

Initial Application Date: 4-12-14

Application # 1U50038444
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: S-Mark Properties Mailing Address: 365 Cottladder Dr Coats NC
City: Coats State: NC Zip: 27521 Contact No: 919-868-9307 Email: JERN8046@AOL.COM

APPLICANT: S-Mark Properties Mailing Address: 365 Cottladder Dr
City: Coats State: NC Zip: 27521 Contact No: 919-868-9307 Email: JERN8046@AOL.COM
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Steve Jernigan Phone # 919-868-9307

PROPERTY LOCATION: Subdivision: OXFORD Woods Lot #: 10 Lot Size: 1/2 Acre 660
State Road # _____ State Road Name: old Stage Rd/237 Oxford Woods Dr Map Book & Page: 20081214-216
Parcel: 046692001720 PIN: 0682-88-9569.000
Zoning: PA30 Flood Zone: X Watershed: - Deed Book & Page 3384, 677 Power Company*: Duke Energy
*New structures with Progress Energy as service provider need to supply premise number 45876204 from Progress Energy.

PROPOSED USE:

- SFD: (Size 50 x 44) # Bedrooms: 3 # Baths: 7/2 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: _____
- 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:

	Minimum	Actual
Front	<u>35</u>	<u>45</u>
Rear	<u>25</u>	<u>148</u>
Closest Side	<u>10</u>	<u>27</u>
Sidestreet/corner lot	_____	_____
Nearest Building on same lot	_____	_____

Comments: _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 210 Thru Angier Turn Right
on Old Stage Rd, Subdivision 3 - Miles on Right

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.

Steve Penner
Signature of Owner or Owner's Agent

4-12-16
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.*****

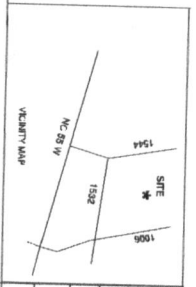
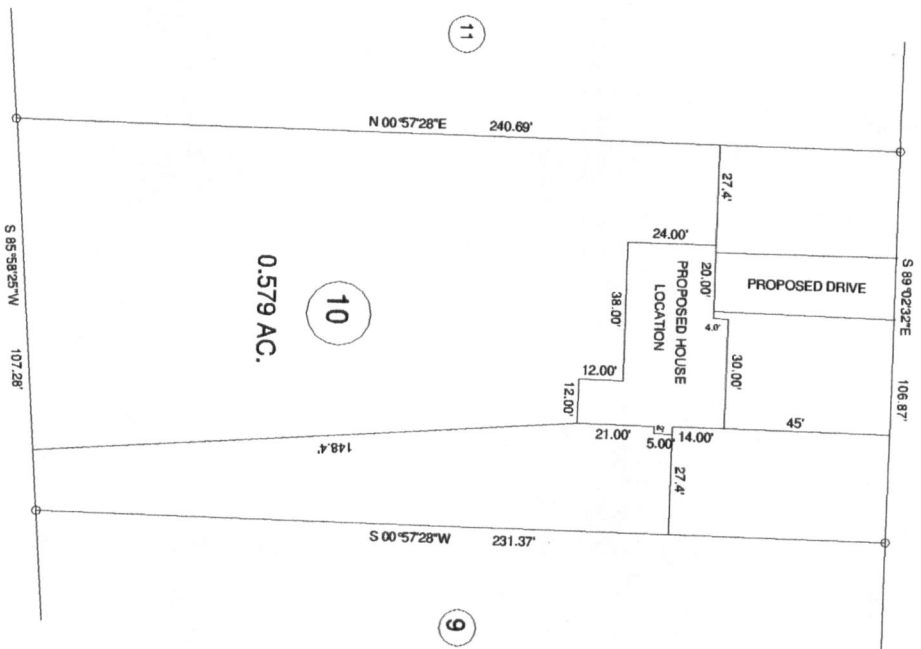
****This application expires 6 months from the initial date if permits have not been issued****

MAP REFERENCE: MAP NO. 2008-214-215

SITE PLAN APPROVAL SFD
 DISTRICT RA-30 USE SFD
 #BEDROOMS 3
11-2-11
 Date
ZB
 Zoning Administrator

MINIMUM DIM. DIM. SET BACKS
 FRONT YARD — 25'
 REAR YARD — 25'
 SIDE YARD — 10'
 CORNER LOT SIDE YARD — 20'
 MAXIMUM HEIGHT — 35'

"OXFORD WOODS DRIVE" 50' R/W



SHINNEY FOUR		BENNETT SURVEYS		F-1304	
PROPOSED PLOT PLAN - LOT - 10		1662 CLARK RD., LILLINGTON, N.C. 27546		(919) 893-5252	
"OXFORD WOODS SUBDIVISION"		SCALE: 1" = 50'		DRAWN BY: RVB	
TOWNSHIP	BLACK RIVER	COUNTY	HARRIETT	SURVEYED BY:	FIELD BOOK
STATE	NORTH CAROLINA	DATE	MARCH 21, 2016		
ZONE	RA-30	TAX PARCEL DISTRICT			
	WATERSEED DISTRICT	TAX PARCEL DISTRICT			
		CHECKED & CLOSURE BY:			DRAWING NO. 18118

NAME: S-Mark Properties

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.

[Signature]
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

4-12-10
DATE

09/09/11

Application #
38446

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 S-Mark Properties Date 4-12-16

Site Address 237 Oxford Woods Dr. Angier NC Phone 919-868-9307

Directions to job site from Lillington 210 thru Angier Turn Right on
Old Stage, Subdivision 3-Miles on Right

Subdivision OXFORD WOODS Lot 1D

Description of Proposed Work New 2-story House # of Bedrooms 3

Heated SF 1926 Unheated SF 0 Finished Bonus Room? Yes Crawl Space Slab ✓

General Contractor Information

✓ S-Mark Properties 919-868-9307
Building Contractor's Company Name Telephone
365 Cottlelake Dr. Coats NC JERN5046@aol.com
Address Email Address
75632

License #

Electrical Contractor Information

✓ Description of Work New Home Service Size 100 Amps T-Pole X Yes No
Wester & Pace Electric 919-499-3946
Electrical Contractor's Company Name Telephone
614 Leste Rd Sanford NC Email Address
12007U
License #

Mechanical/HVAC Contractor Information

✓ Description of Work New Home
Cool Springs Services 919-258-0415
Mechanical Contractor's Company Name Telephone
2200 Cool Springs Rd. Broadway NC Email Address
11542
License #

Plumbing Contractor Information

✓ Description of Work New Home # Baths 2 1/2
Curtis Faircloth Plumbing 910-531-3111
Plumbing Contractor's Company Name Telephone
5056 Elizabethtown Hwy Roxboro NC Email Address
7269
License #

Insulation Contractor Information

✓ Insulating INC 919-772-9000
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

Steve Jones - S. Mark Properties
Signature of Owner/Contractor/Officer(s) of Corporation

9-12-14
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 S. Mark Properties

Sign w/Title Steve Jones Date 9-12-14

LIEN AGENT INFORMATION

Effective April 1, 2013

In accordance with North Carolina General Assembly Session Law 2012-158, Inspection Departments are not allowed to issue any permit where the project cost is \$30,000 or more unless the application is for improvements to an existing dwelling that the applicant uses as a residence OR the property owner has designated a lien agent and provided the inspections office with the information below:

Name of Lien Agent Investors Title Insurance Company

Mailing address of Agent 19 W. Hargett St. Suite 507
Raleigh, N.C. 27501

Physical address of Agent 19 W. Hargett St. Suite 507
Raleigh, N.C. 27501

Telephone 1-888-690-7384 Fax 1-919-794-5664

Email Support@liensnc.com

The information will be attached to the permit record and a copy provided to the applicant. The applicant is required to post a copy on the construction site.

Excerpt from North Carolina G.S. 160A-417:

“(Effective April 1, 2013) No permit shall be issued pursuant to subdivision (1) of subsection (a) of this section where the cost of the work is thirty thousand dollars (\$30,000) or more, other than for improvements to an existing single-family residential dwelling unit as defined in G.S. 87-15.5(7) that the applicant uses as a residence, unless the name, physical and mailing address, telephone number, facsimile number, and electronic mail address of the lien agent designated by the owner pursuant to G.S. 44A-11.1(a) is conspicuously set forth in the permit or in an attachment thereto. The building permit may contain the lien agent's electronic mail address. The lien agent information for each permit issued pursuant to this subsection shall be maintained by the inspection department in the same manner and in the same location in which it maintains its record of building permits issued.”

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 5/02/16

Application Number 16-50038446
Property Address 237 OXFORD WOODS DR
PARCEL NUMBER 04-0692- - -0017- -20-
Application description . . . CP NEW RESIDENTIAL (SFD)
Subdivision Name OXFORD WOODS
Property Zoning RES/AGRI DIST - RA-30

Permit BLDG,MECH,ELEC,PLB,INSU PERMIT

Additional desc . . .
Phone Access Code . . . 1135458

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	111	B111	R*BLDG SLAB INSP/TEMP SVC POLE	_____	___/___/___
30-999	309	P309	R*PLUMB UNDER SLAB	_____	___/___/___
30-999	205	E205	R*ELEC UNDER SLAB	_____	___/___/___
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	_____	___/___/___

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 16-50038446 Date 5/02/16
Property Address 237 OXFORD WOODS DR
PARCEL NUMBER 04-0692- - -0017- -20-
Application type description CP NEW RESIDENTIAL (SFD)
Subdivision Name OXFORD WOODS
Property Zoning RES/AGRI DIST - RA-30

Owner	Contractor
-----	-----
S-MARK PROPERTIES LLC	S MARK PROPERTIES
365 COTTLE LAKE DRIVE	365 COTTLELAKE DR
COATS NC 27521	COATS NC 27521
	(919) 868-9307

Applicant

S-MARK PROPERTIES
365 COTTLE DR
COATS NC 27521
(919) 868-9307

--- Structure Information 000 000 50X41 3BDR W/GARAGE SLAB
Flood Zone FLOOD ZONE X
Other struct info # BEDROOMS 3.00
PROPOSED USE SFD
SEPTIC - EXISTING? NEW SEPTIC
WATER SUPPLY COUNTY

Permit BLDG,MECH,ELEC,PLB,INSU PERMIT
Additional desc . . .
Phone Access Code . 1135458
Issue Date 5/02/16 Valuation 0
Expiration Date . . 5/02/17

Special Notes and Comments
T/S: 04/12/2016 09:27 AM LBENNETT --
1237 OXFORD WOODS DR - OXFORD WOODS
210 THROUGH ANGIER - TURN RIGHT ON OLD
STAGE RD - SUBDIVISION 3 MILES ON THE
RIGHT
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

