

Initial Application Date: July 5, 2016

Application # 39122

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: Watermark Homes, Inc. Mailing Address: 1308 Fort Bragg Road - Suite 201
City: Fayetteville State: NC Zip: 28305 Contact No: (910) 483-2229 Email: sharon@watermarkhomesnc.com

APPLICANT*: Watermark Homes, Inc. Mailing Address: 1308 Fort Bragg Road - Suite 201
City: Fayetteville State: NC Zip: 28305 Contact No: (910) 483-2229 Email: sharon@watermarkhomesnc.com

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Brady Rufenacht Phone # 910-483-2229

PROPERTY LOCATION: Subdivision: The Reserve Lot #: 6 Lot Size: .62 AC

State Road # 114 State Road Name: Reserve Drive Map Book & Page: 2016 / 161

Parcel: 080645010006 PIN: 0645-57-4009.000

Zoning: RA30 Flood Zone: X Watershed: NA Deed Book & Page: 332310332 Power Company*: _____

*New structures with Progress Energy as service provider need to supply premise number _____ from Progress Energy.

PROPOSED USE:

SFD: (Size 50 x 50 # Bedrooms: 4 # Baths: 2 Basement(w/wo bath): _____ Garage: Deck: Crawl Space: _____ Slab: Monolithic 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): _____

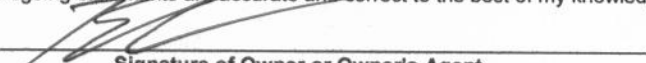
Required Residential Property Line Setbacks:

Comments: _____

Front Minimum 35 Actual 30
Rear 25 103.81
Closest Side 10 29.35
Sidestreet/corner lot 30
Nearest Building on same lot _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: _____

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.



Signature of Owner or Owner's Agent

7/8/10

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

NAME: Watermark Homes, Inc. 483-2229

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 close back down. (Unless inspection is for a septic tank in a mobile home park)
- 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.

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

7/5/2010
DATE



Vicinity Map
(Not to Scale)

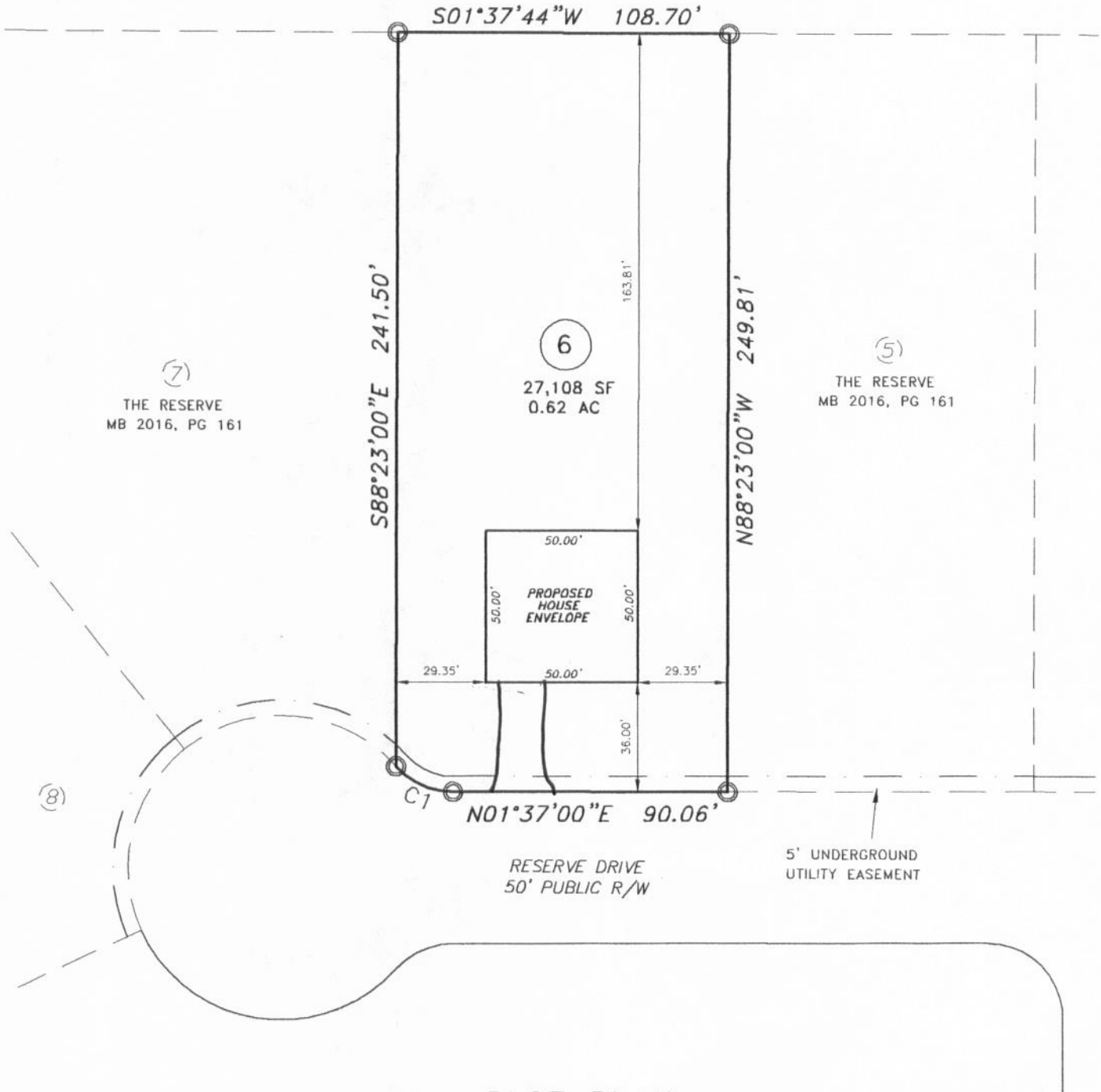
LEGEND

R/W-RIGHT OF WAY
 PB-PLAT BOOK
 DB-DEED BOOK
 PG-PAGE
 PROP-PROPOSED
 SF-SQUARE FEET
 AC-ACRE(S)
 CONC-CONCRETE
 MAINT-MAINTNANCE
 ESMT-EASEMENT
 PL-PROPERTY LINE

CURVE	RADIUS	ARC LENGTH	CHORD LENGTH	CHORD BEARING
C1	25.00'	21.03'	20.41'	N25°42'41"E



CATHERINE GILCHRIST
 DB 2614, PG 682



PLOT PLAN

PROPERTY OF: **WATERMARK HOMES INC.**
 ADDRESS: 114 RESERVE DRIVE
 CITY: NEAR ANGIER, NC
 COUNTY: HARNETT

TOWNSHIP: HECTOR'S CREEK
 DATE: JUNE 22, 2016
 SCALE: 1" = 50'
 REFERENCE: LOT 6

39122

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 Watermark Homes, Inc. Date 03-13-2017

Site Address 117 Reserve Drive Phone 910-759-1307

Directions to job site from Lillington _____
From 401, Left onto W Cornelius Harnett Blvd, Left onto Piney Grove Rawls rd., Left onto Wagstaff Rd, Left onto Rolands Rd., Destination is on the Right Side

Subdivision The Reserve Lot 6

Description of Proposed Work Single Family # of Bedrooms 3

Heated SF 2459 Unheated SF 1255 Finished Bonus Room? Y Crawl Space _____ Slab X

General Contractor Information

Watermark Homes, Inc. 910-483-2229 -(JT 910-759-1307)
Building Contractor's Company Name Telephone
1308 Ft Bragg Road Suite 201 Fayetteville, NC 28305 sharon@watermarkkhomesnc.com
Address Email Address
49261 BLD-U
License # _____

Electrical Contractor Information

Description of Work _____ Service Size _____ Amps T-Pole ___ Yes ___ No
Tool Time Services Inc. 919-977-1408
Electrical Contractor's Company Name Telephone
PO Box 2207 Garner NC 27529 tooltimeservice@gmail.com
Address Email Address
27554-1
License # _____

Mechanical/HVAC Contractor Information

Description of Work _____
Stephenson Heating and Air Inc. 910-329-0686
Mechanical Contractor's Company Name Telephone
343 Shipwash Drive Garner, NC 27520 stephensonhvac@aol.com
Address Email Address
18644
License # _____

Plumbing Contractor Information

Description of Work _____ # Baths 2 1/2
Chris Holloway Plumbing 910-624-2670
Plumbing Contractor's Company Name Telephone
737 Old NC 20 St. Pauls, NC 28384 chrisholloway@nc.rr.com
Address Email Address
28541
License # _____

Insulation Contractor Information

Cumberland Insulation-4205 Clington Rd. Fayetteville NC 28312 _____
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.

Sharon Timothy
Signature of Owner/Contractor/Officer(s) of Corporation

03-13-2017
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 Watermark Homes Inc.

Sign w/Title Sharon Timothy Permit Specialist/ Office Manager Date March 13, 2017

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 624948

Filed on: 03/24/2017

Initially filed by:

watermarkhomes1308

Designated Lien Agent

First American Title Insurance Company

Office: www.1liennc.com

Address: 19 W. Hargett St., Suite 507 / Raleigh,
NC 27601

Phone: 888-690-7384

Fax: 913-489-5231

Email: amand@1liennc.com

Project Property

Lot 6 The Reserve
110 Reserve Drive
Fuquay Varina, NC 27526
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

Watermark Homes Inc
1308 Ft. Bragg rd. suite 201
Fayetteville, NC 28305
United States
Email: sharon@watermarkhomecnc.com
Phone: 910-483-2229

Date of First Furnishing

03/27/2017

View Comments (0)

Technical Support Hotline: (888) 690-7384

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	16-50039122	Page	2
Property Address	110 RESERVE DR	Date	3/23/17
PARCEL NUMBER	08-0645- - -0100- -06-		
Application description	CP NEW RESIDENTIAL (SFD)		
Subdivision Name	THE RESERVE 22LOTS		
Property Zoning	RES/AGRI DIST - RA-30		

Permit BLDG,MECH,ELEC,PLB,INSU PERMIT

Additional desc . . .
 Phone Access Code . 1183524

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		/ /
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		/ /

HARNETT COUNTY CASH RECEIPTS

*** CUSTOMER RECEIPT ***

Oper: JFORBES Type: CP Drawer: 1
Date: 7/06/16 51 Receipt no: 6939

Year	Number	Amount
2016	50039122	
92941 TECH 4		
LILLINGTON, NC 27546		
84 BP - ENV HEALTH FEES		
NEW TANK		\$750.00

WATERMARK HOMES INC

Tender detail	
CP CREDIT CARD	\$750.00
Total tendered	\$750.00
Total payment	\$750.00

Trans date: 7/06/16 Time: 11:14:55

** THANK YOU FOR YOUR PAYMENT **

HARNETT COUNTY CASH RECEIPTS

*** CUSTOMER RECEIPT ***

Oper: JBROCK Type: CP Drawer: 1
Date: 3/23/17 52 Receipt no: 292475

Year	Number	Amount
2016	50039122	
110 RESERVE DR		
FUGLAY-VARINA, NC 27526		
B1	BP - PERMIT FEES	\$1105.00
SFD		

WATERMARK

Tender detail	
CP CREDIT CARD	\$1105.00
Total tendered	\$1105.00
Total payment	\$1105.00

Trans date: 3/23/17 Time: 13:33:14

** THANK YOU FOR YOUR PAYMENT **