

Initial Application Date: 26 Jul 16

Application # 1650039308

CU# _____

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION
Central Permitting 198 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: Picket Fence Homes Mailing Address: PO Box 285
City: Fay State: NC Zip: 28302 Contact No: 9103910341 Email: johnkoenig@nc.rr.com

APPLICANT: Same Mailing Address: _____
City: _____ State: _____ Zip: _____ Contact No: _____ Email: _____
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: John Koenig Phone # 9103910341

PROPERTY LOCATION: Subdivision: Tingen Pointe Lot #: 164 Lot Size: .35
State Road #: _____ State Road Name: 829 Juno Dr Map Book & Page: 2014/179
Parcel: 03957601008876 PIN: 9597239215.000
Zoning: R20R Flood Zone: X Watershed: M Deed Book & Page: 22510094 Power Company*: _____

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

PROPOSED USE:

- SFD: (Size 63x41.8) # Bedrooms: 3 # Baths: 2 Basement(w/wo bath): _____ Garage: 2 Deck: 1 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: 1 Manufactured Homes: _____ Other (specify): _____

Required Residential Property Line Setbacks:

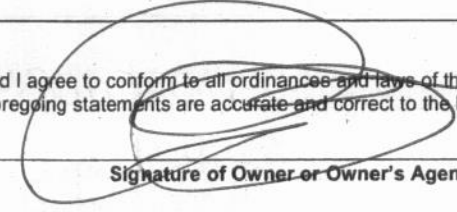
	Minimum	Actual
Front	<u>35</u>	<u>36</u>
Rear	<u>25</u>	<u>117</u>
Closest Side	<u>10</u>	<u>10</u>
Sidestreet/corner lot	<u>NA</u>	<u>NA</u>
Nearest Building on same lot	<u>NA</u>	<u>NA</u>

Comments: _____

Confirm # 016906

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: NC27W Tingen Pointe
Rd Juno Dr

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

7/26/16
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

NAME: _____

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 **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. _____
 { } 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?

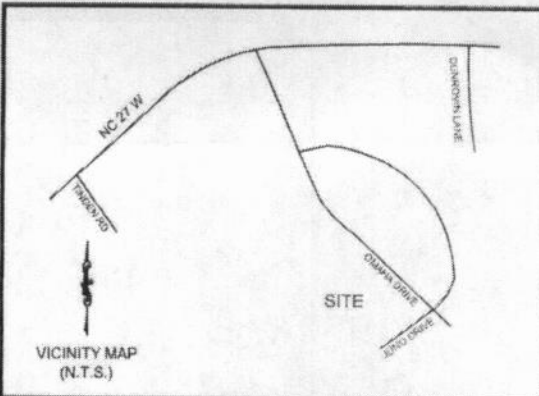
If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service.

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.

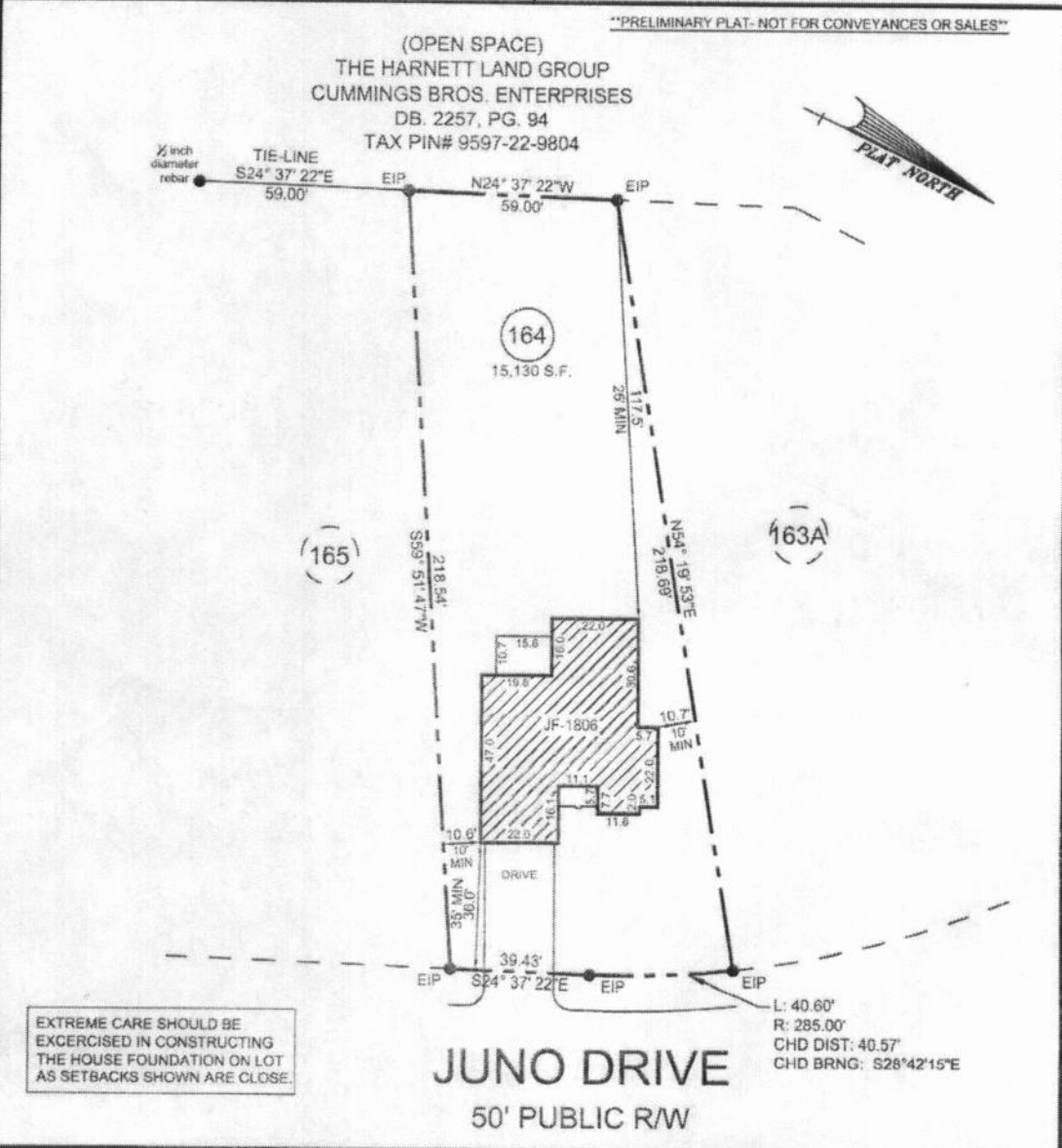
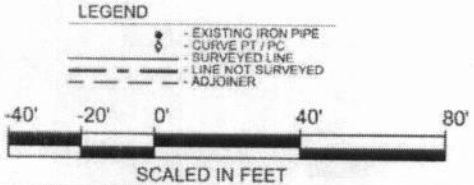
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

DATE

7/26/16



- This plat is for location purposes only. Builder should verify foundation information with plans before construction begins.
- There is no USCE or NCGS monument within 2000' of this site.
- The subject property is not within a special flood hazard area as determined by the Department of Housing and Urban Development.
- The easement information shown hereon was obtained from the recorded plat. No updated title search was performed by the surveyor.
- All distances are measured in feet.



- PLOT PLAN FOR -
PICKET FENCE HOMES
- SUBDIVISION -
TINGEN POINTE - PHASE 6

BARBECUE TWP.
HARNETT CO.
NORTH CAROLINA

JULY 25, 2016
SCALE 1" = 40'
FIELD BOOK

REFERENCE
BOOK 2014, PAGE 179
HARNETT COUNTY NORTH CAROLINA REGISTRY

115 broadfoot ave
p.o. box 53774
Layetteville, n.c. 28365
phone 910-484-9191
fax 910-484-0368
LICENSE #. F-0106

ENGINEERS
PLANNERS
SURVEYORS
MOORMAN, KIZER & REITZEL, INC.

PROF. SURVEYOR NO. 20253

SOUTHEASTERN SOIL & ENVIRONMENTAL ASSOC., INC.

PROPOSED SUBSURFACE WASTE DISPOSAL SYSTEM DETAIL SHEET

SUBDIVISION: TINGEN POINT

LOT 164

INITIAL SYSTEM: APPROVED 25% REDUCTION

REPAIR: APPROVED 25% REDUCT

DISTRIBUTION: SEMAC

DISTRIBUTION SEMAC

BENCHMARK: 100.0

LOCATION PL 163A/164

NO. BEDROOMS: 3

LTAR 0.4 GPD/FT²

LINE FLAG COLOR ELEVATION LENGTH

LINE	FLAG COLOR	ELEVATION	LENGTH
In-tial system 1A 2A 1 2	B	105.34	40'
	O	104.92	55'
	B	104.25	70'
	O	103.92	65'
			<u>230'</u>
3	B	103.42	60'
4	O	102.84	55'
5	B	102.25	50'
6	O	101.75	50'
7	B	100.92	40'
			<u>255'</u>

BY M. EAKER

DATE 06/2016

TYPICAL PROFILE

0-12 US (VFr, wgs)
12-36+ SLL (Fr/Fi, shlc)
11 2 > 32"
INSTALL AT 19"

THERE SHALL BE NO GRADING

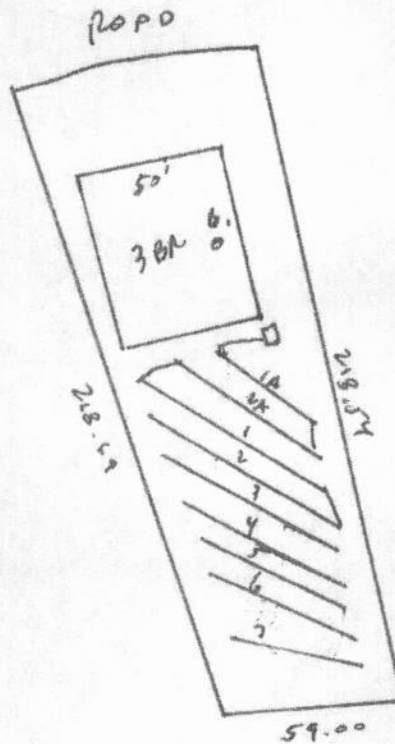
RUTTING CUTTING OR OTHER SOIL

DISTURBANCE IN SEPTIC AREA

ANY DISTURBANCE MAY CAUSE A SITE
TO BECOME UNSUITABLE

Southeastern Soil & Environmental Associates, Inc.

P.O. Box 9321
Fayetteville, NC 28311
Phone/Fax (910) 822-4540
Email mike@southeasternsoil.com



1" = 60'

HARNETT COUNTY CASH RECEIPTS

*** CUSTOMER RECEIPT ***

Oper: JFORBES Type: CP Drawer: 1
Date: 7/26/16 51 Receipt no: 28669

Year	Number	Amount
2016	50039300	
92941	TECH 4	
LILLINGTON, NC	27546	
B4	BP - ENV HEALTH FEES	\$750.00

NEW TANK

JAFISH LLC
JOHN S KOENIG

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

Trans date: 7/26/16 Time: 12:04:12

** THANK YOU FOR YOUR PAYMENT **

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 Picket Fence Homes, LLC Date 7/27/16
Site Address 829 Juno DR, Broadway, NC 27505 Phone 910-391-0341
Directions to job site from Lillington Hiway 27 to Tingen Pointe. Turn onto Omaha. Go to T-intersection. Right on Juno. Last house on left.
Subdivision Tingen Pointe Lot 164
Description of Proposed Work new construction # of Bedrooms 3
Heated SF 1806 Unheated SF 754 Finished Bonus Room? No Crawl Space No Slab X

General Contractor Information

Picket Fence Homes 910-391-0344
Building Contractor's Company Name Telephone
PO Box 285 Fayetteville NC johnkoenig@nc.rr.com
Address 28302 Email Address
67377
License #

Electrical Contractor Information

Description of Work HOUSE WIRING Service Size 200 Amps T-Pole X Yes No
SANDY RIDGE ELECTRIC 910-323-2458
Electrical Contractor's Company Name Telephone
454 Whitehead Rd, Fayetteville, NC diane@sandyridgeelectric.com
Address 28312 Email Address
10006 U
License #

Mechanical/HVAC Contractor Information

Description of Work Install 3 Ton heat pump, both fans & venting
Certified Heating & Air Conditioning 910-858-0000
Mechanical Contractor's Company Name Telephone
PO Box 1071 Hope Mills, NC 28348 certifiedheatair@emborg
Address 20012 Email Address mail.com
License #

Plumbing Contractor Information

Description of Work Plumbing # Baths 2
Vance Johnson Plumbing 910-424-6712
Plumbing Contractor's Company Name Telephone
3242 Mid Pine Dr, Fayetteville NC stoepfer@vjplumbing.com
Address 28306 Email Address
7756-P1
License #

Insulation Contractor Information

Gumbelland Insulation 910-484-7118
Insulation Contractor's Company Name & Address Telephone
4205 Clinton Rd, Fayetteville NC
28312

*NOTE General Contractor must fill out and sign the second page of this application

H3CL

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

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

Date

7/27/16

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

Picket Fence Homes, LLC

Sign w/Title

owner/manager

Date

7/27/16