

Initial Application Date: 8/1/16

Application # 1650039488

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

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION

LANDOWNER: BARCO DEVELOPMENT INC Mailing Address: Same as below
City: " State: " Zip: " Contact No: " Email: "

APPLICANT: Cumberland Homes, Inc. Mailing Address: P.O. Box 727
City: Dunn State: NC Zip: 28335 Contact No: 910-892-4345 Email: jeannorris1957@yahoo.com

CONTACT NAME APPLYING IN OFFICE: MICHELLE OR Joan Phone # 910-892-4345

PROPERTY LOCATION: Subdivision BRIAN KEITH MEADOWS Lot #: 12 Lot Size: .69
State Road # SR 2215 State Road Name: HARNETT CENTRAL RD
Parcel: 040662 0024 22 PIN: 0662-03-2998.000 Map Book & Page: 2006.1024
Zoning: RA-30 Flood Zone: X Watershed: NA Deed Book & Page: 224B, 0405 Power Company*: DUKE-PROGRESS

PROPOSED USE:

- SFD: (Size 56 x 40) # Bedrooms: 3 # Baths: 2 1/2 Basement (w/w/o 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/w/o 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: NSF Manufactured Homes: _____ Other (specify): _____

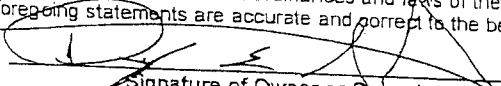
Required Residential Property Line Setbacks:

Front	Minimum <u>35</u>	Actual <u>85</u>
Rear	<u>25</u>	<u>75</u>
Closest Side	<u>10</u>	<u>35</u>
Sidestreet/corner lot	<u>20</u>	<u>N/A</u>
Nearest Building on same lot	<u>N/A</u>	<u>N/A</u>

Comments: _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: TAKE HWY 210 N TOWARDS ANGER
TURN LEFT ONTO HARNETT CENTRAL RD TURN RIGHT INTO
SUBDIVISION ON TYLER BELL LOT IS SLIGHTLY RIGHT IN FRONT
ACROSS STREET

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

8/1/16
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.

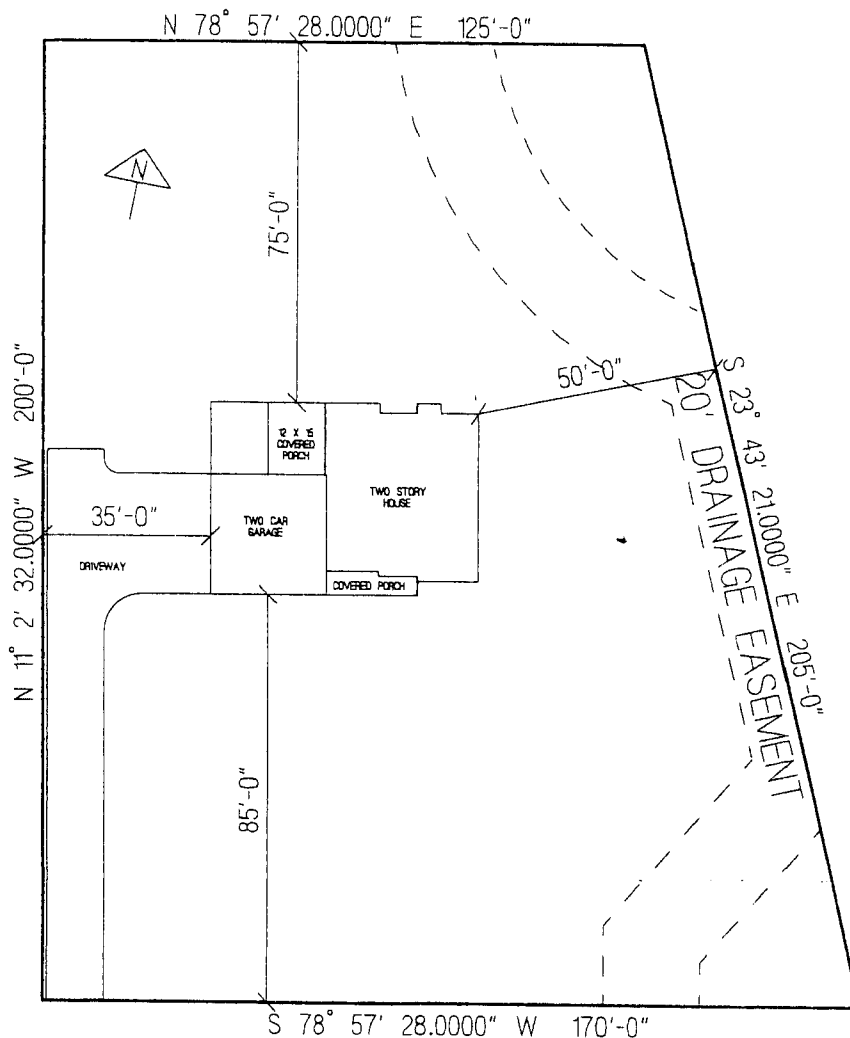
This application expires 6 months from the initial date if permits have not been issued

SITE PLAN APPROVAL

DISTRICT R-30 USE SFD

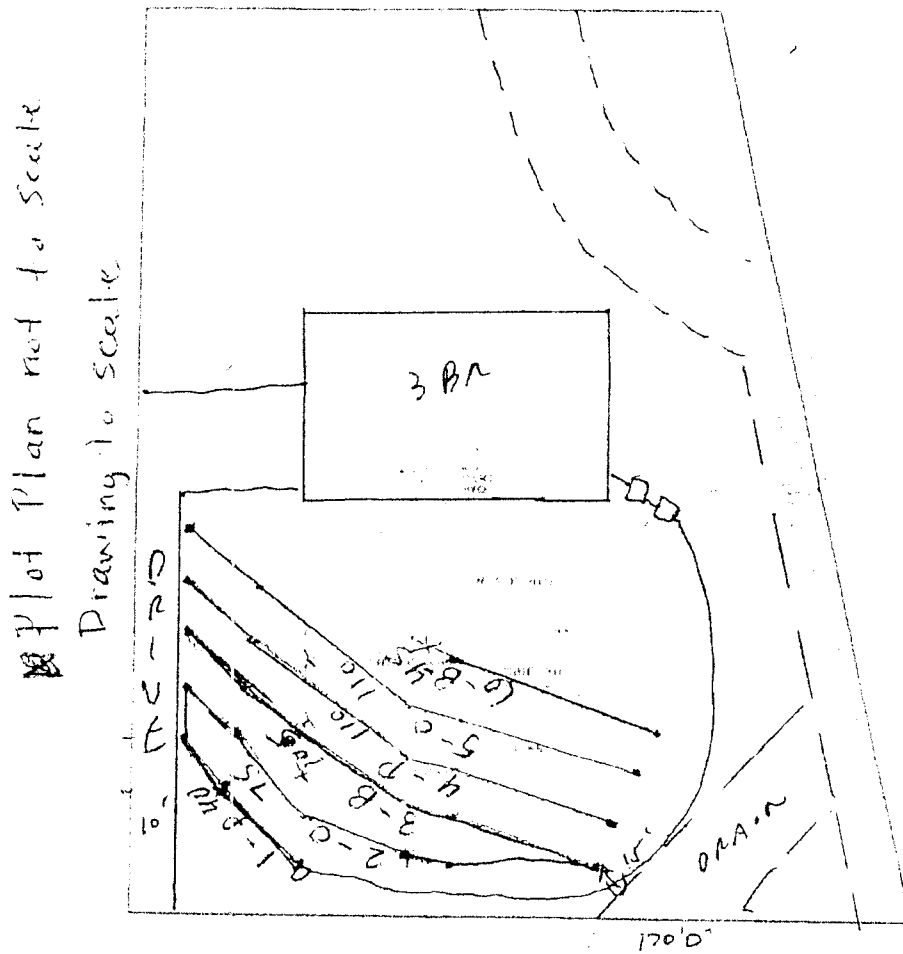
#BEDROOMS 3

Date 8/16/18
Zoning Administrator



FARRAH SHEA WAY

CUMBERLAND HOMES, INC.
 THE NEWPORT WITH SCREEN PORCH
 LOT # 18 BRIAN KEITH MEADOW
 SCALE: 1"=40'



FARRAH SHEA WAY

CUMBERLAND HOMES, INC.
 THE OAKLAND WITH 3RD CAR GARAGE
 LOT # 18 BRIAN KEITH MEADOW
 SCALE: 1"=40'

SOUTHEASTERN SOIL & ENVIRONMENTAL ASSOC., INC.

PROPOSED SUBSURFACE WASTE DISPOSAL SYSTEM DETAIL SHEET

SUBDIVISION: BRIAN KEITH MEADOWS

LOT 18

INITIAL SYSTEM: APPROVED 25% REDUCTION

REPAIR APPROVED 25% REDUCTION ^{pump to}

DISTRIBUTION: SERIAL

DISTRIBUTION SERIAL

BENCHMARK: 100.0

LOCATION Fc 17/18

NO. BEDROOMS: 3

LTAR 0.4 GPO/FT'

LINE	FLAG COLOR	ELEVATION	LENGTH
1	P	98.25	45'
2	O	97.67	75'
3	B	97.08	105'
			<u>225'</u>
4	P	96.50	110'
5	O	95.84	110'
6	B	95.08	35'
			<u>255' AVAIL</u>

Installed
5/1/16

BY M EAKEN

DATE 06/2016

TYPICAL PROFILE

THERE SHALL BE NO GRADING,
CUTTING, LOGGING OR OTHER SOIL
DISTURBANCE IN SEPTIC AREA

0-14" U (VF, ugr)
14-36" SLL (Fr/Fr, 16")
or 2" 36"
INITIAL AT 18"

NAME: Campbell Homes, 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.

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.

Sheri Smith

8/14/16
DATE

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

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: CUMBERLAND HOMES, INC. Date: 8/1/16
Site Address: 56 FARRAH SHEA WAY Phone: 910-892-4345
Directions to job site from Lillington: TAKE HWY 210 N TOWARDS ANGLER TO HARNETT CENTRAL SCHOOL RD TURN LEFT THEN TURN RIGHT INTO SUBDIVISION

Subdivision: BRIAN KEITH MEADOWS Lot: 18
Description of Proposed Work: N.S.F. # of Bedrooms: 3
Heated SF: 2654 Unheated SF: _____ Finished Bonus Room? YES Crawl Space: _____ Slab:

General Contractor Information

Cumberland Homes Inc.
Building Contractor's Company Name 910-892-4345
Address P.O. Box 727 Dunn, NC 28335 Telephone
[Signature] Email Address joanmorris1957@yahoo.com
Signature of Owner/Contractor/Officer(s) of Corporation License # 59493

Electrical Contractor Information

Description of Work New Residential Service Size: 200 Amps T-Pole: Yes ___ No
Wester & Pace Electric
Electrical Contractor's Company Name 919-499-5389
Address 546 Leslie Dr. Sanford, NC Telephone N/A
William Wester Email Address
Signature of Owner/Contractor/Officer(s) of Corporation License # 12007-U

Mechanical/HVAC Contractor Information

Description of Work New Single Family Residential
Certified Heating & Air, LLC
Mechanical Contractor's Company Name 910-818-0600
Address P.O. Box 1071 Hope Mills, NC 28348 Telephone N/A
Larry Parker Email Address
Signature of Owner/Contractor/Officer(s) of Corporation License # 20012

Plumbing Contractor Information

Description of Work New Residential # Baths 2 1/2
JAMIE JOHNSON PLUMBING
Plumbing Contractor's Company Name 910-814-7705
Address 614 BYRD RD BUNNLEVEL NC 28328 Telephone N/A
[Signature] Email Address
Signature of Owner/Contractor/Officer(s) of Corporation License # 21649

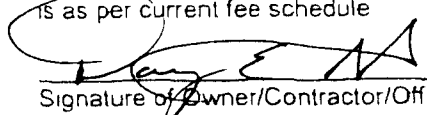
Insulation Contractor Information

INSULATING INC 5902 FAYETTEVILLE RD 919-772-9000
Insulation Contractor's Company Name & Address RALEIGH 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

8/1/16
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

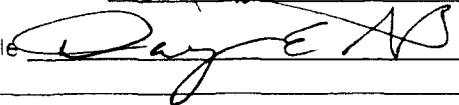
Has one (1) or more subcontractors(s) and has obtained workers compensation insurance to cover them

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 CUMBERLAND HOMES, INC

Sign w/Title  Date 8/1/16