Initial Application Date:_	8	10

Application # _	1650039146
	CLI#

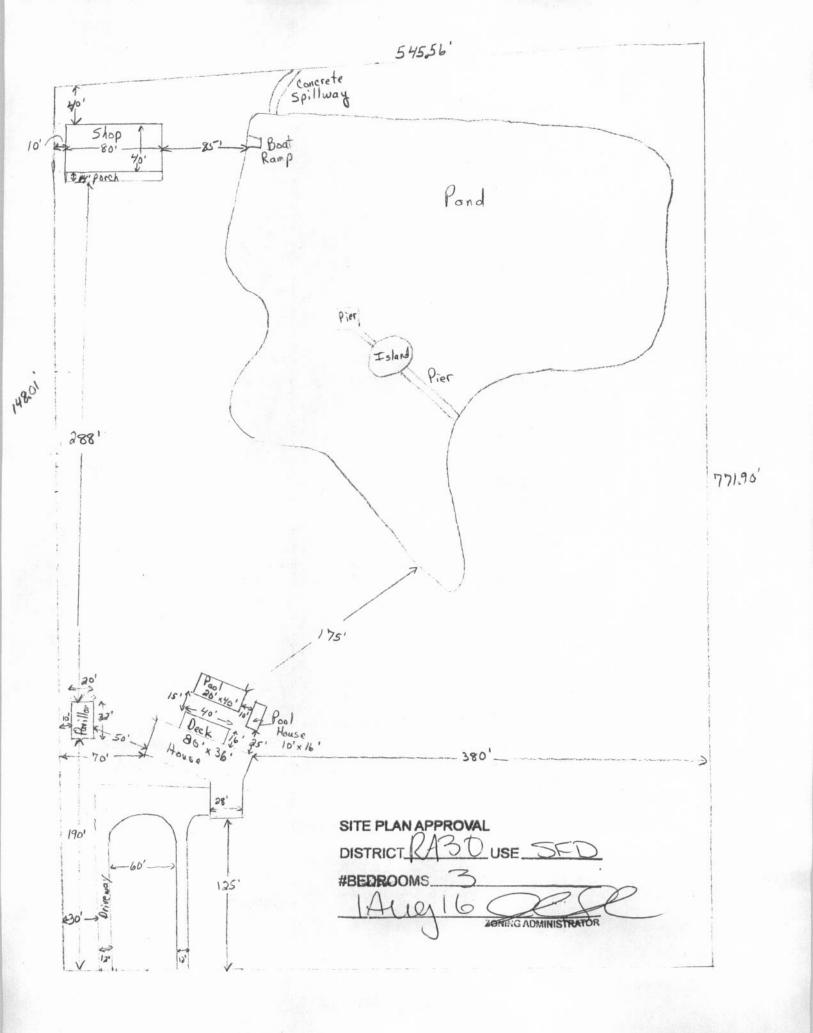
COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

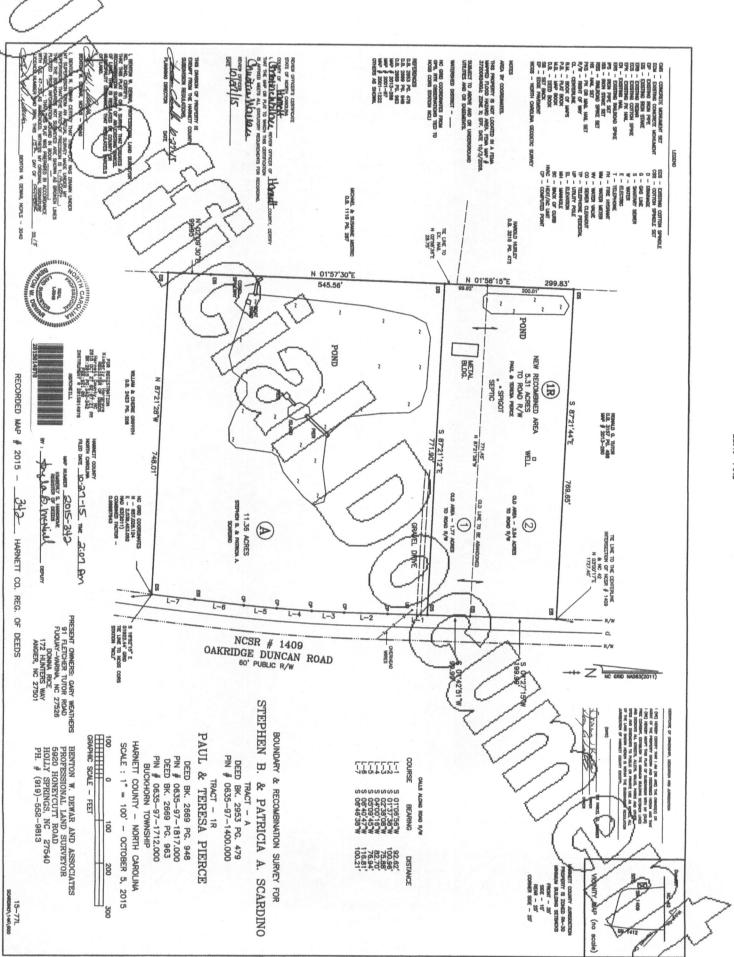
108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits

Central Permitting

		JIRED WHEN SUBMITTING A LAND USE APPLICATION**
LANDOWNER: Stephen Scardi	Mailing Address: 323	3 Summer Oaks Dr.
City: A DOX State: NC 2	Zip: <u>J. 753</u> 9 Contact No: <u>919-391-3</u>	688 Email: SCArdino 88@ minds
APPLICANT*: Same	_ Mailing Address:	
City: State: 2 *Please fill out applicant information if different than landowner	Zip: Contact No:	Email:
CONTACT NAME APPLYING IN OFFICE:		Phone #
PROPERTY LOCATION: Subdivision: 2015 -	-342	Lot #: Lot Size: 11-36
PROPERTY LOCATION: Subdivision: 2015 - State Road # State Road Name:	akridge Duncan Road	Map Book & Page: 20151342
Parcel: 05 -0695 0000 - 53	PIN: 06-35 -7 /	-1900,000
Zoning A30 Flood Zone: X Watershed: A	A Deed Book & Page: 3353 / 05-	39 Power Company*:
New structures with Progress Energy as service provider	need to supply premise number	from Progress Energy.
PROPOSED USE: SFD: (Size 86 x 36) # Bedrooms: 3 # Baths:_ (Is the bonus room finished?		
Mod: (Sizex) # Bedrooms # Baths (Is the second floor finished Manufactured Home:SWDWTW (Size	? () yes () no Any other site built add	ditions? () yes () no
Duplex: (Sizex) No. Buildings:	No. Bedrooms Per Unit:	
Home Occupation: # Rooms: Use: Use: Addition/Accessory/Other: (Size 0 x 50 Use: Use: Use: Use: Use: Use: Use: Use:	POO1 - 10x16 Pages 5hop - 20x32 Pages	#Employees: #Employees: **XVIIOO Closets in addition? () yes () no
Vater Supply: County Existing Well	New Well (# of dwellings using well) *Must have operable water before final
Sewage Supply: New Septic Tank (Complete Check	klist) Existing Septic Tank (Complete	e Checklist) County Sewer
Ooes owner of this tract of land, own land that contains a n	manufactured home within five hundred feet	(500') of tract listed above? () yes (\bigver') no
Ooes the property contain any easements whether underg	round or overhead () yes () no	
Structures (existing or proposed): Single family dwellings:_		Other (specify): Coposec(
Required Residential Property Line Setbacks:	Comments:	Prop Huse
ront Minimum 35 Actual 125		Pavillan
Rear 25 alot		
Closest Side 10		
Sidestreet/corner lot		
Nearest Building		
on same lot	Page 1 of 2	03/11

ton Highway 42 - left onto Oak	cridge Duncan	
tymile property is on right	A STATE OF THE STA	-
		_
		_
	Tables (gentled)	-
permits are granted I agree to conform to all ordinances and laws of the State of North Coereby state that foregoing statements are accurate and correct to the best of my knowled	arolina regulating such work and the specifications of plans sudge. Permit subject to revocation if false information is provide	ubn ed.
Signature of Owner's Agent	- Date	
'It is the owner/applicants responsibility to provide the county with any applicable to: boundary information, house location, underground or overhead easements,	. etc. The county or its employees are not responsible for	t lir an
incorrect or missing information that is contained	d within these applications."	1
This application expires 6 months from the initial dat	te if permits have not been issued	
This application expires o months from the mittal date	to it political national and a second	
	J.F77	
Secret Land Ally V	722 7023	
- 10xil Pasi House.	0.00	
, 31,7 4,7 5,7 5,7 5,7		
Joes og og men en en en de possect	egorg Literatum mariner and an accompany	
1009 YON Z	1945	
	and seems a second parameter of the second parameter o	
Position.	Life CRI was the same	





NAME: Stephen Scardino

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

Environmental Health New Septic SystemCode 800

CONFIRMATION #____

- 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 <u>undergrowth</u> 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. <u>Please note</u> 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	se Click2Gov	of tvn to flear results. Office approved, proceed to Gentral Fermitting for Fermanning permits.		
	for authorizatio	on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.		
{}} Acce	epted	{} Innovative {} Conventional {} Any		
{_}} Alter	rnative	{}} Other		
		the local health department upon submittal of this application if any of the following apply to the property in "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:		
{}}YES	NO	Does the site contain any Jurisdictional Wetlands?		
{}}YES	{ NO	Do you plan to have an <u>irrigation system</u> 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	INO	Is any wastewater going to be generated on the site other than domestic sewage?		
{}}YES	(L) 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 Applicati	on And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And		
State Officia	ls Are Granted	Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules.		
I Understan	d That I Am So	lely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making		
The Site Ag	Lessible So That	B - Landing 7/8/16		
PROPERT	YOWNERS	OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED) DATE		

Harnett County Department of Public Health

Well Construction Permit Application

If the information in the application for a Well Construction Permit is *falsified*, *changed*, *or the site is altered*, then the Well Construction Permit shall become *invalid*.

APPLICANT INFORMATION

Applicant/Owner 3233 Summer Oaks Dr. Apex NC 27539 Street Address, City, State, Zip Code (919) 291-3688 Phone Number 27539
The Applicant must submit a Site Plan. The Site Plan is a map/drawing of the property and must show: 1. existing and/or proposed property lines and easements with dimensions; 2. the location of the facility and appurtenance; 3. the location for the proposed well; 4. the location of existing or proposed sewer lines and/or sewage disposal systems within 100 feet or the proposed well; 5. the location of any existing wells within 100 feet of the property; surface water bodies; 6. above ground and/or underground storage tanks; 7. and any other known sources of contamination within 100 feet of the proposed well site.
The Applicant shall notify the Harnett County Health Director through or by way of the Harnett County Division of Environmental Health if any of the following occur prior to well construction: 1. there is a relocation of the proposed facility; 2. there is a change in the intended use of the facility; 3. there is a need for installing the waste water system in an area other than indicated on the well permit; or 4. there are landscape changed that affect site drainage. Contact information: Environmental Health Division - 910-893-7547
PROPERTY INFORMATION
Proposed use of well Single-Family Multifamily Church Restaurant Business Irrigation □
Street Address Oakridge Dancan Subdivision/Lot # 2015 - 342 map # Parcel # 05-0645 6202-03 PIN # 0635-97-1400,000
Directions to the Site
401 NORTH to 42 WEST LEFT ON OAKRIDGE DUNCANRO # MILE ON RIGHT - + ME BIG POND
I have thoroughly read and completed this Application and certify that the information provided herein is true, complete and correct to the best of my knowledge and is give in good faith. Representatives of the Harnett County Health Department and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable rules.
I have thoroughly read and completed this Application and certify that the information provided herein is true, complete and correct to the best of my knowledge and is give in good faith. Representatives of the Harnett County Health Department and

09/09/11

Harnett County Central Permitting
PO Box 65 Lillington NC 27546
910 893 7525 Fax 910 893 2793 www harnett org/permits

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Frach 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 Stophen Scardino	Date _ Aug. \$5,20,
Site Address	Phone 9/9-297-3688
Directions to job site from Lillington	
Subdivision 2615-342	Lot
Description of Proposed Work Single family home	# of Bedrooms
leated SF 38/5 Unheated SF Finished Bonus Room? General Contractor Information	Crawl Space Slab
	basement 919-761-3857
Building Contractor's Company Name	Telephone
1087 Wood Aus Church Rd	bigsky homesine @msn.c
Address	Email Address
28251	
Description of Work New Const. Home Service Size	1
	Amps T-PoleYesNo
Electrical Contractor's Company Name	919-413-2763 Telephone
B.L. Cypel Co	
address	Email Address
30174-6	
mechanical/HVAC Contractor Inform	ation
we have count Harris	
Description of Work Western School S	NC 919-422-4707
Mechanical Contractor's Company Name	Telephone
126 Highway 20 Suite D Garner NC 27529	Email Address
Address 0 0 0 0 0 0 0 0 0 0	Lilian Address
icense #	
Plumbing Contractor Informatio	, ,
Description of Work New Corst, Home	#Baths > 1641
Plumbing Service Profesionals	Telephone
Plumbing Contractor's Company Name 5 300 MAPLE CHASE LN. APEX, WC	, 500
Address 27539	Email Address
icense #	an.
Insulation Contractor Information	919-496-3512
Insulation Contractor's Company Name & Address	Telephone
708 E.F. Cottrell Rd. LouisBWG	

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 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 Affidavit for Worker's Compensation N C G S 87-14 The undersigned applicant being the Officer/Agent of the Contractor or Owner Owner General Contractor 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 Sign w/Title

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	idelity National Title Company, LLC
Mailing address of Agent	19 W. Hargett St. Suite 507
	Raleigh NC 27601
Physical address of Agent	
Telephone 888-690-7	384 Fax 913-489-5231
Email support 0/	ieusno, 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."