

Initial Application Date: 9-27-11

Application # 1650039832

CU# \_\_\_\_\_

CENTRAL PERMITTING 108 E. FRONT STREET, LILLINGTON, NC 27546  
COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION  
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: S-Mark Properties Mailing Address: 365 Cottle Lake Dr  
City: COATS State: NC Zip: 27521 Contact No: 919-868-9307 Email: SLJ050101@GMail.com

APPLICANT: S-Mark Properties Mailing Address: 365 Cottle Lake Dr  
City: COATS State: NC Zip: 27521 Contact No: 919-868-9307 Email: SLJ050101@GMail.com  
\*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Steve Jernigan Phone # 919-868-9307

PROPERTY LOCATION: Subdivision: OXFORD Woods Lot #: 4 Lot Size: 94  
State Road # \_\_\_\_\_ State Road Name: Olds Lane Rd / 173 Oxford Woods Dr Map Book & Page: 2008/214  
Parcel: 040692001714 PIN: 0682-98-7088-000  
Zoning: RA-36 Flood Zone: X Watershed: T Deed Book & Page: 3389 1324 Power Company\*: Duke Power  
\*New structures with Progress Energy as service provider need to supply premise number 72402146 from Progress Energy.

**PROPOSED USE:**

- SFD: (Size 46x49) # Bedrooms: 3 # Baths: 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: \_\_\_\_\_ Manufactured Homes: \_\_\_\_\_ Other (specify): \_\_\_\_\_

**Required Residential Property Line Setbacks:**

Front	Minimum	<u>35</u>	Actual	<u>60</u>
Rear		<u>20</u>		<u>130</u>
Closest Side		<u>15</u>		<u>27</u>
Sidestreet/corner lot		_____		_____
Nearest Building on same lot		_____		_____

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 210 - thru angie JcR on  
old Stage Rd - Sub Aft-3 - Miles on Right

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]*  
Signature of Owner or Owner's Agent

9-27-16  
Date

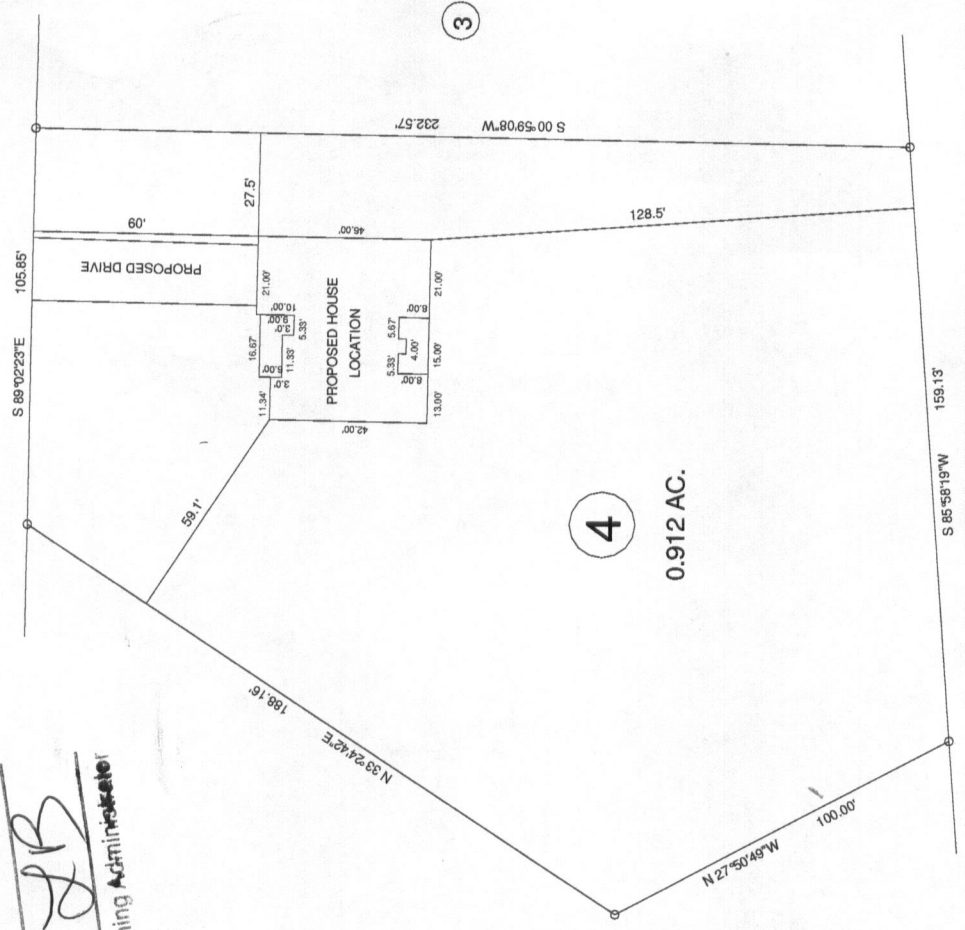
\*\*\*It is the owner/applicants responsibility to provide the county with any applicable information about the subject property, including but not limited to: boundary information, house location, underground or overhead easements, etc. The county or its employees are not responsible for any incorrect 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** SFD  
 DISTRICT RA-30 USE SFD  
 #BEDROOMS 3  
9-29-10  
 Zoning Administrator

MAP NO. 2008-214

"OXFORD WOODS DRIVE" 50' R/W



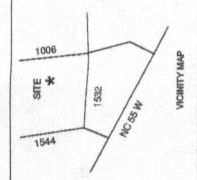
4  
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3

MAP REFERENCE: MAP NO. 2008-214

- MINIMUM BUILDING SET BACKS:
- FRONT YARD ..... 35'
- REAR YARD ..... 25'
- SIDE YARD ..... 10'
- CORNER LOT SIDE YARD ..... 20'
- MAXIMUM HEIGHT ..... 35'



SURVEY FOR:  
**PROPOSED PLOT PLAN - LOT - 4**  
**"OXFORD WOODS SUBDIVISION"**

TOWNSHIP	BLACK RIVER	COUNTY	HARNETT
STATE	NORTH CAROLINA	DATE	SEPTEMBER 28, 2016
ZONE	RA-30	WATERSHED DISTRICT	TAX PARCEL ID#
			PN #

BENNETT SURVEYS  
 1662 CLARK RD., LILLINGTON, N.C. 27546  
 (910) 892-5252

F-1304

125' 0	25	SURVEYED BY:	RVB
SCALE: 1" = 50'		DRAWN BY:	RVB
CHECKED & CLOSURE BY:		FIELD BOOK	DRAWING NO.
			16399

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 \_\_\_\_\_

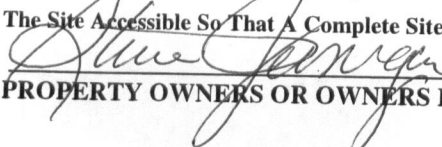
The applicant shall notify the local health department upon submittal of this application if any of the following apply to the property in question. If the answer is "yes", applicant **MUST ATTACH SUPPORTING DOCUMENTATION**:

- 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)

9-27-16  
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 S-Mark Properties Date 9-27-16  
Site Address 73 OXFORD Woods Dr Phone 919-868-9307  
Directions to job site from Lillington 210 Thru Angier Trk. on old Stage Rd. Sub. Apt. 3 - Make on Right

Subdivision OXFORD Woods Lot 4  
Description of Proposed Work New Home # of Bedrooms 3  
Heated SF 1799 Unheated SF N/A Finished Bonus Room?  Crawl Space  Slab

**General Contractor Information**

S-Mark Properties  
Building Contractor's Company Name 919-669-6327 Telephone  
365 Cottle Lake Dr Coats NC 515050101@6mail.com Email Address  
Address 75632  
License #

**Electrical Contractor Information**

Description of Work New Home Service Size 100 Amps T-Pole  Yes  No  
Waters & Pace Electric  
Electrical Contractor's Company Name 919-499-3946 Telephone  
619 Leslie Rd Sanford NC Email Address  
Address 12007 U  
License #

**Mechanical/HVAC Contractor Information**

Description of Work New Home  
Cool Springs Services  
Mechanical Contractor's Company Name 919-258-0915 Telephone  
2200 Cool Springs Rd Broadway Email Address  
Address 11542  
License #

**Plumbing Contractor Information**

Description of Work New Home # Baths 2  
Curtis Farcloth Plumbing  
Plumbing Contractor's Company Name 910-531-3111 Telephone  
5054 Elizabethtown Hwy Roseboro Email Address  
Address 72169  
License #

**Insulation Contractor Information**

Insulating INC  
Insulation Contractor's Company Name & Address 919-772-9000 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

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

9-27-14  
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 L. Mark Properties  
Sign w/Title Steve Jones Date 9-27-14

**DO NOT REMOVE!**

# Details: Appointment of Lien Agent

Entry #: 536108

Filed on: 09/27/2016  
Initially filed by: sharefoot

## Designated Lien Agent

Investors Title Insurance Company

Online: [www.liensnc.com](http://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@liensnc.com](mailto:support@liensnc.com) (<mailto:support@liensnc.com>)

## Project Property

Lot 4 Oxford Woods  
73 Oxford Woods Dr.  
Angier, NC 27524  
Johnston County

## Property Type

1-2 Family Dwelling

## Date of First Furnishing

09/27/2016

## 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

S-Mark Properties, LLC  
365 Cottle Lake Dr  
Coats, NC 27521

United States

Email: [m.shane.sharefoot@harnett.org](mailto:m.shane.sharefoot@harnett.org)

Phone: 919-669-6327

View Comments (0)

Technical Support Hotline: (888) 690-7384