

Initial Application Date: 19 Sept 16

Application # 1650039761

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: Diversified Investors Inc. Mailing Address: P.O. Box 1685

City: Jacksonville State: NC Zip: 28540 Contact No: 910-346-9800 Email: bettyb@jlpnc.com

APPLICANT: Atlantic Construction Inc. Mailing Address: 7 Doris Ave. E.

City: Jacksonville State: NC Zip: 28540 Contact No: 910-938-9053 Email: aci@atlanticconstructioninc.com  
\*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: John Schramm Phone # 910-459-2561

PROPERTY LOCATION: Subdivision: Sweetwater Lot #: 48 Lot Size: 0.422 AC

State Road # 2044 State Road Name: Will Lucas Rd Map Book & Page: 2011 47D

Parcel: 010544 0004 56 PIN: 0544-46-1613.000

Zoning: RA-20R Flood Zone: X Watershed: NA Deed Book & Page: 2363 10941 Power Company: South River Electric

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

**PROPOSED USE:**

SFD: (Size 47.5 x 43) # Bedrooms: 4 # Baths: 2 1/2 Basement (w/wo bath): \_\_\_\_\_ Garage: X <sup>Ratio</sup> Deck: 1 Craw Space: \_\_\_\_\_ Slab: X Monolithic Slab: \_\_\_\_\_  
(Is the bonus room finished? ( ) yes (X) 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: X County \_\_\_\_\_ Existing Well \_\_\_\_\_ New Well (# of dwellings using well \_\_\_\_\_) \*Must have operable water before final

Sewage Supply: X 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:**

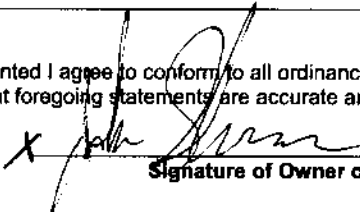
|                              | Minimum   | Actual    |
|------------------------------|-----------|-----------|
| Front                        | <u>35</u> | <u>36</u> |
| Rear                         | <u>25</u> | <u>89</u> |
| Closest Side                 | <u>10</u> | <u>24</u> |
| Sidestreet/corner lot        | <u>NA</u> | <u>NA</u> |
| Nearest Building on same lot | <u>NA</u> | <u>NA</u> |

**Comments:**

confirm # 017983

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: South ON 401  
TURN RIGHT ONTO W. Reeves BRIDGE Rd  
TURN LEFT ONTO LUCAS Rd  
TURN LEFT Hybrid Ln  
TURN RIGHT ONTO RAIN MAKER ST.  
TURN RIGHT ONTO Folly CT.

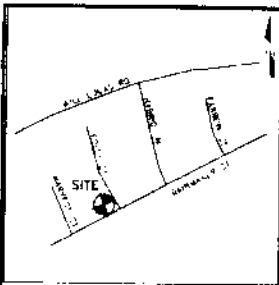
If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted. I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

X   
Signature of Owner or Owner's Agent

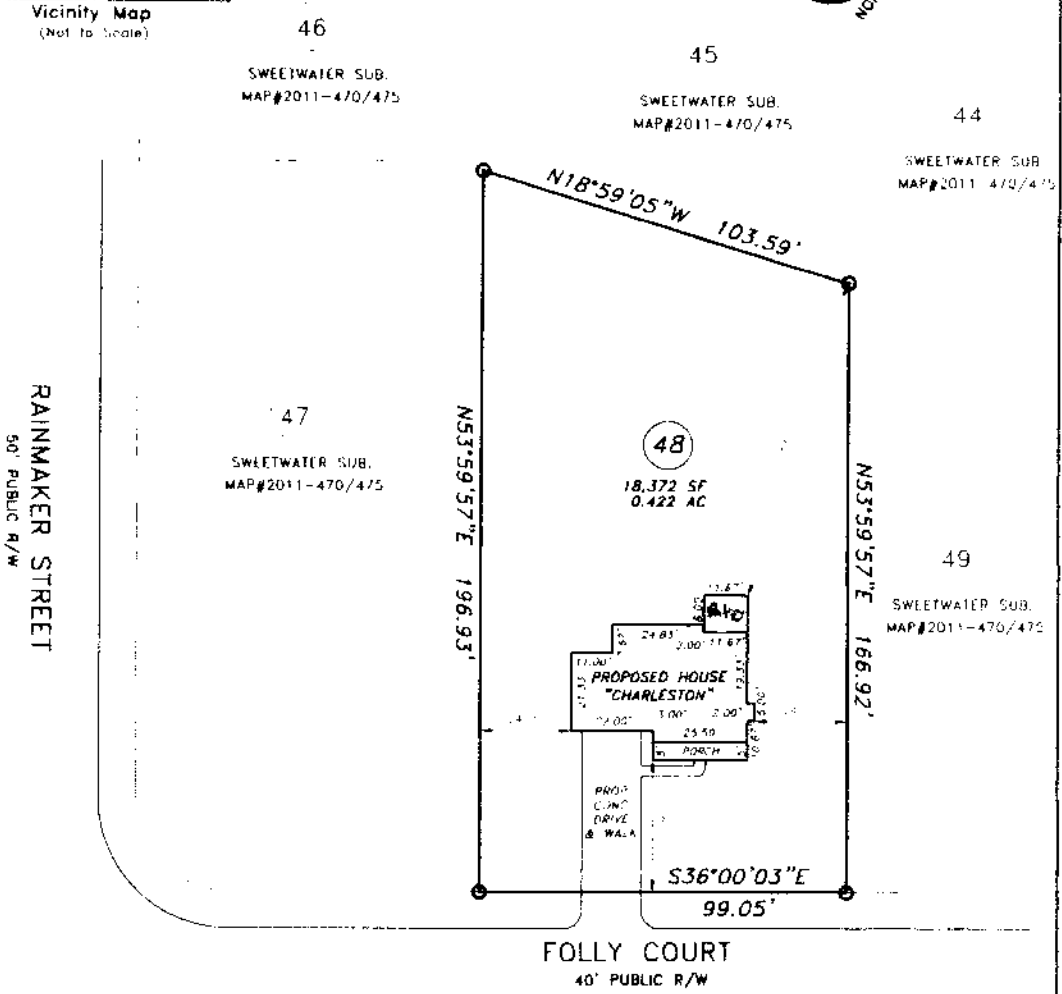
X 9-19-16  
Date

\*\*\*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\*\*



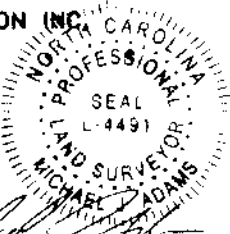
**LEGEND**  
 R/W RIGHT OF WAY  
 DB-DEED BOOK  
 PG- PAGE  
 PROP-PROPOSED  
 SF-SQUARE FEET  
 AC-ACRE(S)  
 CONC-CONCRETE  
 ESMT-ESCAPEMENT  
 PL-PROPERTY LINE



**PLOT PLAN**

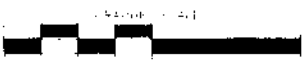
PROPERTY OF: ATLANTIC CONSTRUCTION INC  
 ADDRESS: 31 FOLLY COURT  
 CITY: LINDEN, NC  
 COUNTY: HARNETT  
 TAX PIN: 0544-46-1613.000

TOWNSHIP: STEWARTS CREEK  
 DATE: SEPTEMBER 15, 2016  
 SCALE: 1" = 40'  
 REFERENCE: LOT 48  
 SWEETWATER SUB  
 MAP # 2011  
 PGS 470-475



MICHAEL J. ADAMS PLS-L-4491  
 CFS NC-075

MINIMUM SETBACKS:  
 35'-FRONT  
 10'-SIDE  
 25'-REAR  
 20'-CORNER



M.A.P.S. SURVEYING, INC.  
 C-2589  
 1306 FORT BRAGG ROAD  
 FAYETTEVILLE, NC 28305  
 PHN: (910)484-6432  
 MAPSSURVEYING@NC.RR.COM

- NOTES**
- THIS MAP IS NOT A CERTIFIED SURVEY AND NO RELIANCE MAY BE PLACED IN ITS ACCURACY.
  - THIS MAP IS FOR PERMITTING PURPOSES ONLY.
  - THIS MAP CAN NOT BE USED FOR RECONCILIATION OF ATTEMPTS TO A DEED TO BE HISTORIC.
  - THIS MAP IS NOT DRAWN IN ACCORDANCE WITH G.S. 47-30.

DRAWN BY: JEP



NAME: Atlantic Construction 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.**

[Signature]  
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

9-19-16  
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 Diversified Investors Inc. Date \_\_\_\_\_  
Site Address 31 Folly Ct. Linden, NC 28356 Phone 910-346-9800  
Directions to job site from Lillington South 401, Turn Right onto W. Reeves Bridge Rd  
Turn Left onto Will Lucas Rd., Turn Left onto Hyland Ln. Turn Right  
onto Rawmaker St., Turn Right onto Folly Ct.  
Subdivision Sweetwater Lot 48  
Description of Proposed Work SFD # of Bedrooms 4  
Heated SF 2149 Unheated SF 711 Finished Bonus Room? NO Crawl Space \_\_\_\_\_ Slab X

**General Contractor Information**

Atlantic Construction Inc. 910-938-9053  
Building Contractor's Company Name Telephone  
7 Doris Ave. E. Jacksonville, NC 28540 aci@atlanticconstructioninc.com  
Address Email Address  
37596  
License #

**Electrical Contractor Information**

Description of Work SFD new Service Size 200 Amps T-Pole X Yes \_\_\_\_\_ No \_\_\_\_\_  
Tarheel Pride Electrical Corp. 910-531-4371  
Electrical Contractor's Company Name Telephone  
P.O. Box 458 Stedman, NC 28391  
Address Email Address  
22985-L  
License #

**Mechanical/HVAC Contractor Information**

Description of Work SFD new  
Certified Heating & Air Conditioning, LLC 910-858-0000  
Mechanical Contractor's Company Name Telephone  
P.O. Box 1071 Hope Mills, NC 28348  
Address Email Address  
H3C1-20012  
License #

**Plumbing Contractor Information**

Description of Work SFD new # Baths 2 1/2  
Dell Haire Plumbing 910-429-9939  
Plumbing Contractor's Company Name Telephone  
7612 Documentary Dr. Fayetteville, NC 28306  
Address Email Address  
24204 P-1  
License #

**Insulation Contractor Information**

A-1 Insulation Inc. P.O. Box 150 Hope Mills, NC 28348 910-850-3462  
Insulation Contractor's Company Name & Address 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

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

x 9.19.16  
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 ATLANTIC CONSTRUCTION INC.

Sign w/Title  Vice President Date 9-15-16

**DIVERSIFIED INVESTORS INC.**  
**P.O. BOX 1685 – 405 JOHNSON BLVD.**  
**JACKSONVILLE, NC 28540**  
**(910) 346-9800 – FAX (910) 346-1210**  
**E-mail: [bettyb@jlpnc.com](mailto:bettyb@jlpnc.com)**

July 21, 2011

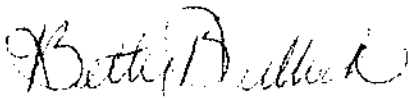
Re: Sweetwater Subdivision – Harnett County, NC

To Whom It May Concern:

As the developers of Sweetwater Subdivision, we have granted Atlantic Construction Inc., to construct single family dwellings in the subdivision project.

Should you have any questions or need any additional information concerning this authorization, please do not hesitate to contact me.

Sincerely,



Betty Bullock, President  
DIVERSIFIED INVESTORS INC.

bb

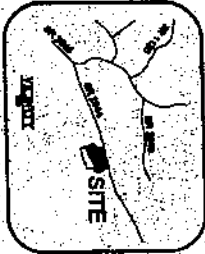


THIS PART IS TO BE USED  
IN CONJUNCTION WITH  
SHEETS S-2, S-3, S-4 & S-6

There is a discrepancy between the proposed subdivision and the subdivision shown on the plat. The proposed subdivision is shown on the plat and the subdivision shown on the plat is shown on the plat.

DATE: 04/26/2011  
DRAWN BY: JFJ  
CHECKED BY: JFJ

WILL LUCAS RD. (SR 2044) (60' R.W.)



WILLIAM B. GRANOVSKY  
Professional Engineer  
D.B. 25031 PG 194  
MAP# 2007-323

**DESIGN PROFESSIONAL CERTIFICATE**  
STATE OF NORTH CAROLINA, COUNTY OF HARNETT  
I, **William B. Granovsky**,  
Professional Engineer, do hereby certify that the above is a true and correct copy of the original as shown to me by the engineer or architect who prepared the same and that the same conforms to all applicable laws and regulations.

WILLIAM B. GRANOVSKY  
Professional Engineer  
D.B. 25031 PG 194  
MAP# 2007-323

**PLAT OF NORTH CAROLINA, COUNTY OF HARNETT**  
I, **Robert S. Huggins**,  
Professional Surveyor, do hereby certify that the above is a true and correct copy of the original as shown to me by the engineer or architect who prepared the same and that the same conforms to all applicable laws and regulations.

ROBERT S. HUGGINS  
Professional Surveyor  
D.B. 25031 PG 194  
MAP# 2007-323

**PLAT OF NORTH CAROLINA, COUNTY OF HARNETT**  
I, **Robert S. Huggins**,  
Professional Surveyor, do hereby certify that the above is a true and correct copy of the original as shown to me by the engineer or architect who prepared the same and that the same conforms to all applicable laws and regulations.

ROBERT S. HUGGINS  
Professional Surveyor  
D.B. 25031 PG 194  
MAP# 2007-323

**28.60 ACRES TOTAL  
FUTURE DEVELOPMENT  
OVERSIGHTED INVESTORS, INC.**  
P.O. BOX 1086  
JACKSONVILLE, NC 28540  
MAP# 2007-323

**28.60 ACRES  
FUTURE DEVELOPMENT  
OVERSIGHTED INVESTORS, INC.**  
P.O. BOX 1086  
JACKSONVILLE, NC 28540  
MAP# 2007-323

**28.60 ACRES  
FUTURE DEVELOPMENT  
OVERSIGHTED INVESTORS, INC.**  
P.O. BOX 1086  
JACKSONVILLE, NC 28540  
MAP# 2007-323

**28.60 ACRES  
FUTURE DEVELOPMENT  
OVERSIGHTED INVESTORS, INC.**  
P.O. BOX 1086  
JACKSONVILLE, NC 28540  
MAP# 2007-323



**SUBDIVISION PLAT  
FOR  
SWEETWATER  
SUBDIVISION**

**LOCATION:**  
WILL LUCAS RD (SR 2044)  
STEWART'S CREEK TOWNSHIP  
HARNETT COUNTY, NC

**PROPERTY OWNERS:**  
OVERSIGHTED INVESTORS, INC.  
P.O. BOX 1086  
JACKSONVILLE, NC 28540

|                            |                                 |
|----------------------------|---------------------------------|
| <b>PLAN INFORMATION:</b>   |                                 |
| DESIGNED BY:<br>ET, PA     | HORIZONTAL SCALE:<br>1" = 100'  |
| DRAWN BY:<br>ET, PA        | VERTICAL SCALE:<br>1" = 100'    |
| CHECKED BY:<br>JFJ         | DATE CREATED:<br>APRIL 26, 2011 |
| <b>SURVEY INFORMATION:</b> |                                 |

**Enoch  
Engineers, P.A.**  
CONSULTING ENGINEERS & SURVEYORS  
1403 NC Highway 30 South - Boone, NC 28604  
Phone: (717) 894-7765 Fax: (717) 894-4198  
E-mail: enoch@enochengineers.com



PROJECT 3440  
S-1

### Designated Lien Agent

---

Investors Title Insurance Company

Entry Number: 530622

Filed by: twotees

Filing Date: 09/16/2016

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

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

Email: [support@liensnc.com](mailto:support@liensnc.com)

Fax: (919) 489-5231

Technical

Support Hotline: (888) 690-7384

### Owner Information

---

Atlantic construction Inc.

7 Doris Ave. E.

Jacksonville

NC

28540

910-938-9053

[danny@atlanticconstructioninc.com](mailto:danny@atlanticconstructioninc.com)

### Project Property

---

Sweetwater Lot 48

31 Folly Ct.

Linden, NC

NC

28356

Property Type: 1-2 Family Dwelling

Date First Furnished:

### Comments

---

No comments have been made.

HARNETT COUNTY CASH RECEIPTS

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

Oper: JFORBES      Type: CP    Drawer: 1  
Date: 9/19/16 51    Receipt no: 89596

| Year             | Number               | Amount   |
|------------------|----------------------|----------|
| 2016             | 50039761             |          |
| 31 FOLLY CT      |                      |          |
| LINDEN, NC 28356 |                      |          |
| B4               | BP - ENV HEALTH FEES | \$750.00 |

NEW TANK

JOHN SCHRAMM

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

Trans date: 9/19/16    Time: 13:08:45

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