Proposed Property	Antioch Church Rd. Parcel "5"		
Parcel Identification Number(s) (PIN)	0596-97- 1107 ⁴¹⁰⁷	Estimated Project Cost	\$110,000
What is the applicant requesting to build / what is the proposed use of the subject property? Be specific.	172 SFD New Construction		
Description of any proposed improvements to the building or property	New Construction		
What was the Previous Use of the subject property?	Agriculture		
Does the Property Access DOT road?	yes		
Number of dwelling/structures on the property already	0	Property/Parcel size	.67
Floodplain SFHA <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Watershed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Wetlands <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
MUST circle one that applies to property	Existing/ Proposed Septic System Or Existing/Proposed County/City Sewer		

PAID

Owner/Applicant Must Read and Sign

The undersigned property owner, or duly authorized agent/representative thereof certifies that this application and the foregoing answers, statements, and other information herewith submitted are in all respects true and correct to the best of their knowledge and belief. The undersigning party understands that any incorrect information submitted may result in the revocation of this application. Upon issuance of this permit, the undersigning party agrees to conform to all applicable town ordinances, zoning regulations, and the laws of the State of North Carolina regulating such work and to the specifications of plans herein submitted. The undersigning party authorizes the Town of Erwin to review this request and conduct a site inspection to ensure compliance to this application as approved.

MAR 28 2016

TOWN OF ERWIN

<u>Christopher Shemod</u> Print Name	<u>Christopher D. Shemod</u> Signature of Owner or Representative	<u>3/11/16</u> Date
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ck # 12278

For Office Use

Zoning District	R-10	Existing Nonconforming Uses or Features	
Front Yard Setback	35	Other Permits Required	<input type="checkbox"/> Conditional Use <input checked="" type="checkbox"/> Building <input type="checkbox"/> Fire Marshal <input type="checkbox"/> Other
Side Yard Setback	10	Requires Town Zoning Inspection(s)	<input checked="" type="checkbox"/> Foundation <input type="checkbox"/> Prior to C. of O.
Rear Yard Setback	35	Zoning Permit Status	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied
Comments		Fee Paid: \$50.00	Date Paid: 3/29/16

Comments	Construction of single family residence
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Signature of Town Representative: <u>[Signature]</u>	Date Approved/Denied: <u>3/29/16</u>
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NAME: _____

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 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)

3/30/16
DATE

Harnett County Department of Public Health

Well Construction Permit Application

If the information in the application for a Well Construction Permit is *falsified, changed, or the site is altered*, then the Well Construction Permit shall become invalid.

APPLICANT INFORMATION

Signature Home Builders (910) 892-9299
Applicant/Owner Phone Number
1209 N. Main St Lillington, NC 27546
Street Address, City, State, Zip Code

The Applicant must submit a Site Plan. The Site Plan is a map/drawing of the property and must show:

1. existing and/or proposed property lines and easements with dimensions;
2. the location of the facility and appurtenance;
3. the location for the proposed well;
4. the location of existing or proposed sewer lines and/or sewage disposal systems within 100 feet of the proposed well;
5. the location of any existing wells within 100 feet of the property; surface water bodies;
6. above ground and/or underground storage tanks;
7. and any other known sources of contamination within 100 feet of the proposed well site.

The Applicant shall notify the Harnett County Health Director through or by way of the Harnett County Division of Environmental Health if any of the following occur prior to well construction:

1. there is a relocation of the proposed facility;
2. there is a change in the intended use of the facility;
3. there is a need for installing the waste water system in an area other than indicated on the well permit; or
4. there are landscape changed that affect site drainage.

Contact information: Environmental Health Division - 910-893-7547

PROPERTY INFORMATION

Proposed use of well

Single-Family Multifamily Church Restaurant Business Irrigation

Street Address 000 Antioch Church Rd Subdivision/Lot # 5
Parcel # 061506 0066 02 PIN # 0596-97-4107.000

Directions to the Site

I have thoroughly read and completed this Application and certify that the information provided herein is true, complete and correct to the best of my knowledge and is given in good faith. Representatives of the Harnett County Health Department and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable rules.

I understand that I am solely responsible for the proper identification and labeling of all property lines, underground utility lines, and making the site accessible so that a well can be properly constructed according to the permit.

[Signature]
Property Owner's or Owner's Legal Representative Signature Required

3/30/16
Date

09/09/11

Application #

1650038364

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 Signature Home Builders Date 3/31/16
Site Address 00 Antioch Church Rd Parcel "5" Phone 910-892-9299
Directions to job site from Lillington Take 421 S. towards Dunn, then right onto N13th St, then left onto Iris Bryant Rd., then left onto Antioch church Rd. House is on left.
Subdivision Rickie Day Lot 5
Description of Proposed Work Single family residence # of Bedrooms 3
Heated SF 1392 Unheated SF 590 Finished Bonus Room? N Crawl Space Slab

General Contractor Information

Signature Home Builders 910-892-9299
Building Contractor's Company Name Telephone
1209 N. Main St. Lillington, NC 27546 Cshernod.shb@gmail.com
Address Email Address
49431

Electrical Contractor Information

Description of Work Electrical Service Size 200 Amps T-Pole Yes No
R.A. Jackson Electric 919-894-5367
Electrical Contractor's Company Name Telephone
9261 Raleigh Rd Benson, NC 27504
Address Email Address
21144

Mechanical/HVAC Contractor Information

Description of Work HVAC
Custom Heating & Air 910-892-8827
Mechanical Contractor's Company Name Telephone
1001 Denim Pr., Erwin, NC 28334
Address Email Address
12195

Plumbing Contractor Information

Description of Work Plumbing # Baths 2
L.R. Glover Plumbing, Inc 919-820-0026
Plumbing Contractor's Company Name Telephone
P.O. Box 764 Benson, NC 27504
Address Email Address
7958

Insulation Contractor Information

Tatum Insulation II, Inc 919-661-0999
Insulation Contractor's Company Name & Address 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

Ch. Stewart
Signature of Owner/Contractor/Officer(s) of Corporation

3/31/16
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 Signature Home Builders, Inc.

Sign w/Title William F. Doughty, President Date 3/31/16

38364

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 447785

Filed on: 04/08/2016

Initially filed by: larrydaughtry02152

Designated Lien Agent

Investors 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

Project Property

Par#5 Rickie L. Day PIN: 0596-97-4107
000 Antioch Church Rd
Erwin, NC 28339
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

Signature Home Builders

1209 N. Main St.

Lillington, NC 27546

United States

Email: csherrod.shb@gmail.com

Phone: 910-892-9299

Date of First Furnishing

04/08/2016

View Comments (0)

Technical Support Hotline: (888) 690-7384

Plan Box # 00

Date 4-6-16

Job Name Signature

App # 38364

Valuation 134128

SQ Feet 1392

Garage 496

= 1888

Inspections for SFD/SFA

Crawl _____

Slab _____

Mono ✓ _____

Basement _____

Footing	Footing	Plum Under Slab	Footing
Foundation	Foundation	Ele. Under Slab	Foundation
Address	Address	Address	Waterproofing
Open Floor	Slab	Mono Slab	Plum Under slab
Rough In	Rough In	Rough In	Address
Insulation	Insulation	Insulation	Slab
Final	Final	Final	Open Floor
			Rough In
			Insulation
			Final

Foundation Survey _____

Envir. Health ✓ _____

Other _____

Additions / Other

Footing _____

Foundation _____

Slab _____

Mono _____

Open Floor _____

Rough In _____

Insulation _____

Final _____

18352

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	16-50038364	Page	2
Property Address	37282 *UNASSIGNED	Date	4/26/16
PARCEL NUMBER	06-1506- - -0066- -02-		
Application description . . .	CP NEW RESIDENTIAL (SFD)		
Subdivision Name			
Property Zoning	ERWIN		

Permit BLDG,MECH,ELEC,PLB,INSU PERMIT

Additional desc . .

Phone Access Code . 1134436

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
10-30	814	A814	ADDRESS CONFIRMATION	_____	___/___/___
10-999	309	P309	R*PLUMB UNDER SLAB	_____	___/___/___
10-999	205	E205	R*ELEC UNDER SLAB	_____	___/___/___
20-999	114	B114	R*BLDG MONO SLAB/TEMP SVC POLE	_____	___/___/___
30-50	129	I129	R*INSULATION INSPECTION	_____	___/___/___
30-60	425	R425	FOUR TRADE ROUGH IN	_____	___/___/___
30-60	125	R125	ONE TRADE ROUGH IN	_____	___/___/___
30-60	325	R325	THREE TRADE ROUGH IN	_____	___/___/___
30-60	225	R225	TWO TRADE ROUGH IN	_____	___/___/___
40-60	429	R429	FOUR TRADE FINAL	_____	___/___/___
40-60	131	R131	ONE TRADE FINAL	_____	___/___/___
40-60	329	R329	THREE TRADE FINAL	_____	___/___/___
40-60	229	R229	TWO TRADE FINAL	_____	___/___/___
40-60	209	E209	R*ELEC TEMP POWER CERT	_____	___/___/___
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 16-50038364 Date 4/26/16
Intersection
Property Address 37282 *UNASSIGNED
PARCEL NUMBER 06-1506- - -0066- -02-
Application type description CP NEW RESIDENTIAL (SFD)
Subdivision Name
Property Zoning ERWIN

Owner Contractor

SIGNATURE HOME BUILDERS, INC SIGNATURE HOME BUILDERS
1107 W. CUMBERLAND ST 509 W BROAD ST
SUITE 101 DUNN NC 28334
DUNN (910) 892-9299 NC 28334
(910) 892-9299 (910) 892-9299

Applicant

SIGNATURE HOME BUILDERS INC

1209 N MAIN ST
LILLINGTON NC 27546
(910) 892-9299

--- Structure Information 000 000 43.4X55.6 3BDR MONO W/ GARAGE
Flood Zone FLOOD ZONE X
Other struct info # BEDROOMS 3000000.00
PROPOSED USE SFD
SEPTIC - EXISTING? NEW TANK
WATER SUPPLY NEW WELL

Permit BLDG,MECH,ELEC,PLB,INSU PERMIT
Additional desc
Phone Access Code 1134436
Issue Date 4/26/16 Valuation 0
Expiration Date 4/26/17

Special Notes and Comments
T/S: 03/30/2016 04:15 PM JBROCK ----
ANTIOCH CHURCH RD
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

