

Initial Application Date: 5 Aug 16

Application # 1650039408
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: Amanda ; Seth Henderson Mailing Address: _____

City: _____ State: _____ Zip: _____ Contact No: _____ Email: _____

APPLICANT: Southeastern Gen Contr Mailing Address: 3061 N. Main St, Suite 10C

City: Hope Mills State: NC Zip: 28348 Contact No: 910 568 1967 Email: southeasterngrad@gmail.com

*Please fill out applicant information if different than landowner
CONTACT NAME APPLYING IN OFFICE: Kevin Joell Phone # 910 568 1967

PROPERTY LOCATION: Subdivision: _____ Lot #: 1 Lot Size: 35.72ac

State Road # A200 State Road Name: Dave Rd. Map Book & Page: 3421, 0418

Parcel: 099546 0042 PIN: 9546-67-5227.000

Zoning: R20R Flood Zone: X Watershed: _____ Deed Book & Page: 3421, 0418 Power Company*: _____

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

PROPOSED USE:

SFD: (Size 50 x 65) # Bedrooms: 3 # Baths: 3 1/2 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: 0 Manufactured Homes: _____ Other (specify): _____

Required Residential Property Line Setbacks:

Front Minimum _____ Actual _____
Rear _____
Closest Side _____
Sidestreet/corner lot _____
Nearest Building on same lot _____

Comments: _____
_____ Confirm # 017165 _____

Head west on NC 27W

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Head west on NC 24-27, turn right onto ~~doyle rd~~ • Lch on right side right before Moore and Tee county line.

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.

Kenn Joell
Signature of Owner or Owner's Agent

Aug 3, 2016
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

SITE PLAN APPROVAL

DISTRICT RAZOR USE SFD

#BEDROOMS 3

4 Aug 16 2008
ZONING ADMINISTRATOR

- Right-Of-Way Lines
- Building Setback Lines



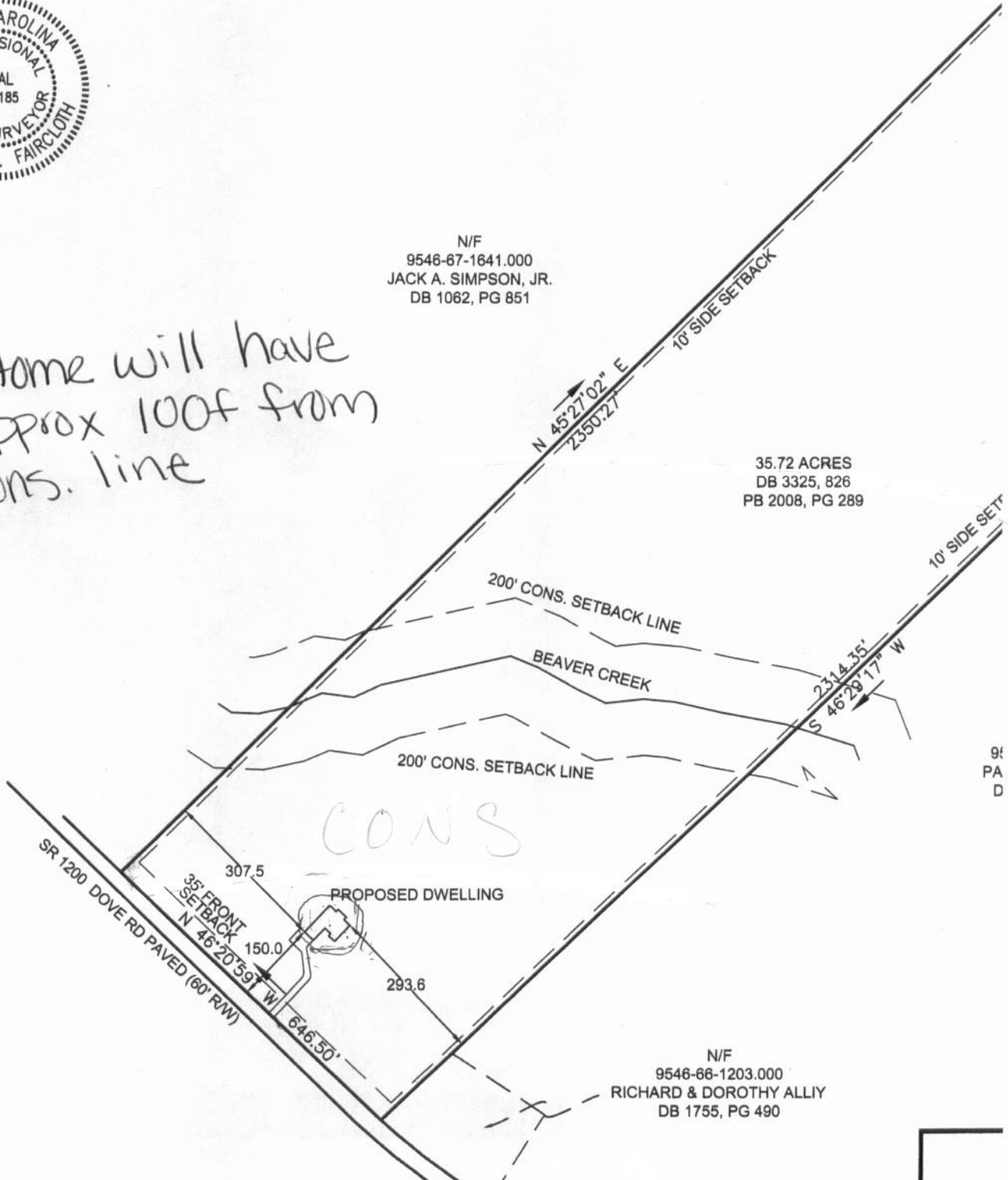
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ended and is
is map be
S 89C-26.

- 5185

N/F
9546-67-1641.000
JACK A. SIMPSON, JR.
DB 1062, PG 851

* Home will have
approx 100ft from
cons. line

35.72 ACRES
DB 3325, 826
PB 2008, PG 289



N/F
9546-66-1203.000
RICHARD & DOROTHY ALLIY
DB 1755, PG 490

9
PA
D

NAME: Sarah Eg

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.

Karen Galt
 PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

Aug 3, 2016
 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

South Eastern General Contracting (910) 568 1967
Applicant/Owner Phone Number
3061 N. Main St. Suite 106 Hope Mills, NC 28348
Street Address, City, State, Zip Code

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 of 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 changes 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 1 dove Rd. Subdivision/Lot # _____
Parcel # _____ PIN # 9546-67-5227.000

Directions to the Site

Head west on NC 27 W. Head west on NC 24-27. Turn right onto dove rd. lot on right side before Moore's Beer County line.

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 given 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 understand that I am solely responsible for the proper identification and labeling of all property lines, underground utility lines, and making the site accessible so that a well can be properly constructed according to the permit.

Kenn Joell Aug 3, 2016
Property Owner's or Owner's Legal Representative Signature Required Date

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 Amenda & Seth Henderson Date Aug 3, 2016

Site Address 1 Dove Rd. Cameron, NC Phone _____

Directions to job site from Lillington Head west on NC 27 W. Head west on NC 24-27.
Turn right onto dove rd. Lot on right side right before
moore & lee county line.

Subdivision _____ Lot _____

Description of Proposed Work New Construction Single Dwelling # of Bedrooms 3 1/2

Heated SF 2783 Unheated SF _____ Finished Bonus Room? Crawl Space _____ Slab

General Contractor Information

Seth Eastern General Contracting, Inc
Building Contractor's Company Name
3061 N. Main St. Suite 106 Hope Mills, NC
Address 28348
5432S
License #

910 568 1967
Telephone
southeasterngc@gmail.com
Email Address

Electrical Contractor Information

Description of Work New Construction Service Size 200 Amps T-Pole Yes No

Builders Electric
Electrical Contractor's Company Name

910 309 2715
Telephone

Address
EP-23098
License #

Email Address

Mechanical/HVAC Contractor Information

Description of Work Proy vent & Unit install
Cool Air Inc.

Mechanical Contractor's Company Name
3061 N. Main St. Suite 106 Hope Mills, NC
Address 28348
MP-23101/FG-23102
License #

910 322 7816
Telephone

Email Address

Plumbing Contractor Information

Description of Work New Constr.
Kern Jones Plumbing

Plumbing Contractor's Company Name
Address
RP-23104
License #

Baths 3 1/2
910 978 3288
Telephone

Email Address

Insulation Contractor Information

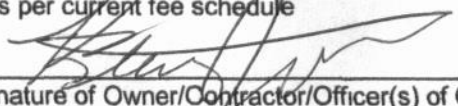
Camberland Insulation
Insulation Contractor's Company Name & Address

210 484 7118
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


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

Aug 3, 2016
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 South Eastern General Contracting

Sign w/Title Kevin J. Old Office Manager Date Aug 3, 2016

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 500498

Filed on: 07/20/2016

Initially filed by: RalphLocklear

Designated Lien Agent

Chicago Title Company, LLC

Online: www.liensnc.com (<mailto:support@liensnc.com>)

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

Phone: 888-690-7384

Fax: 913-489-5231

Email: support@liensnc.com (<mailto:support@liensnc.com>)

Project Property

Lot 1 Dove Rd. (35.72 ac) Cameron, NC 28326
Henderson Residence Seth & Amanda Henderson
Lot 1 Dove Rd.
Cameron, NC 28326
Moore 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

Seth & Amanda Henderson
Lot 1 Dove Rd.
Cameron, NC 28326
United States
Email: southeasterngc@gmail.com
Phone: 910-568-1967

View Comments (0)

Technical Support Hotline: (888) 690-7384

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 Chicago Title Company, LLC

Mailing address of Agent _____

Physical address of Agent _____

Telephone _____ Fax _____

Email _____

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.”

HARNETT COUNTY CASH RECEIPTS

*** CUSTOMER RECEIPT ***

Oper: JFORBES Type: CP Drawer: 1
Date: 8/05/16 51 Receipt no: 39502

Year	Number	Amount
2016	50039400	
92941	TECH 4	
LILLINGTON, NC	27546	
B4	BP - ENV HEALTH FEES	\$1000.00

NEW TANK/ NEW WELL

SOUTHEASTERN GENERAL CONTR.

Tender detail	
CP CREDIT CARD	\$1000.00
Total tendered	\$1000.00
Total payment	\$1000.00

Trans date: 8/05/16 Time: 11:53:49

** THANK YOU FOR YOUR PAYMENT **

Plan Box # File

Date 5 Aug

Job Name Southeastern

App # 39408

Valuation 267108

SQ Feet 2783

Garage 563
= 3346

Inspections for SFD/SFA

Crawl

Slab ✓

Mono

Basement

Footing	Footing	Plum Under Slab	Footing
Foundation	Foundation	Ele. Under Slab	Foundation
Address	Address	Address	Waterproofing
Open Floor	Slab	Mono Slab	Plum Under slab
Rough In	Rough In	Rough In	Address
Insulation	Insulation	Insulation	Slab
Final	Final	Final	Open Floor
			Rough In
			Insulation
			Final

Foundation Survey yes

Envir. Health new

Other

Additions / Other

Footing

Foundation

Slab

Mono

Open Floor

Rough In

Insulation

Final

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	16-50039408	Date	9/09/16
Property Address	DOVE RD		
PARCEL NUMBER	09-9546- - -0042- - -		
Application type description	CP NEW RESIDENTIAL (SFD)		
Subdivision Name			
Property Zoning	PENDING		

Owner

HENDERSON SETH & AMANDA
 123 MAIN STREET
 LILLINGTON NC 27546

Contractor

SOUTHEASTERN CONSTRUCTION OF
 BUIES CREEK, LLC
 PO BOX 4200
 BUIES CREEK NC 27506
 (910) 893-8486

Applicant

KEVIN JOELL
 SOUTHEASTERN GEN CONST

(910) 568-1967

--- Structure Information 000 000 50X65 3BDR CRAWL W/GARAGE & BONUS W/CLOS

Flood Zone	FLOOD ZONE X		
Other struct info	# BEDROOMS		3.00
	PROPOSED USE	SFD	
	SEPTIC - EXISTING?	NEW	
	WATER SUPPLY	WELL	

Permit BLDG, MECH, ELEC, PLB, INSU PERMIT

Additional desc . . .

Phone Access Code . . . 1153774

Issue Date 9/09/16

Valuation 0

Expiration Date . . . 9/09/17

Special Notes and Comments

WEST ON NC27W/ WEST OB NC24-27/ R@ DOVE
 RD/ LOT ON RIGHT SIDE BEFORE LEE &
 MOORE COUNTY LINE

XX
 PERMIT INCLUDES BLDG, ELEC, MECH, PLUMB
 INSULATION AND LAND USE.

XX
 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.

Application Number 16-50039408
Property Address DOVE RD
PARCEL NUMBER 09-9546- - -0042- - -
Application description . . . CP NEW RESIDENTIAL (SFD)
Subdivision Name
Property Zoning PENDING

Permit BLDG,MECH,ELEC,PLB,INSU PERMIT

Additional desc . . .
Phone Access Code . . . 1153774

Page 2
Date 9/09/16

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	_____	___/___/___