Initial Application Date:

Application # 105003838

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:__5175 Barbecue Church road LANDOWNER: Calvin Hardee, Jr. State: NC Zip: 27332 Contact No: _____ Email: ____ Sanford APPLICANT*: Weaver Homes, Inc. Mailing Address: 350 Wagoner Drive State: NC Zip: 28303 Contact No: 910-60-2100 Email: cdb1971@gmail.com Fayetteville CONTACT NAME APPLYING IN OFFICE: Dustin Blackwell PROPERTY LOCATION: Subdivision: __ State Road Name: 7935 Broadway Road PIN: 9579-04-4828.000 Parcel: 039579 0064 04 Zoning: RA-20 RFlood Zone: X Watershed: ____ Deed Book & Page: 2300 / 0714 Power Company*: ___ *New structures with Progress Energy as service provider need to supply premise number ______ **PROPOSED USE:** SFD: (Size 70 x 67) # Bedrooms: 3 # Baths: 2.5 Basement(w/wo bath): Garage: Deck: Crawl Space: Slab: 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: _____ Manufactured Homes: _____ Other (specify): _____ Required Residential Property Line Setbacks: Front

Residential Land Use Application

Rear

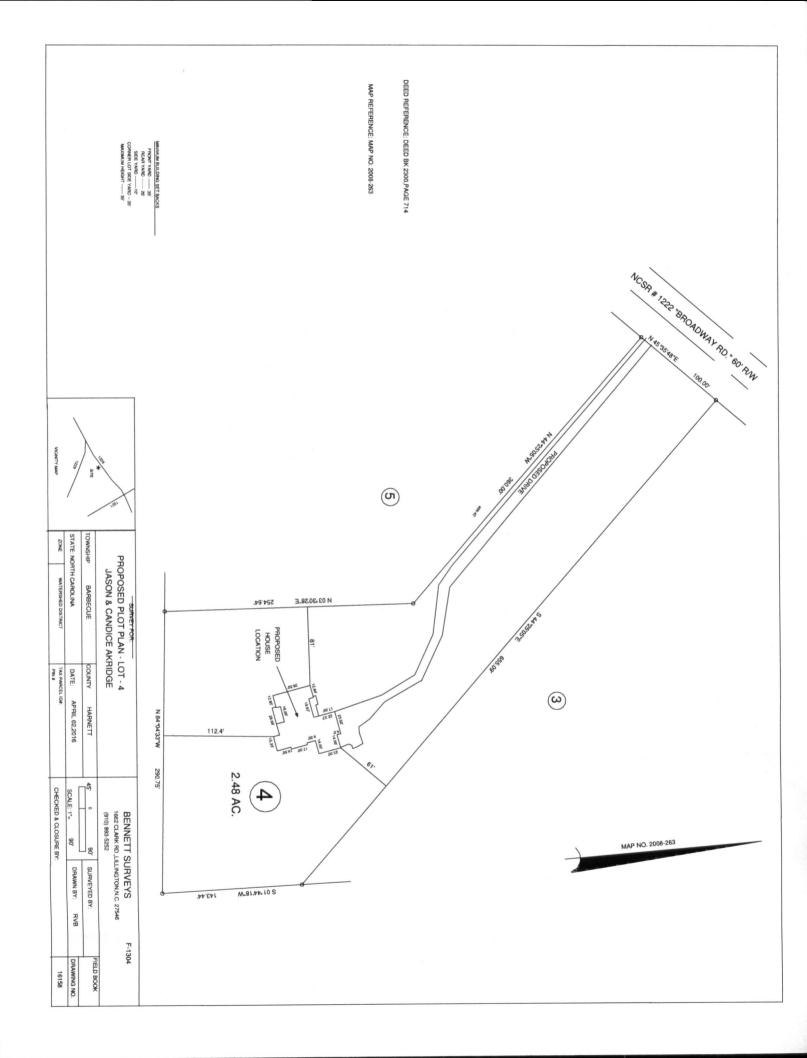
Closest Side

Sidestreet/corner lot Nearest Building on same lot

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:	McDouglad Road west to Broadway Road.	Right on Broadway Road
home site is on the right.		
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 Agr	e best of my knowledge. Permit subject to revoca	

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



Each section below to be filled out by whomever performing work Must be owner or licensed contractor Address company name & phone must match Harnett County Central Permitting
PQ Box 65 Lillington NC 27546
910 893 7525 Fax 910 893 2793 www harnett org/permits

Application for Residential Building and Trades Permit

Owner's Name Date	
Site AddressPhone	
Directions to job site from Lillington	The state of the s
Subdivision	Lot
Description of Proposed Work	# of Bedrooms
Heated SF Unheated SF Finished Bonus Roo	om? Crawl Space Slab
General Contractor Infor	910-603-2100
building Contractor's Company Name	Telephone
350 WAGONER Dr. Fayetkalle, M. 29	Telephone 303 CUB 1971 Cgmail. com
Address	Email Address
75971	
License #	a de la companya de l
Description of Work New Cous trustien Service	e Size 200 Amps T-Pole Ves No
JM Pope Electric Electrical Contractor's Company Name	9/0 -890 -/060 Telephone
Electrical Contractor's Company Name	Telephone
409 Chatamst. Sanfau ,NC 27330	
Address	Email Address
21326	
License # Mechanical/HVAC Contractor	r Information
Description of Work New Construction	
Central Air, INC	010 200 (1281
Mechanical Contractor's Company Name	Telephone
POB 175 FOU DAYS NC 27524	,
Address	Email Address
28699	
License # Plumbing Contractor info	ozmajion
	# Baths
Description of Work 10 and Const 1994 (1915	910.814-7705
Plumbing Contractor's Company Name	The state of the s
Plumbing Contractor's Company Name 614 Byrd Rd. Bun Hard, NC 28323	3
Address	Email Address
121649	
License #	formation
Insulation Contractor Inf	919-770-1974
Insulation Contractor's Company Name & Address	Telephone
modelion contractor o company frame a radiose	·

Thereby 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. 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 Weaver Homes, Inc.		
Sign w/Title		

NAME: Weaver 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 #** 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 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 authoriz	ation to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.		
{}} Accepted	{}} Innovative {\(\Lambda \) 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 :			
TES $\{\underline{X}\}$ NO	Does the site contain any Jurisdictional Wetlands?		
$\{\bot\}$ YES $\{X\}$ NO	Do you plan to have an irrigation system now or in the future?		
$\{_\}$ YES $\{X\}$ NO	Does or will the building contain any drains? Please explain		
$\{ _ \}$ YES $\{ X \}$ NO	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?		
{_}}YES {\biggreen \biggreen \biggreen NO	Is any wastewater going to be generated on the site other than domestic sewage?		
$\{\bot\}$ YES $\{X\}$ 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?		
$\{\bot\}$ YES $\{\bot\}$ 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.			
	3/24/1		

PROPERTY OWNERS OR OWNERS LEGAL BEPRESENTATIVE SIGNATURE (REQUIRED)

10/10

DATE



Legal Description:

LT#4 CALVIN R HARDEE JR MAP#2008-263

PID: 039579 0064 04 PIN: 9579-04-4828.000

REID: 0070742

Subdivision: 2008-263 Deeded Acreage: 2.48 ac Total Acreage: 2.36 ac

Account Number: 301513000 Name 1: HARDEE CALVIN R JR

Name 2:

Owner Address 1: 5175 BARBECUE CHURCH RD

Owner Address 2: Owner Address 3:

City, State, Zip: SANFORD, NC, 27332-0000

Building Count: 0 Township Code: 03 Fire Code: FR24

Property Address: 7935 BROADWAY RD

Parcel Building Value: \$0 Parcel Obxf Value: \$0 Parcel Land Value: \$21700 Parcel Obxf Value: \$0 Parcel Deferred Value: \$0 Total Assessed Value: \$21700 Total Market Value : \$21700

Legal Land Units , Unit Type : 2.48, AC

Harnett County GIS

Tax Data Last Modified:

Calculated Land Units / Type: , ac

Neighborhood: 00300

Actual Year Built:

TotalAcutalAreaHeated: Sq/Ft Sale Month and Year: 11 / 2006

Sale Price: \$0

Deed Book & Page: 2300-0714

Deed Date:

Plat Book & Page: 2008-0263

Instrument Type: WD Vacant or Improved: QualifiedCode: D Transfer or Split: S

Prior Building Value: \$0

Prior Obxf Value: \$

Prior Land Value: \$0

Prior Special Land Value: \$0 **Prior Deferred Value: \$0** Prior Assessed Value: \$0

Prior Land Units: 2.48 ac

