initial Application Date:	7	14/16
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Application # 1650039	ညျ	ť
CU#	-	

ar Application Date:	11910	Application # 165003
Central Permitting	COUNTY OF HARNETT	
"A RECORDED SU		RESIDENTIAL LAND USE APPLICATION Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.hai
IDOWNER: CUM	AMIA-M II-	MOTIAGE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE API
DOTTALK	MBERLAND HOWES	Mailing Address:

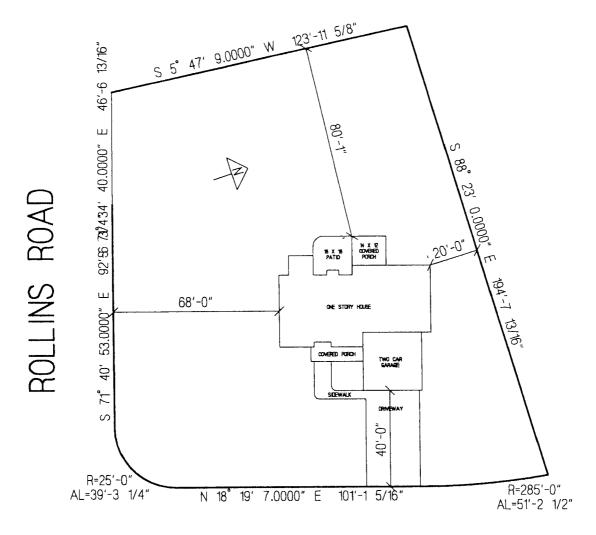
"A RECORDED SU	RVEY MAP, RECORDED DEI	ED (OR OFFER TO PURCHASE)	2 C(TC 5) 4 11	Fax: (910) 893-2793	
		UAREL			
City://	State:	Mailir Zip: Contact N	ng Address:	Dame as E	elow
APPLICANT:	Sarland III	Sac. Mailing Address:	Λο: <i>//</i>	Email:	//
City: Dunn	ENUNA FIONE	Mailing Address:	DO. Box	727	
Please fill out applicant information	ation if different than landowr	ner Zipizzo Contact N	o: <u>910-892-4</u>	345 Email: 100000	ris 1957 @ yahoo.co.
CONTACT NAME APPLYIN	NG IN DEFICE: MICH	HI-115 30 //	7	V	=======================================
PROPERTY		10 c/o.	an	Phone # 9/0 - 8	92-4345
PROPERTY LOCATION: S State Road # 1413 Parcel: 0800	ubdivision / HE	PESERVE			lal.
Farcel: D80	State Road Name:	ROLLINS	RD	Map Book & Page	2016-11-1
Parcel: 080 0	41) 0100	22 PIN: _	0645.56	-1615.000	
	Valershed.	· /\ / / \ / - · · · · · · · · · · · · · · · · · ·	7/1/5 200		UKE
	as Energy as service prov	vider need to supply premise	number	from P	rogress Energy
L KOLOSED OSE:					
SFD: (Size 62 x 5)	2) # Bedrooms: 3 # Ba	ths: 2 Basement(w/wn hath			/Monalist :
	(Is the bonus room finis	hed? (V) yes () no w/ a	closet? () yes () no (if yes add in with # b-	Slab: Slab:
☐ Mod: (Sizex) # Bedrooms # Bat	the Bacoment ()		o - () es ada in with # Dei	Prooms)
	(Is the second floor finis	ths Basemen! (w/wo batt hed? () yes () no Ar	T) Garage: S	ite Built Deck: On Fra	me Off Frame
			יווט טעוון שעטעוון	ors () yes () no	
		Sizex)# Bedro	ooms: Garage:	(site built?) Deck:	(site buitt?)
Duplex: (Sizex_) No. Buildings:	No. Bedrooms F	er Unit:		
☐ Home Occupation: # Ro	ioms:Usi	e:	four of One the		
☐ Addition/Accessory/Othe	er: /¢izo	'	iouis of Operation:		#Employees:
	71. (SizeX) Us	se:		Closets in addit	on? () yes () no
County	Existing Well	New Well (# of due !!:	-		
	THE THE BUILDING	a manufactured home within	From house	County Sev	ver
	The strict disagraph	erground of overhead (\ \ \ \	es (V) no) of traci listed above? () yes (Y) no
Structures (existing or propose	ed) Single family dwelling	1		Other (specify):	
Required Residential Prope	rty Line Sethacks	2			
ront Minimum 35	Actual 40	Comments:			
25 Rear	80'1"				
Closest Side //	20				
Sidestreet/corner lot_20	20				
learest Building	NA	-			
n same lot					

Residential Land Use Application

SPECIFIC DIRECTIONS TO THE PROPERTY FROM THE PRO
SUBDIVIS ION IS ON LEFT:
LIGHT RD TURN CEFT UNTO CHRISTIAN
SURPLUS TURN RIGHT ONTO ROLLING PO
SUBDIVISION IS ON LOFT.
If permits are granted I agree to conform to all ordinances and laws of the State of North Corolling
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 submitt 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
Date Date
*** t is the owner/or "

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**



RESERVE DRIVE

CUMBERLAND HOMES, INC.

THE OAKLAND WITH SCREEN PORCH

LOT # 22 THE RESERVE

NAPPROVAL SCALE: 1"=40'

SITE PLAN APPROVAL

DISTRICT PLAN APPROVAL

#BEDROOMS

JULY 110

Zoning Approvalstiator

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 #
□
 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. 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 (in
possible) and then put IId 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
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.
<u>SEPTIC</u>
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 <u>irrigation system</u> now or in the future?
{}YES {
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 {1NO 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) DATE

NAME: _____

APPLICATION #:____

by whomever performing work. Must be owner or licensed contractor. Address, company name & phone must match

Harnett County Central Permitting PO Box 65 Lillington, NC 27546 Application

910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Application for Residential Building and Trades Permit

Owner's Name: CHAM BERLAND HOMES, TNC Site Address: 23 RESERVE DRIVE Directions to job site from Lillington: TAKE HWY 401	
Site Address: 23 RESERVE DOLLAR	Date: 5/24/16
Direction to job site from Lillington: TAKE HWY 401 LEFT ONTO CHRISTIAN LIGHT OR	Phone: 9/0-891-4345
LEFT DNTO CUL	THE THE PARTY OF THE
L'EFT ONTO CHRISTIAN LIGHT RD ROLLINS RD SUBDIVISION ON L Subdivision: THE RESERVE	TAKE RIGHT ONTO
Subdivision: THE RESERVE	EFT.
	Lot: 22
Description of Proposed Work: N.S.F. Heated SE: 2179	# of Bedrooms: 3
Heated SF: 2279 Unheated SF: Finished Bonus Room? General Contractor Informa	YES Crawl Space:
General Contractor Informa	tion Slab:Slab:
Building Contractor's Company Name	210-892-4345
2.0. Box 727 Dunn, NC 28335	relephone
1	Small Address 957 @ yahoo.com
Signature of Owner/Contractor/Officer(s) of Corporation	59493
A Electrical Contract	License #
Description of Work New Residential Service Size	tion
Electrical Contractor's Company Name	License # tion e: 200 Amps T-Pole: Yes No
Contractor & Company Name	919 - 499 - 5389 Telephone
546 Leslie Dr. Saxford NC	NA
Witness Words	Email Address
Signature of Owner/Contractor/Officer(s) of Corporation	12007-11
Miechanical/HVAC Contractor Info	License #
The state of the state of	esidentia (
Mechanical Contractor's Company Name	910-818-11/10
	Telephone/
Address Address Address Address Act 28348	3 N/A
Large Parker	Email Address
Signature of Swn Contractor/Officer(s) of Corporation	200/2 License #
Description - Charles - Plumbing Contractor Information	on
AM 15	_# Baths_ ${\cal Q}$
Plumbing Contractor's Company Name	910-814-7705
619 BYLO RD BUNNEDIEL NE 2022	Telephone
Address DANNOEVEL NC 21323	MA
Signature of Own	Email Address
Signature of Owner/Contractor/Officer(s) of Corporation	License #
Insulation Contractor Information	<u>n</u>
Insulation Contractor Information Insulation Contractor's Company Name & Address RALEIGH	4119-172-9000
CALE 1674	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 <u>by signing below I have obtained all subcontractors permission to obtain these permits</u> and if <u>any</u> 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

Signature of wheel/Contractor/Officer(s) of Corporation

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 CHABERIAND HOUFS, FNC
Sign w/Title Date 5/54/16

\sim	\bigcirc	Date	7114116		
Plan Box #	}-	Job Name Clark			
App # 393	211 v	/aluation <u>24039</u>	Garage	2279 584 2863	
Inspections for S	SFD/SFA				
Crawl	Slab	Mono	Basement	_	
Footing Foundation Address Open Floor Rough In Insulation Final	Footing Foundation Address Slab Rough In Insulation Final	Plum Under Slab Ele. Under Slab Address Mono Slab Rough In Insulation Final	Footing Foundation Waterproofing Plum Under slab Address Slab Open Floor Rough In Insulation Final		
Foundation Surve	ey En	ovir. Health	Other		
Additions / Other Footing Foundation Slab			(21008	
Mono Mono Open Floor Rough In Insulation Final		,			

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 528560

Filed on: 09/13/2016

Initially filed by: cumberlandhomes

Designated Lien Agent

Project Property

Print & Post

Investors Title Insurance Company

Online: www.lienanc.com

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

27601

Fax: 913-489-5231

Email: support@lienanc.com

Lot # 22 The Reserve PIN # 0645-56-1615 000

23 Reserve Drive Fuquay-Varina, NC 27526

Property Type

1-2 Family Dwelling

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

Cummberland Homes, Inc. PO Box 727 Dunn, NC 28335 United States

Email. norrisbuildinggroup@yahoo com

Phone 910-892-4345

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.
Date 9/13/16
   Property Zoning . . . . . RES/AGRI DIST - RA-30
                               Contractor
                               ______
   -------
                               CUMBERLAND HOMES INC
   CUMBERLAND HOMES INC
                               PO BOX 727
   PO BOX 727
                                              NC 28335
                               DUNN
                  NC 28335
   DUNN
                              (910) 892-4345
   Applicant
   ___
   CUMBERLAND HOMES INC #22
   PO BOX 727
                  NC 28335
   DUNN
   (910) 892-4345
  Structure Information 000 000 62X52 3BDR SLAB W/ GARAGE
   Flood Zone . . . . . . . FLOOD ZONE X
                                             3000000.00
   Other struct info . . . . # BEDROOMS
                         # PEDROOMS
PROPOSED USE
                        SEPTIC - EXISTING? NEW TANK
WATER SUPPLY COUNTY
_____
   Permit . . . . . BLDG, MECH, ELEC, PLB, INSU PERMIT
   Additional desc . .
   Phone Access Code . 1149251
   Issue Date . . . 9/13/16
Expiration Date . . 9/13/17
                                Valuation . . . .
______
   Special Notes and Comments
    T/S: 07/14/2016 11:31 AM JBROCK ----
THE RESERVE #22 - OFF OF ROLLINS RD
    PERMIT INCLUDES BLDG, ELEC, MECH, PLUMB
    INSULATION AND LAND USE.
    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 Bldg Insp scheduled before 2pm available next business day.

Page 2 Date 9/13/16

Permit BLDG, MECH, ELEC, PLB, INSU PERMIT

Additional desc . .

Phone Access Code . 1149251 -----

Required Inspections

	hone nsp# 	Insp Code	Description	Initials	Date
10 20 20-30 30-999 30-999 30-999 40-50 40-60 40-60 40-60 50-60 50-60 50-60 50-60	101 103 814 111 309 205 129 425 125 325 225 429 131 329 229 209	B101 B103 A814 B111 P309 E205 I129 R425 R125 R325 R225 R429 R131 R329 R229 E209 H824	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*INSULATION INSPECTION FOUR TRADE ROUGH IN ONE TRADE ROUGH IN THREE TRADE ROUGH IN TWO TRADE ROUGH IN FOUR TRADE FINAL ONE TRADE FINAL THREE TRADE FINAL THREE TRADE FINAL THREE TRADE FINAL THREE TRADE FINAL TWO TRADE FINAL R*ELEC TEMP POWER CERT ENVIR. OPERATIONS PERMIT		