Initial Application Date:_	4	·15	.16
			, —

Application #	16.50038480
	CI#

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext; 2 Fay: (910) 893-7525
A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION
LANDOWNER: S- MANK Proposition - Control of the Con
Mailing Address: 305 Cottle Cate No
APPLICANT*: 5-Mont Properties Mailing Address: 365 Coffee Love Dr
City: Cooks State (4.7) Mailing Address: 365 Coffle Cole Dr
City: <u>Coafs</u> State: Zip: <u>17521</u> Contact No: <u>919-868-9307</u> Email: <u>Tennsoria Coafs</u> *Please fill out applicant information if different than landowner
CONTACT NAME APPLYING IN OFFICE: Steve JEANICAN Phone # 919 - 868-9307
PROPERTY LOCATION: Subdivision: Cofflestone Estates Lot #: 18 Lot Size: 58
State Road # State Road Name: Road Name
Parcel:
Watershed. 1 Deed Book & Page: CFII-1C/ Power Company*: Wike Falsica
*New structures with Progress Energy as service provider need to supply premise number 76147675 from Progress Energy.
PROPOSED USE:
SFD: (Size \(\begin{align*} \text{X (\omega)} &
(Is the bonus room finished? (
Mod: (Sizex) # 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:SWDWTW (Sizex) # Bedrooms:Garage:(site built?) Deck:(site built?)
□ Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit:
Home Occupation: # Rooms: Use: Hours of Operation: #Employees:
Addition/Accessory/Other: (Size
The state of the s
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: Comments:
Front Minimum 35 Actual 36
Rear <u>25</u> <u>77'1"</u>
Closest Side 10 18
Sidestreet/corner lot
Nearest Building on same lot

Residential Land Use Application

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 421 HOW BURS Creek T.C. on 27 Hum 1/2 ON Brick Mill Rd Sub on Coff	<u>ish</u> —
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 I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information When the specifications of I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information Signature of Owner or Owner's Agent Date	f plans submitted. 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

MAP REFERÊNCE: MAP NO. 2001-912 DISTRICT SITE PLAN APPROVAL MAP NO. 2001-912 USE 37,00° SCINITY NAS 19. (3) *3 0.58 AC. **2** 77.7 STATE NORTH CAROLINA
ZONE WATERSHED DE TOWNSHIP PROPOSED PLOT PLAN - LOT - 18
'COTTLESTONE ESTATES S/D' 20' DRAINAGE EASEMENT 1.01.0x.00 N WATERSHED DISTRICT **GROVE (** 63.66 PROPOSED HOUSE LOCATION TAX PARCEL IOA PRIA VTNUOO DATE: MARCH 08,2018 HARNETT CURVE MADIUS LENGTH CHORD CHISEARING PROPOSED DAN'S (3) Ġ 80.00 CHECKED & CLOSURE BY SCALE 12 68.36 BENNETT SURVEYS
1662 GLARK RD.LILLINGTON.N.C. 27546
(910) 892-8262 Ą "MODLIN CT." 50' R/W 90,00 DRAWN BY SURVEYED BY 8 35 4219m ₽YB F-1304 DRAWING NO. FIELD BOOK

NAME:	lack Proactics		201100
MAME.		APPLICATION #:	
County II 141	*This application to be filled out when applying	for a septic system inspection	*
IF THE INFORMATION			
PERMIT OR AUTHOR	IZATION TO CONSTRUCT SHALL BE SOLVED, OF	THE SITE IS ALTERED, THEN	THE IMPROVEMENT
depending upon docume	entation submitted. (Complete site plan = 60 months; Complete 25 option 1	the permit is valid for either 60 n	nonths or without expiration
		CONFIRMATION #	1103()7
All property	Health New Septic System Code 800		4.16.10
lines must b	y irons must be made visible. Place "pink propose clearly flagged approximately every 50 feet between the propose services of	erty flags" on each corner	iron of tot. All property
- I IQUE UIQIIL	UE HOUSE COIDER HARE" at each corner of the miner	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	/AWays garages deale
• Place orang	s, swimming pools, etc. Place flags per site plan de Environmental Health pard in leastion that is	eveloped at/for Central Pern	nitting.
 If property is 	s thickly wooded. Environmental Health required	sily viewed from road to assis	st in locating property.
evaluation to	be performed. Inspectors should be able to walk be addressed within 10 business days of the same and the same and the same and the same and the same addressed within 10 business days of the same and t	freely around site. Do not	growth to allow the soil
• All lots to b	ne addressed within 10 business days after con o uncover outlet lid, mark house corners and n	firmation. \$25.00 return tr	irade property. in fee may he incurred
After prepari	o uncover outlet ild, mark house corners and pi	roperty lines, etc. once lot	confirmed ready.
800 (after se	electing notification permit if multiple permits exist	at 910-893-7525 option 1 to	
confirmation	number given at end of recording for proof of requ	iest.	nspection. Please note
USE CHCKZG	OV OF IVH to verity results. Once approved process	ed to Central Permitting for p	permits.
	Health Existing Tank Inspections e instructions for placing flags and card on property		
· i i opale tut i	HISDECTION DV removing coil over entitles and as a		
possible) and	then put lid back in place. (Unless inspection is	for a septic tank in a mobile	nd lift lid straight up (<i>if</i> home park)
	ring outlet end call the voice permitting system at ermits, then use code 800 for Environmental Herof recording for proof of request	910-893-7525 option 1 & se	elect notification permit
given at end o	of recording for proof of request.	and inspection. <u>Flease note</u>	e confirmation number
SEPTIC	ov or IVR to hear results. Once approved, proceed	to Central Permitting for ren	naining permits.
If applying for authoriza	ation to construct please indicate desired system type(s): ca	an be ranked in order of preferen	ce, must choose one.
(} Accepted	{} Innovative { Conventional	() Any	
{}} Alternative	{}} Other	_	
The applicant shall notif question. If the answer is	fy the local health department upon submittal of this appis "yes", applicant MUST ATTACH SUPPORTING I	olication if any of the following	g apply to the property in
_	, approximated attach soft or find i	DOCUMENTATION:	
{_}}YES {INO	Does the site contain any Jurisdictional Wetlands?		
{_}YES {NO	Do you plan to have an <u>irrigation system</u> now or in the	ne future?	
{_}}YES {NO	Does or will the building contain any drains? Please		
	Are there any existing wells, springs, waterlines or W	Vastewater Systems on this prov	norty?
(_)YES {NO	Is any wastewater going to be generated on the site of	ther than domestic source?	perty:
_}YES _ NO	Is the site subject to approval by any other Public Age	ency?	
(_)YES (_) NO	Are there any Easements or Right of Ways on this pro		

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)

DATE

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 5-Mark Properties	Date <u>4-15-1</u>
Site Address 59 Mallin crt.	Phone 9/9 - 868 - 930
Directions to job site from Lillington 421 thru Boies	Creek T.L. on 27 He
Right on Brick Mill Rd Sub on a	
Subdivision <u>Cettlestone</u> Estates	Lot/
Description of Proposed Work New Home	# of Bedrooms 3
Heated SF 2097 Unheated SF Finished Bonus Room	
General Contractor Inform	natión established
5-Mark Properties	919-868-9307
Building Contractor's Company Name	l elephone
365 Coffletake Dr	JERN8046 @ ADI. COM
Address	Email Address
75632 License #	
Flactrical Contractor Inform	mation
Description of Work In Service Service	Size 100 Amps T-Pole Yes No
Wester + PACE Electric	919-499-3946
Electrical Contractor's Company Name	Telephone
614 Leshe Rd Dayand NC	
Address	Email Address
12007 U	
License # / / Mechanical/HVAC Contractor In	oformation.
Description of Work New Home	moj mation
	010 700 000
Mechanical Contractor s Company Name	919-258-0415 Telephone
2200 Cool springs Rd. Broadway NC	releptione
Address	Email Address
11542	Ellian Addioss
License #	
Plumbing Contractor Inform	<u>nation</u>
Description of Work Cortis Faircloth Humbing	# Baths
Certis FAIRCLOTH Plumbing	910-531-3111
Plumbing Contractor's Company Name	Telephone
5056 Elizabethtown Huy Rosebero NE	· ·
Address	Email Address
7767	
License # Insulation Contractor Inform	nation
FIXUAting INC	
Insulation Contractor's Company Name & Address	919-772-9000 Telephone
	, olophono

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 <u>4-15-16</u> Date 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 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 5 Mask Francisis CCC

Sign w/Title Stew penaga Date 4-15-14

I hereby certify that I have the authority to make necessary application, that the application is correct

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 INI	jestors little Insurprice Company
Mailing address of Agent	19 W. HArgett St. Sure 507
	Raleigh, N.C. 27501
Physical address of Agent	19 W. HArgett St. Suite 507
	Kaleyh, N.C. 27501
Telephone 1-888-690-73	84 Fax 1-919-794-5664
Email Separte hersence	

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."

Plan Box #	D2		Job Name	SMU	2h PR
App #_ 381	180	्र Valuation	7 223543	Heated SQ Fe	et 209
				Gara	ge 601
Inspections for S	FD/SFA		. •		= 2695
Crawl	Slab	Mor	10	Basement	
Footing	Footing	Plum	Under Slab	Footing	
Foundation	Foundation	Ele. L	Inder Slab	Foundation	
Address	Address	Addr	ess	Waterproofing	
Open Floor	Slab	Mono	Slab	Plum Under slab	
Rough in	Rough In	Rougi	h In	Address	
Insulation	Insulation	Insula	tion	Slab	
Final	Final	Final		Open Floor	
				Rough In	
				Insulation	
			•	Final	
	1				
Foundation Survey	$\sqrt{}$	Envir. Healtl	hrew c	Other	
Additions / Other		Envir. Healtl	n <u>rifi</u>		2223
Additions / Other		Envir. Healtl	n <u>rifi</u>		2223
Additions / Other ooting oundation		Envir. Healtl	n <u>rew</u>		2223
Additions / Other		Envir. Healtl	n <u>roew</u>		2223
Additions / Other ooting oundation		Envir. Healtl	n <u>rew</u>		2223
Additions / Other Footing Foundation Hab Mono		Envir. Healtl	n <u>rifi</u>		2223
Additions / Other Footing Foundation Jab Jono pen Floor		Envir. Healtl	ncew (2223
Additions / Other Footing Foundation Jab Jono pen Floor ough In		Envir. Healtl	n <u>rew</u>		2223
Additions / Other Footing Foundation Jab Jono pen Floor		Envir. Healtl	ncew (2223

LILLINGTON, NC 27546 For Inspections Call: (910) 893-7525 Fax: (910) 893-2793 Bldq Insp scheduled before 2pm available next business day. Application Number 16-50038480 Date 5/12/16 Property Address 59 MODLIN CT PARCEL NUMBER 07-0589- - - -0102- -22-Application type description CP NEW RESIDENTIAL (SFD) Subdivision Name J L STONE
Property Zoning RES/AGRI DIST - RA-30 Owner Contractor ______ S MARK PROPERTIES S-MARK PROPERTIES LLC #18 365 COTTLELAKE DR 365 COTTLE LAKE DRIVE NC 27521 COATS NC 27521 COATS (919) 868-9307 Applicant ______ S MARK PROPERTIES #18 365 COTTLESTONE DR NC 27521 COATS (919) 868-9307 --- Structure Information 000 000 43X61 3 BR ATT GARAGE SLAB FIN BONUS Flood Zone FLOOD ZONE X Other struct info # BEDROOMS 3.00 # BEDROOMS
PROPOSED USE
SEPTIC - EXISTING? SFD NEW COUNTY WATER SUPPLY ______ Permit BLDG, MECH, ELEC, PLB, INSU PERMIT Additional desc . . Phone Access Code . 1135987 Issue Date 5/12/16 Valuation Expiration Date . . . 5/12/17-------

HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

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 16-50038480 Property Address 59 MODLIN CT Date 5/12/16

PARCEL NUMBER 07-0589- - -0102- -22-Application description . . . CP NEW RESIDENTIAL (SFD) Subdivision Name J L STONE

Property Zoning RES/AGRI DIST - RA-30

Permit BLDG, MECH, ELEC, PLB, INSU PERMIT

Additional desc . .

Phone Access Code . 1135987 _____

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
Seq 10 20 20-30 30-999 30-999 30-999 30 40-50 40-60 40-60 40-60 50-60 50-60 50-60			R*BLDG FOOTING / TEMP SVC POLE R*BLDG FOUND & TEMP SVC POLE ADDRESS CONFIRMATION R*BLDG SLAB INSP/TEMP SVC POLE R*PLUMB UNDER SLAB R*ELEC UNDER SLAB R*FOUND & SETBACK VERIF SURVEY R*INSULATION INSPECTION FOUR TRADE ROUGH IN ONE TRADE ROUGH IN THREE TRADE ROUGH IN FOUR TRADE FINAL ONE TRADE FINAL THREE TRADE FINAL	Initials	Date /_/_/ //// //// //// //// //// //// ////
50-60 50-60 999	229 209	R229 E209 H824	TWO TRADE FINAL R*ELEC TEMP POWER CERT ENVIR. OPERATIONS PERMIT		_/_/_