

Initial Application Date: 4-28-16

AV-2

Application # 1650038588
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: Royal Oaks Building Group, LLC Mailing Address: 1210 Trinity Road, Suite 102
City: Raleigh State: NC Zip: 27607 Contact No: 919-233-3886 Email: jmxoxley@royaloakshomes.com

APPLICANT*: Royal Oaks Building Group Mailing Address: 1210 Trinity Road
City: Raleigh State: NC Zip: 27607 Contact No: 919-233-3886 Email: jmxoxley@royaloakshomes.com
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: John Moxley Phone # 919-233-3886 / 321

PROPERTY LOCATION: Subdivision: Atkin's Village Lot #: 2 Lot Size: .57 AC
State Road # 39 State Road Name: Atkins Village Court Map Book & Page: 2015 / 235
Parcel: 040672 0118 02 PIN: 0664-76-9798.000
Zoning: RA30 Flood Zone: N/A Watershed: N/A Deed Book & Page: 3279 / 74 Power Company*: South River
*New structures with Progress Energy as service provider need to supply premise number _____ from Progress Energy.

PROPOSED USE:

- SFD: (Size 40' x 56') # Bedrooms: 4 # 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: _____
- 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: New Home Manufactured Homes: _____ Other (specify): _____

Required Residential Property Line Setbacks:

Front	Minimum	<u>35'</u>	Actual	<u>36'</u>
Rear		<u>25'</u>		<u>137.4'</u>
Closest Side		<u>10'</u>		<u>25.2'</u>
Sidestreet/corner lot		<u>20'</u>		<u>25.2'</u>
Nearest Building on same lot				

Comments: _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: North on 401; Right onto Rawls Church Road; Right onto Atkins road
left onto Atkins Village Court

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.

John Morley
Signature of Owner or Owner's Agent

4-25-16
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****

PLOT PLAN FOR
ROYAL OAKS BUILDING GROUP, LLC
 39 ATKINS VILLAGE COURT
 LOT 2, ATKINS VILLAGE PHASE ONE
 FUQUAY VARINA, HARNETT COUNTY, NORTH CAROLINA

N/F
 TIMOTHY A. STEPHENSON ET UX
 D.B. 2755, PG. 165
 PLAT CABINET "F", SLIDE 457-4

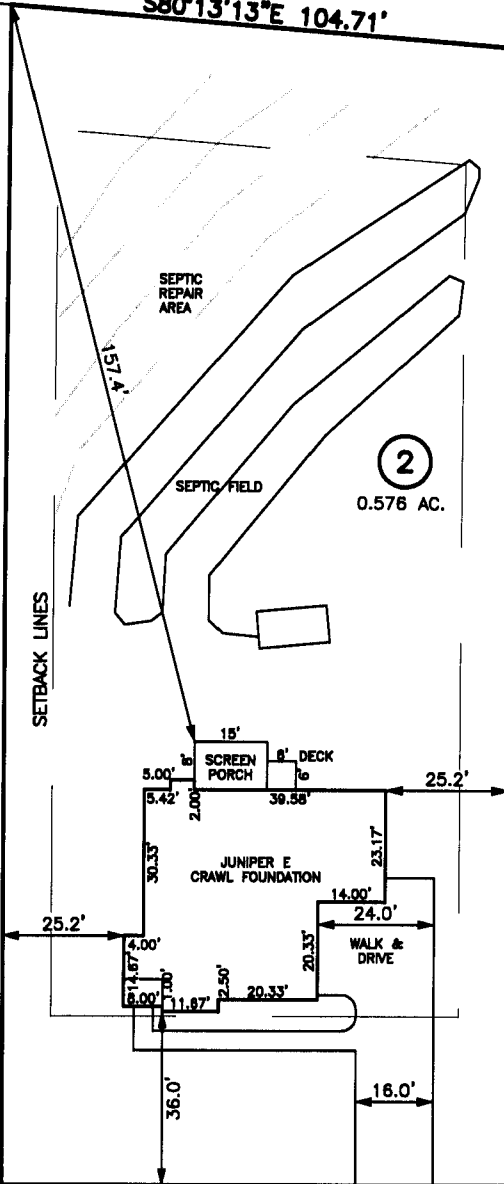


(1)

S80°13'13"E 104.71'

N05°24'01"E 244.38'

SETBACK LINES



S05°24'01"W 236.38'

(3)

SITE PLAN APPROVAL

DISTRICT **RA30** USE **SFD**

#BEDROOMS **4**

Date **4-28-16**
 Zoning Administrator *[Signature]*

LEGEND

- BFP BACK FLOW PREVENTER
- CI CURB INLET
- CO SEWER CLEANOUT
- ECM EXISTING CONCRETE MONUMENT
- EDH EXISTING DRILL HOLE
- EBH EXISTING IRON STAKE
- EIP EXISTING IRON PIPE
- EPK EXISTING PK NAIL
- ES ELECTRIC STUB
- FES FLARED END SECTION
- LP LIGHT POLE
- MH MANHOLE
- NDH NEW DRILL HOLE
- NIP NEW IRON PIPE
- NPK NEW PK NAIL
- OHW OVERHEAD WIRES
- PNS POINT NOT SET
- TP TELEPHONE PEDESTAL
- TR TRANSFORMER
- TV CABLE TV PEDESTAL
- UP UTILITY POLE
- WM WATER METER
- WV WATER VALVE
- YI YARD INLET
- () FIELD MEASUREMENT

SETBACK INFO

FRONT: _____ 35'
 REAR: _____ 25'
 SIDES: _____ 10'
 CORNER SIDE: _____ 10'

ATKINS VILLAGE COURT
 50' PUBLIC R/W

N84°35'59"W 104.42'

IMPERVIOUS SURFACE TABLE

HOUSE.....	2,000 S.F.
PORCH & DECK.....	190 S.F.
WALK & DRIVE.....	1,380 S.F.
TOTAL IMPERVIOUS.....	3,550 S.F.
PERCENTAGE IMPERVIOUS =	14.1%
MAXIMUM IMPERVIOUS =	24 %

REFERENCES:

B.M. 2015, PP. 235-236



SCALE: 1" = 40'

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. Foundation Drains _____
- { } 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.

John Morley
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

4-25-16
DATE

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 Royal Oaks Building Group Date _____
Site Address 39 Atkins Village Court Phone 919-233-3886
Directions to job site from Lillington North on 401; Right onto Rawls Church Road; Right onto Atkins Road
left onto Atkins Village Court

Subdivision Atkins Village Lot 2
Description of Proposed Work Single Family Home # of Bedrooms 4
Heated SF 2702 Unheated SF 1516 Finished Bonus Room? _____ Crawl Space Slab _____

General Contractor Information

Royal Oaks Building Group, LLC 919-233-3886
Building Contractor's Company Name Telephone
1210 Trinity Road, Suite 102 Raleigh, NC 27607 cobrien@royaloaksbg.com
Address Email Address
49775
License #

Electrical Contractor Information

Description of Work Electrical Rough in and Final Service Size 200 Amps T-Pole Yes ___ No
Imperial Electric 919-363-7474
Electrical Contractor's Company Name Telephone
PO Box 162, Apex, NC 27502
Address Email Address
19850
License #

Mechanical/HVAC Contractor Information

Description of Work Install HVAC and duct system
Stewart's Heating and Air 919-362-0387
Mechanical Contractor's Company Name Telephone
2430 Reliance Ave, Apex, NC 27539
Address Email Address
09308
License #

Plumbing Contractor Information

Description of Work Plumb single Family home # Baths 2.5
Barbour & Pourron 919-533-4455
Plumbing Contractor's Company Name Telephone
PO Box 934, Clayton, NC 27528
Address Email Address
27132
License #

Insulation Contractor Information

Tatum Insulation II 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

John Moxley
Signature of Owner/Contractor/Officer(s) of Corporation

4-25-16
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 Royal Oaks Building Group

Sign w/Title John Moxley Plans Coordinator Date 4-25-16

LIEN AGENT INFORMATION

Effective April 1, 2013

In accordance with North Carolina General Assembly Session Law 2012-158, inspections offices 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	<u>Chicago Title Company, LLC</u>		
Mailing address of Agent	<u>19 W. Hargett Street, Suite 507</u>		
	<u>Raleigh, NC 27601</u>		
Physical address of Agent	<u>19 W. Hargett Street, Suite 507</u>		
	<u>Raleigh, NC 27607</u>		
Telephone	<u>888-690-7384</u>	Fax	<u>919-489-5231</u>
Email	<u>support@liensnc.com</u>		

This 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 property.

Excerpt from North Carolina G.S. 153A-357:

“(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 # C 3

Date 4-28-16

Job Name Royal

App # 38588

Valuation ^{\$} 274633

SQ Feet 2702

Garage 413

= 3115

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 _____

15281

Additions / Other

Footing _____

Foundation _____

Slab _____

Mono _____

Open Floor _____

Rough In _____

Insulation _____

Final _____

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	16-50038588	Date	5/31/16
Property Address	39 ATKINS VILLAGE CT		
PARCEL NUMBER	04-0672- - -0118- -02-		
Application type description	CP NEW RESIDENTIAL (SFD)		
Subdivision Name	ATKINS VILLAGE PH1 20LTS		
Property Zoning	RES/AGRI DIST - RA-30		

Owner

ATKINS VILLAGE LLC
1210 TRINITY RD STE 102
RALEIGH NC 27607

Contractor

ROYAL OAKS BUILDING GROUP LLC
1210 TRINITY RD, SUITE 102
RALEIGH NC 27607
(919) 233-3886

Applicant

ROYAL OAKS BUILDING GROUP #2
1210 TRINITY RD
RALEIGH NC 27607
(919) 233-3886

--- Structure Information 000 000 40X56 4BDR CRAWL W/ GARAGE & DECK

Flood Zone	FLOOD ZONE X	
Other struct info	# BEDROOMS	4000000.00
	PROPOSED USE	SFD
	SEPTIC - EXISTING?	SEWER
	WATER SUPPLY	COUNTY

Permit BLDG,MECH,ELEC,PLB,INSU PERMIT

Additional desc . . .

Phone Access Code . 1137827

Issue Date 5/31/16

Valuation 0

Expiration Date . . 5/31/17

Special Notes and Comments

T/S: 04/28/2016 11:07 AM JBROCK ----
ATKINS VILLAGE #2
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

HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

LILLINGTON, NC 27546

For Inspections Call: (910) 893-7525 Fax: (910) 893-2793

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Subdivision Name	ATKINS VILLAGE PH1 20LTS		
Property Zoning	RES/AGRI DIST - RA-30		
Permit	BLDG,MECH,ELEC,PLB,INSU PERMIT		
Additional desc			
Phone Access Code	1137827		

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	105	B105	R*OPEN FLOOR	_____	___/___/___
30	104	B104	R*FOUND & SETBACK VERIF SURVEY	_____	___/___/___
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	_____	___/___/___