d Determined to Determine	5	126	/17	
Initial Application Date:_	0	20	(11	

Application #	16-50038372
	-

Application # _	16-200	28.2	14	
	CU#			

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

O	Dames issing
L'entrai	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: 49 Guilford Ct LANDOWNER: Shane Summers State: NC Zip: 28390 Contact No: 717-654-3361 City: Spring Lake APPLICANT\*: Southeastern General Contracting INC Mailing Address: 3059 N Main St Suite 16 City: Hope Mills State: NC Zip: 28348 Contact No: 9104746778
\*Please fill out applicant information if different than landowner Email: drew@southeasterngc.com City: Hope Mills CONTACT NAME APPLYING IN OFFICE: Drew Miller \_\_\_\_\_Lot #:\_\_\_\_\_ Lot Size: 13.8 Acres PROPERTY LOCATION: Subdivision: 2002-1047 \_\_ State Road Name: NC Hwy 210 Parcel: 120548 0016 27 PIN: 0548-30-4812.000 Watershed: \_\_\_\_\_ Deed Book & Page: 3294 / UL7 Power Company\*: Duke Progress \*New structures with Progress Energy as service provider need to supply premise number 21920475 PROPOSED USE: Monolithic SFD: (Size 90 x 48 ) # Bedrooms: 5 # Baths: 3 Basement(w/wo bath): Garage: Deck: Crawl Space: 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: 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: ✓ 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: \_\_\_\_\_\_ Other (specify):\_\_\_\_\_ Other (specify):\_\_\_\_\_ comments: \* Colonial Pipeline easement notated on Required Residential Property Line Setbacks: Front Rear Closest Side Sidestreet/corner lot Nearest Building on same lot

Residential Land Use Application

rye Heville.						
Property				0		
nits are granted I agree to co	onform to all ordinance	s and laws of the Sta	te of North Carolina regu	lating such v	vork and the spec	cifications of plans subj
by state that foregoing stater	ignature of Owner or	2	<del>st my knowl</del> edge. Permit	Subject to re	6/17	information is provided.

\*\*\*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\*\*

NA	ME: _	•	APPLICATION #: 16-50038372
	Count	w Hoolth l	*This application to be filled out when applying for a septic system inspection.*  Department Application for Improvement Permit and/or Authorization to Construct
			IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT
PEI	RMIT OF	R AUTHORIZ	ATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration
dep	ending u	pon document 10-893-7525	tation submitted. (Complete site plan = 60 months; Complete plat = without expiration)  CONFIRMATION # 0222 7   -
76			Health New Septic System Code 800
1	• <u>Al</u>	II property	irons must be made visible. Place "pink property flags" on each corner iron of lot. All property clearly flagged approximately every 50 feet between corners.
			e house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks
			swimming pools, etc. Place flags per site plan developed at/for Central Permitting.
			Environmental Health card in location that is easily viewed from road to assist in locating property.
			thickly wooded, Environmental Health requires that you clean out the <u>undergrowth</u> to allow the so be performed. Inspectors should be able to walk freely around site. <b>Do not grade property</b> .
			addressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred
	fo	r failure to	uncover outlet lid, mark house corners and property lines, etc. once lot confirmed ready.
	80	00 (after sel	ng proposed site call the voice permitting system at 910-893-7525 option 1 to schedule and use code lecting notification permit if multiple permits exist) for Environmental Health inspection. Please note
			number given at end of recording for proof of request.
			ov or IVR to verify results. Once approved, proceed to Central Permitting for permits.  Health Existing Tank Inspections Code 800
_			instructions for placing flags and card on property.
	• Pr	repare for in ossible) and	nspection by removing soil over <b>outlet end</b> of tank as diagram indicates, and lift lid straight up ( then <b>put lid back in place</b> . (Unless inspection is for a septic tank in a mobile home park) //E LIDS OFF OF SEPTIC TANK
			ring <b>outlet end</b> call the voice permitting system at 910-893-7525 option 1 & select notification permitting
	if	multiple pe	rmits, then use code 800 for Environmental Health inspection. Please note confirmation number
			of recording for proof of request.
SE	• Us PTIC	se Click2Go	ov or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.
		for authoriza	tion to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.
{_	_} Acce	epted	$\{\_\}$ Innovative $\{\checkmark\}$ Conventional $\{\_\}$ Any
{	} Alte	rnative	{}} Other
The			fy the local health department upon submittal of this application if any of the following apply to the property in
			is "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:
	}YES	{ <b>∡</b> } NO	Does the site contain any Jurisdictional Wetlands?
{	}YES	{ <u>K</u> } NO	Do you plan to have an <u>irrigation system</u> now or in the future?
{_	}YES	{ <u>▶</u> } NO	Does or will the building contain any drains? Please explain.
{	_}YES	{_ <b>X</b> } NO	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
{	}YES	{_ <b>\</b> NO	Is any wastewater going to be generated on the site other than domestic sewage?
{	}YES	{_ <b>L</b> } NO	Is the site subject to approval by any other Public Agency?
{_}	YYES	{_}} 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?

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.

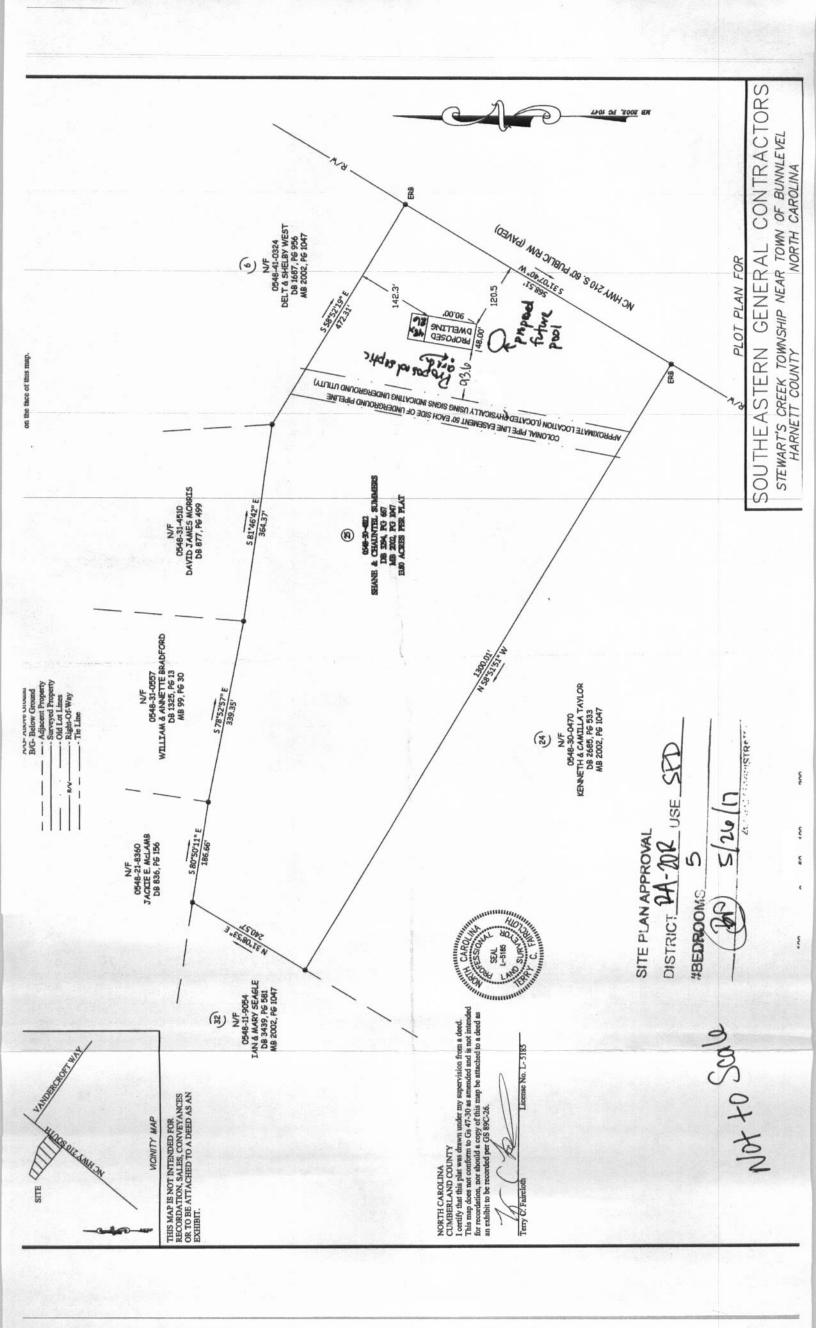
If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service.

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)

DATE





strong roots \* new growth

#### Legal Description:

TR#25 VANDERGRIFT FARM MAP#2002-1047

PID: 120548 0016 27

PIN: 0548-30-4812.000

REID: 0058039

Subdivision: 2002-1047 Deeded Acreage: 13.8 ac

Total Acreage: 13.91064051 ac

Account Number: 1500015299

Owner 1: SUMMERS SHANE E

Owner 2: SUMMERS CHAUNTEL M

Owner Address: 49 GUILFORD CT SPRING LAKE, NC 28390

Property Address: NC 210 S NC

City, State, Zip: , NC,

**Building Count: 0** 

Township Code: 12

Fire Code:

Parcel Building Value: \$0

Parcel Outbuilding Value: \$0

Parcel Land Value: \$33900

Parcel Special Land Value: \$0

Total Value: \$33900

Parcel Deferred Value: \$0

Total Assessed Value: \$33900

Legal Land Units , Unit Type: 13.8, AC

**Harnett County GIS** 

Tax Data Last Modified:

Calculated Land Units / Type: AC ac

Neighborhood: 01200

Actual Year Built:

TotalAcutalAreaHeated: Sq/Ft

Sale Month and Year: 4 / 2015

Sale Price: \$70000

Deed Book & Page: 3294-0667

Deed Date:

Plat Book & Page: 2002-1047

Instrument Type: WD

Vacant or Improved:

QualifiedCode: Q

Transfer or Split: T

Prior Building Value: \$0

Prior Outbuilding Value: \$0

Prior Land Value: \$44100

Prior Special Land Value: \$0

Prior Deferred Value: \$0

Prior Assessed Value: \$44100

Prior Land Units: 13.8 ac



### **CLOSE SEARCH WINDOW**



#### **RETURN TO SEARCH RESULTS**

## License Detail

NUMBER 54325

STATUS Valid

**RENEWAL DATE** 2017-01-17

Name South Eastern General Contracting, Inc.

Address 109 Green St. Ste 300

Fayetteville, NC 28301

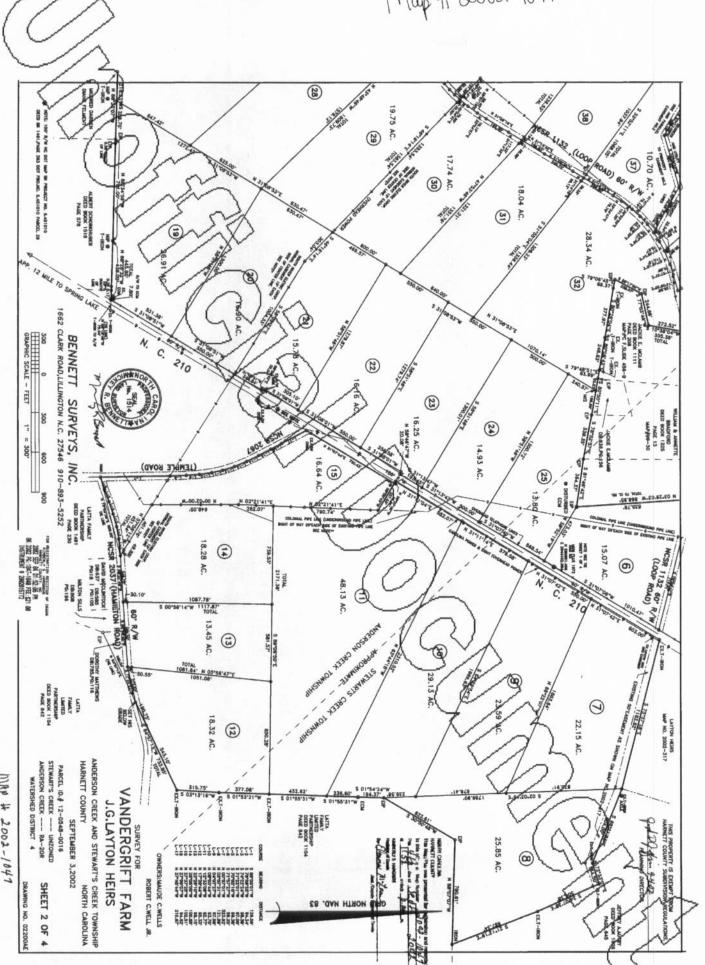
County Cumberland

Telephone (910) 474-6778

**Limitation** Unlimited

Classifications Building

Qualifiers Locklear, Ralphael Tijerina



MAP # 2002-1047

Application #

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

Owners Name Shane o Grauntel Summer	Date 5/26/17
Site Address 4260 NC 210 & Bunnterel NC	
Directions to job site from Lillington Head South on;	210
Property located Drectly actross	from randorcrott
way suld NISAM	
Subdivision	Lot
Description of Proposed Work New Home Construction	# of Bedrooms
Heated SF Unheated SF Finished Bonus Room? _	
General Contractor Information	1 24 424 4225
Southeastern General Centracting	910-474-6778
Building Contractor's Company Name	Telephone drew @ southeasterngc. co.
Building Contractor's Company Name  3059 N Main 54 Suite 16 Hope Mills  Address  NC 28348	Email Address
	Email Address
Electrical Contractor Information	<u>n</u>
	Amps T-Pole YesNo
(MC Electric / Marcon Costa	919)-901-3336
Electrical Contractor's Company Name	Telephone
106 N Lunbard St 101 Clayton	Construction & concertor
	Email Address
License # 27520	
Mechanical/HVAC Contractor Inform	nation
Description of Work	
Coral Dis	(910)-322-7816
Mechanical Contractor's Company Name	
	relephone ceolarrac@gmasl.com
Address Hope m Ms NC 28348	Email Address
30929 Ha/Hz	
License #	
Plumbing Contractor Information	
Description of Work Unders as plumpay House Phundring	( )
Levin Jones Plumbry	(910) -978 - 3288
Plumbing Contractor's Company Narde	Telephone
6879 family St fage Herelle NC Address 28314	Kern jones plumbry a acirrican
Address 283/c/	Email Address
27018 p - 1 License #	
Insulation Contractor Information	on C
Cumberland Insulation 4005 clinton	(910)-484-7118
Insulation Contractor's Company Name & Address	Telephone

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 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 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

Has one (1) or more subcontractors(s) and has obtained workers compensation insurance to cover

Has one (1) or more subcontractors(s) who has their own policy of workers compensation insurance

carrying out the work

Company or Name

covering themselves

Sign w/Title

them

Project Managemente 5/26/17

(.

#### DO NOT REMOVE!

# Details: Appointment of Lien Agent

Entry #: 632462

Filed on: 04/07/2017

Initially filed by: RalphLocklear

#### Designated Lien Agent

Chicago Title Company, LLC

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 (mailtre-support@thensec.com)

#### Project Property

4260 NC 210 S Bunnlevel , NC 28323 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

Shane Summers
49 Guilford Ct
Spring Lake, NC 28390
United States
Email: chauntelsummers@yahoo.com
Phone: 717-654-3361

View Comments (0)

Technical Support Hotline: (888) 690-7384