nitial Application	Date:	7/25/16	
inda rippiloddoll	Duto.		

	29219
Application #	3131
	*

# 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

ANDOWNER: Com	nfort Homes, Inc	с.		Mailing Address: P O	Box 369		
City: Clayton		State:_NC _ Zi	p:_27528	_ Contact No: 919 553 32	42 Em	ail: comfrthor	nes@aol.com
PPLICANT*: Com	fort Homes, Inc.		Mailing A	ddress: P O Box 369			
city. Clayton		State: NC 7ii	27528	ddress: P O Box 369  Contact No: 919 553 32	42 Em	comfrthor	nes@aol.com
Please fill out applicant	t information if differ	ent than landowner					
ONTACT NAME A	PPLYING IN OFF	FICE: Julian Stewar	t		Phone #_	919 422 148	1
ROPERTY LOCAT	ION: Subdivision	Oxford Woods		exfordwo		Lot #: 39	Lot Size: 1.28 acre
tate Road #	State	Road Name	760	exford wo	oods D	Man Book & P	age: 2008, 2144
arcel: 040692 001	17 34	71.000 110.110		PIN: 0682-98-3848.0		map Book a r	ugo. <u>9, 9, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7,</u>
		IV				_ D	uke Progress Energy
				d Book & Page:/		Company*:	and Fregress Energy
New structures with	Progress Energy	as service provider r	need to su	pply premise number 95934	4156	from	m Progress Energy.
ROPOSED USE:							
SED: /Size 54	52.5' # Bode	rooms. 3 # Baths. 2	Rasam	ent(w/wo bath): Garage	. ✓ Deck. ✓	Crawl Space	✓ Slah: Monolithic
SFD. (Size				ent(w/wo batn): Garage (✓) no w/ a closet? () y			
	(is the b	onus room misned?	yes	no w/a closetr () y	es (+) no (if ye	o auu iii wiili #	bedrooms)
Mod: (Size	v \#Bedr	rooms # Baths	Basem	ent (w/wo bath) Garage	· Site Built [	ock: Or	Frame Off Frame
Widd. (Size				() no Any other site but			rraneOn rrane
	(is the s	econd noor misned?	() yes	() no Any other site bu	iit additions : (	) yes () 110	
Manufactured H	lome: SW	DW TW/Size	~	) # Bedrooms: Ga	rage: (eite b	uilt2 \ Dack	· (eite huilt? )
Manufactured F	ionesvv		^	) # Deditions Ga	arage(site bi	Jill:) Deck	(site built?)
Dupley: (Cize	v ) No	Duildings:	NI	o. Bedrooms Per Unit:			
Duplex: (Size _		buildings		o. Bedrooms Per Onit			
Home Occupation	en: # Rooms:	Use:	160	Hours of Opera	ntion:		#Employees:
Addition/Access	sory/Other: (Size	x) Use:_			250	Closets in	addition? () yes () n
Vater Supply: ✓	County	Existing Well	New Wel	I (# of dwellings using well _	) *Must	have operable	e water before final
				Existing Septic Tank (Con			y Sewer
oes owner of this tr	act of land, own l	and that contains a m	nanufactur	ed home within five hundred	feet (500') of tra	ct listed above	? () yes ( <b>√</b> ) no
oes the property co	ntain any easeme	ents whether undergr	ound or o	verhead (✓) yes () no			
						011	
tructures (existing o	or proposed): Sing	gle family dwellings: F		Manufactured Home	s:	Other (sp	ecity):
		6.4.					
Required Resident	A STATE OF THE PARTY OF THE PARTY.		Comme	ents:			
ront Minimum	35' Acti	ual_40'					16876
tear	25'	125'					
	10'	15'					
Closest Side	n/a						
idestreet/corner lot			-	-0 - 11	(0) 1 / ()	rn	
Nearest Building	n/a		4	nim#	0/6	50	
n same lot						-70	

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:	NC 210 N; right on Benson Road; right on Old Stage; subdivision on right
If permits are granted I agree to conform to all ordinances and laws of	f the State of North Carolina regulating such work and the specifications of plans submitted ne best of my knowledge. Permit subject to revocation if false information is provided.
ASHEN) OFE	7/25/16
Signature of Owner or Owner's Ag	ent Date

\*\*This application expires 6 months from the initial date if permits have not been issued\*\*

<sup>\*\*\*</sup>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.\*\*\*

A blomas Inc. 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. CEDTIC

If applying	for authorizati	on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.
() Acc	epted	[_] Innovative [_] Any
{}} Alte	rnative	{
The application. I	ant shall notify f the answer is	the local health department upon submittal of this application if any of the following apply to the property in a "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:
{_}}YES	{_}} NO	Does the site contain any Jurisdictional Wetlands?
{_}}YES	NO (X)	Do you plan to have an <u>irrigation system</u> now or in the future?
{_}}YES	$\{\underline{X}\}$ NO	Does or will the building contain any drains? Please explain
()YES	1X NO	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
{_}}YES	ONK	Is any wastewater going to be generated on the site other than domestic sewage?
{_}}YES	ON (X)	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? - only Street rial of way
		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)

)- 25- 16 DATE 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 <a href="https://example.com/linearing-number-of-bedrooms-building-number-of-b

**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/Contracto Officer(s) of Corporation Affidavit for Worker's Compensation N C G S 87-14 The undersigned applicant being the General Contractor Officer/Agent of the Contractor or Owner Do hereby confirm under penalties of perjury that the person(s) rfirm(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

Each section below to be filled out 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
910 893 7525 Fair 910 893 2793 www harnett org/permits

# Application for Residential Building and Trades Permit

Owner's Name Combot Homes Inc	Date 7-20-16
	11er Phone 919-553-3242
0.0	ant on Benson Rd'
right on Old Stage; Subdivision	
. Le 21. 210 21db "maro: 2121	Oritidal
17-0-4117-16	20
Subdivision Oxford Woods	C Lot 39
Description of Proposed Work Construction of Single	tomily # of Bedrooms 3
Heated SF 1604 Unheated SF 531 Finished Bonus Room?  General Contractor Information	On Crawl Space 400 Slab
and sand fredma	919-553-3242
Building Contractor's Company Name	Telephone
Scrot 369 Clayer DC 20528	Confet homes @aol. co
Address	Email Address
33184	
License # Electrical Contractor Informat	IOD
Description of Work Pach in 2 trim Dut Service Size	Amps T-PoleYesNo
Summer field Electric	919-975-0599
Electrical Contractor's Company Name	Telephone
205 Thanksaining Vol Fire Deck Rd	
Address Selma NC	Email Address
33835 37576	
License #	
Mechanical/ IVAC Contractor Info	
Description of Work Rough in timent 10 ther	vertibetion
Hecherian Healing & His	919-329-0686
Mechanical Contractor's Company Name	Telephone
343 Shipwosh Dr. Garner DC 275	5 8 7
Address 18644	Email Address
License # Plumbing Contractor Information	tion
Description of Work Puck in I dein out	# Baths
0:71	919-934-1379
Plumbing Contractor's Company Name	Telephone
755 Rock Pillar Rd Claybor NC	To option o
Address 200	Email Address
20823	90
License #	
Insulation Contractor Informa	tion O.O. V. V. SOOO
1 atum Insulation - 519 Old Drugh	re Rd 919-661-0999
Insulation Contractor's Company Name & Address Garage &	Telephone
27529	

## DO NOT REMOVE!

# Details: Appointment of Lien Agent

Entry #: 500929

Filed on: 07/20/2016

Initially filed by: ComfortHomes

### Designated Lien Agent

WFG National Title Insurance Company

Online: www.liensnc.com(http://www.liensnc.com)

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

27601

Phone: 888-690-7384

Fax: 913-489-5231

Email: support@bensnc.com(milto-support@bensnc.com)

## **Project Property**

Oxford Woods lot 39 176 OXFORD WOODS DRIVE ANGIER, NC 27501 Harnett County

#### Property Type

1-2 Family Dwelling

## Print & Post



#### Contractors

Please post this notice on the Job Site.

#### Suppliers and Subcontractors:

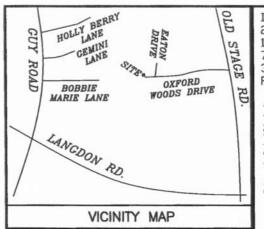
Scan this image with your smart phone to view this filing. You can then file a Notice to Lien Agent for this project.

#### Owner Information

Comfort Homes, Inc.
P O Box 369
Clayton, NC 27528
United States
Email: comfrthomes@aol.com
Phone: 919-553-3242

View Comments (0)

Technical Support Hotline: (888) 690-7384



IMPERVIOUS SURFACE COVERAGE 2220 SQ.FT. - HOUSE & GARAGE 163 SQ.FT. - WALK & STEPS 799 SQ.FT. - DRIVEWAY 3182 TOTAL SQ.FT. - PROPOSED COVERAGE PERCENTAGE OF LOT COVERED - 5.7%

ALL DRAINAGE EASEMENTS SHALL BE DEDICATED AS PUBLIC AND IT SHALL BE THE RESPONSIBILITY OF THE PROPERTY OWNERS TO MAINTAIN THE DRAINAGE EASEMENTS AND ANY DRAINAGE STRUCTURES THEREIN SO AS TO MAINTAIN THE INTEGRITY OF THIS DRAINAGE SYSTEM AND INSURE POSITIVE DRAINAGE.

A 15' CONSTRUCTION EASEMENT SHALL BE RESERVED ON BOTH SIDES OF ALL PROPOSED STREETS.

BEING 39 OF OXFORD WOODS SUBDIVISION, RECORDED IN MAP NUMBER 2008-214 & 215.

NOTE: AREA COMPUTED BY COORDINATE METHOD.

RECORDED MAP HAS BEEN PREVIOUSLY TIED TO GRID.

NOTE: THIS PROPERTY IS SUBJECT TO EASEMENTS AND RESTRICTIONS OF RECORD.

PRELIMINARY PLAT- NOT FOR RECORDATION, CONVEYANCES, OR SALES.

Curve	Radius	Length	Chord	Chord Bear.
C1	285.00'	63.15'	63.02'	S 84°36'36" W

'I, Danny D. Williams, certify that this map was drawn under my supervision; that the boundaries not surveyed are indicated as drawn from incoming in Map Number 2008-214 & 215; that the ratio of precision or positional daccuracy is 110'000, and that this map meets the requirements of The Sandards of Practice for Land Surveying in North Carolina (21 NCAC 56.1600).

This 21st day of JULY, 2016.

Professional Land Surveyor NOTE: NOT AN ACTUAL FIELD SURVEY. INFORMATION TAKEN FROM MAP NUMBER

WILLIAMS - PEARCE and ASSOC., WILLIAMS PROFESSIONAL LAND SURVEYORS. P. A. 1000 N. ARENDELL AND

P.O. BOX 892, ZEBULON, N.C. 27597

PHONE: 919-269-9605 LIC. # C-0243

S 87°48'23" E 195.92' LOT 39 1.280 ACRES 3 22 E 28 00.22, LOT 38 NUMBER 13.67 12.33 PROPOSED DWELLING PERMANENT UND WETLANDS CONS EASEME 24.0 15,00 458

FUTURE DEVELOPMENT OF MAP

NUMBER 2008-214

N 89°02'32" W 245.07

OXFORD WOODS DRIVE 50' PUBLIC R/W

PLOT PLAN FOR COMFORT HOMES BLACK RIVER TOWNSHIP HARNETT COUNTY NORTH CAROLINA

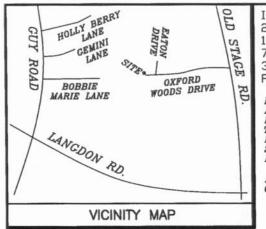
50 100 150

GRAPHIC SCALE - FEET PLAN "ABBIE" OVERALL 54.0 X 52.5 S:\NEWMAPS\O\OXFORD WOODS\PLOT PLAN LOT 39.DWG DRAV

CHE DATE

SCAL

JOB:



IMPERVIOUS SURFACE COVERAGE 2220 SQ.FT. - HOUSE & GARAGE 163 SQ.FT. - WALK & STEPS 799 SQ.FT. - DRIVEWAY 3182 TOTAL SQ.FT. - PROPOSED COVERAGE PERCENTAGE OF LOT COVERED - 5.7%

ALL DRAINAGE EASEMENTS SHALL BE DEDICATED AS PUBLIC AND IT SHALL BE THE RESPONSIBILITY OF THE PROPERTY OWNERS TO MAINTAIN THE DRAINAGE EASEMENTS AND ANY DRAINAGE STRUCTURES THEREIN SO AS TO MAINTAIN THE INTEGRITY OF THIS

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BEING 39 OF OXFORD WOODS SUBDIVISION, RECORDED IN MAP NUMBER 2008-214 & 215.

NOTE: AREA COMPUTED BY COORDINATE METHOD.

RECORDED MAP HAS BEEN PREVIOUSLY TIED TO GRID. NOTE:

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21st day of JULY, 2016

Seal

Professional NOTE: NOT AN ACTUAL FIELD SURVEY. INFORMATION TAKEN PROM. MAP NUMBER

WILLIAMS - PEARCE and ASSOC.

P.O. BOX 892, ZEBULON, N.C. 27597

PHONE: 919-269-9605 LIC. # C-0243

FUTURE DEVELOPMENT OF MAP NUMBER 2008-214 S 87°48'23" E 195.92'

DRAINAGE SYSTEM AND INSURE POSITIVE DRAINAGE. LOT 39 1.280 ACRES Q E 28 DECK 00.2 13.67 PROPOSED DWELLING PERMANENT UND WETLANDS CONS EASEMEN 24.0 15,00 N 89°02'32" W 245.07'

OXFORD WOODS DRIVE 50' PUBLIC R/W

COMFORT HOMES BLACK RIVER TOWNSHIP HARNETT COUNTY NORTH CAROLINA 100 150 50 GRAPHIC SCALE - FEET PLAN "ABBIE" OVERALL 54.0 X 52.5 S:\NEWMAPS\O\OXFORD WOODS\PLOT PLAN LOT 39.DWG

PLOT PLAN FOR

DRAW CHEC

> DATE SCAL

JOB:

July 25, 2016

Comfort Homes, Inc. has an option to purchase Lots 36, 39, 41, and 42 in Oxford Woods Subdivision, recorded in Map Book 2008, Pages 214-215, Harnett County Register of Deeds.

Julia Relater

I. Patricia F. Waite, do hereby certify that Julian R. Stewart. President of Comfort Homes, Inc., personally appeared before me this day and acknowledged the due execution of the foregoing instrument.

Witness my hand and Notarial Seal, this 25th day of July 2016.

Talica Sluce Penotary Public

My commission expires 4/2/17.

HARNETT COUNTY CASH RECEIPTS

\*\*\* CUSTOMER RECEIPT \*\*\*

Oper: JFORBES Type: CP Drawer: 1
Date: 7/27/16 51 Receipt no: 29751

Year Number Amount 2016 50039319
92941 TECH 4
LILLINGTON, NC 27546
B4 BP - ENV HEALTH FEES \$750.00

NEW TANK

CONFORT HOMES INC

Tender detail
CK CHECK PAYMEN 35994 \$750.00
Total tendered \$750.00
Total payment \$750.00

Trans date: 7/27/16 Time: 15:20:11

\*\* THANK YOU FOR YOUR PAYMENT \*\*