Initial Application Date: 10-14-10 Application # 1650039942
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: WELLS DESIGN BUILD, LLC Mailing Address: 4601 IRENE WAY
City: RALEIGH State: NC zip: 27603 Contact No: 919-422-5280 Email: MWells droping a wells design build con
APPLICANT*: Mailing Address:
City: State: Zip: Contact No: Email: Email:
Please fill out applicant information if different than landowner
CONTACT NAME APPLYING IN OFFICE: MICHAEL WELLS Phone # 919-422-5280
PROPERTY LOCATION: Subdivision: CURRIN PLANTATION Lot #: 38 Lot Size: 644 ACRES
24
State Road #
Parcel: 130527 0012 38 PIN: 0527-58-2325.000
Zoning: KA30 Flood Zone: X Watershed: Deed Book & Page: 3445 / 181 Power Company*: DUKE ENERGY
New structures with Progress Energy as service provider need to supply premise number from Progress Energy.
PROPOSED USE: 2" 10" Monolithic
SFD: (Size $\frac{5(x + 50)}{x}$ ) # Bedrooms: 3 # Baths: 2 Basement(w/wo bath): Garage: X Deck: X Crawl Space: X Slab: Slab:
(Is the bonus room finished? () yes ( $X$ ) no w/ a closet? () yes ( $X$ ) no (if yes add in with # bedrooms)
Mod: (Sizex) # 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
A Postconner Correct (cite built? ) Dock: (cite built? )
Manufactured Home:SWDWTW (Sizex) # Bedrooms: Garage:(site built?) Deck:(site built?)
Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit:
Home Occupation: # Rooms:Use: Hours of Operation: #Employees:
Addition/Accessory/Other: (Sizex) 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
Does the property contain any easements whether underground or overhead () yes (X) no
Structures (existing or proposed): Single family dwellings: Manufactured Homes: Other (specify):
Required Residential Property Line Setbacks: Comments:

Rear Closest Side Sidestreet/corner lot\_

Nearest Building on same lot Residential Land Use Application

Front

	•				
					,
				8 8	
rmits are granted I agree to conform to all ordinances and laws of the Sta eby state that foregoing statements are accurate and correct to the best	ate of North Carolina reg of my knowledge. Pern	gulating such wo nit subject to rev	ork and the spocation if false	ecifications of	plans su s provide
ereby state that foregoing statements are accurate and correct to the best	of my knowledge. Pern	nit subject to rev	ocation if false	information is	s pro
Signature of Owner or Owner's Agent		Date	(24 15 h) 1		

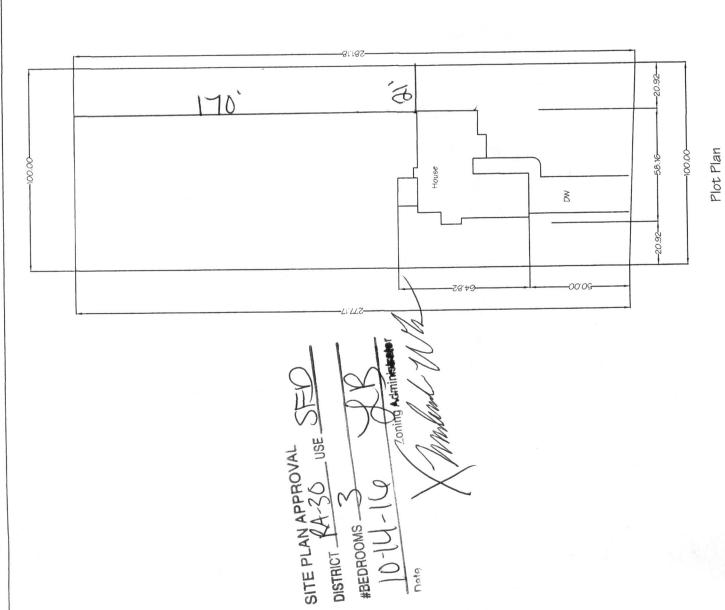
\*\*This application expires 6 months from the initial date if permits have not been issued\*\*

<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.\*\*\*



MELLS DESIGN BUILD

Lot 38 Currin Plantation



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DEED REFERENCE DEET BOOM 1998, PAOK 1884 HAP REFERENCE: HAP NO. 2002-957

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STATE OF HORTH CAPOLINA

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PARCEL 10:130527 0048 PARCEL 10:130527 0012

JU. 4 CHOSS ACRES \$107.00

REQUIRE FIRE PROTECTION WITH RESIDENTIAL SPHIMILE SYSTEM HOLETAIT SECREPTINE HORSES BINEL ON FOLS SHIFT APPROVED BY HARNETT COUNTY FIRE MARSHAL

\* DEMORES EXISTING STREET UGHTS

OWNER/DEVELOPER
ROBERT F. CURRIN
REBECCA D.CURRIN
853 LEAFLET CHURCH RD.

BIO 003-5043

SURVEY FOR FINAL PLAT

STATE: NORTH CAROLINA TOWNSHIP UPPER LITTLE RIVER WATERSHED DISTRICT CURRIN PLANTATION COUNTY PIN E SEL REFERENCE DATE: APRIL 21.2010 HARNETT S/D CHECKED & CLOSURE BY: SCALE: 1 . 200 DHAWN BY: BENNETT SURVEYS, INC. C-1080
1682 CLARK RD. LILLINGTON, N.C. 27546
(910) 893-5232 SURVEYED BY NAB LR9 JRW F IELD BOOK DRAWING NO 09036

NAM	IE: WELL	S DESIGN BUILD, LLC		APPLICATION #:	
		*This application to be fille	ed out when applying	for a septic system inspecti	on.*
C	ounty Hea	alth Department Application			
IF TH	E INFORMA	TION IN THIS APPLICATION IS FAL	SIFIED, CHANGED, O	R THE SITE IS ALTERED. TH	EN THE IMPROVEMENT
PERM	IIT OR AUTH	IORIZATION TO CONSTRUCT SHAI	LL BECOME INVALID	The permit is valid for either 6	0 months or without expiration
depen		umentation submitted. (Complete site p	lan = 60  months; Comple		
		-7525 option 1	0 1 000	CONFIRMATION #	
		ntal Health New Septic System			
•		erty irons must be made visil			er iron of lot. All proper
_		st be clearly flagged approximate			lub
•		range house corner flags" at eac ings, swimming pools, etc. Place			
		ange Environmental Health card			
		ty is thickly wooded, Environmer			
		on to be performed. Inspectors sl			
•		to be addressed within 10 busi			
		re to uncover outlet lid, mark h			
•		paring proposed site call the voice			
		r selecting notification permit if r			h inspection. Please not
		tion number given at end of reco			
•		k2Gov or IVR to verify results. O		eed to Central Permitting fo	or permits.
□ <u>E</u>		tal Health Existing Tank Inspe			
•		pove instructions for placing flags			1 20 2 1 1 2 1 1 1
•	possible)	for inspection by removing soil and then put lid back in place.  LEAVE LIDS OFF OF SEPTIC TANI	(Unless inspection i		
		overing outlet end call the voice		at 910-893-7525 option 1 8	Select notification perm
		e permits, then use code <b>800</b> f			
		end of recording for proof of requ			
•	Use Click	2Gov or IVR to hear results. One	ce approved, procee	d to Central Permitting for	remaining permits.
SEPT					
If app	lying for auth	orization to construct please indicate of	desired system type(s):	can be ranked in order of prefe	erence, must choose one.
		{}} Innovative {			
{}}	Alternative	{}} Other			
The ap	plicant shall on. If the an	notify the local health department uswer is "yes", applicant MUST AT1	pon submittal of this a ΓACH SUPPORTING	pplication if any of the follows DOCUMENTATION:	ving apply to the property in
{}}Y	ES { <u>X</u> }1	NO Does the site contain any Jun	risdictional Wetlands?		
{}}Y	ES { <b>X</b> } 1	NO Do you plan to have an irrig	ation system now or ir	the future?	
{}}Y	ES { <u>X</u> } 1	NO Does or will the building con	ntain any <u>drains</u> ? Pleas	se explain	

{\_\_}YES {\_\sumsymbol{\psi}} NO Are there any Easements or Right of Ways on this property?
{\_\_}YES {\_\sumsymbol{\psi}} 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.

Is any wastewater going to be generated on the site other than domestic sewage?

Are there any existing wells, springs, waterlines or Wastewater Systems on this property?

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

Is the site subject to approval by any other Public Agency?

{X} NO

 $\{X\}$  NO

{<u>X</u>} NO

{\_\_\_}}YES

{\_\_}}YES

{\_\_}}YES

#### DO NOT REMOVE!

# Details: Appointment of Lien Agent

Entry #: 544919

Filed on: 10/13/2016

Initially filed by: wellsdesignbuild

#### Designated Lien Agent

Fidelity National Title Company, LLC

Online: www.liensnc.com/outp://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(muito support@liensnc.com)

## Project Property

Lot 38 Currin Plantation 55 Southern Place Lillington, NC 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

Wells Design Buid, LLC 4601 Irene Way Raleigh, NC 27603 United States Email: mwells@wellsdesignbuild.com Phone: 919-422-5280

View Comments (0)

Technical Support Hotline: (888) 690-7384

Harnett County Central Permitting
PO Box 65 Lillington NC 27546
910 893 7525 Fax 910 893 2793 www harnett org/permits

Application # 39942

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

Owners Name WELLS DESIGN BUILD	Date11-20-2016		
Site Addres SOUTHERN PLACE N	Phone 919-422-5280		
Directions to job site from Lillingio			
in meanwhite of the control of the c			
HWY 27W @ CLARK ROAD & SOUTHER	N PLACE		
Subdivision CURRIN PLANTATION			
Description of Proposed Work NEW CONSTRUCTION	# of Bedrooms 3		
Heated SF 1632 Unheated SF 486 Finished Bonus Room?			
General Contractor Information			
WELLS DESIGN BUILD, LLC	919·42Z 5280		
Building Contractor's Company Name	Telephone		
4601 IRENE WAY RALEIGH NC 27603	mwells wellsdesignbuild.com		
Address	Email Address		
69014			
License #			
Description of Work NEW CONSTRUCTION Service Size	<u>n</u> 200 Amps T-Pole X Yes No		
TW ELECTRIC SERVICE INC	919-524-7384		
Electrical Contractor s Company Name	Telephone		
541 GRAHAM POND ROAD ANGIER, NC	twelectric w ymail.com		
Address	Email Address		
19725L			
License #			
Mechanical/HVAC Contractor Inform	nation		
Description of Work NEW CONSTRUCTION			
CAROLINA COMFORT AIR INC	919-550-7711		
Mechanical Contractor's Company Name	Telephone		
5212 HWV 70 CLAYTON NC	1Da carolinacomfortair.com		
Address	Email Address		
29077			
License #			
Plumbing Contractor Informatio			
Description of Work NEW CONSTRUCTION	_# Baths_3		
WATERS PLUMBING COMPANY	919.772.3325		
Plumbing Contractor's Company Name	Telephone		
81 RUPERT ROAD RALEIGH NC 27603	imorgan9040 att. net		
Address	Email Address		
5313			
License #	_		
Insulation Contractor Informatio			
TRI CITY INSULATION 7204 BECKY CIRCLE, RALEIGH, N.C.	419-790-9684		
Insulation Contractor's Company Name & Address	Telephone		

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.  Description 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 scheduje				
Man 11-20-2016				
Signature of Owner/Contractor/Officer(s) of Corporation 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 WELLS DESIGN BUILD				
Sign w/Title MELLS DESIGN BUILD  OWNER				

Plan Box #	3 :0039942	Date Job Nar  Valuation 2033	10-17-10 me_Michael Well 5° 28 SQ Feet_2118 Garage <98
Inspections for Crawl	SFD/SFA Slab	Mono	Rasement
Footing Foundation Address Open Floor Rough In Insulation Final	Footing Foundation Address Slab Rough In Insulation Final	Plum Under Slab Ele. Under Slab Address Mono Slab Rough In Insulation Final	Footing Foundation Waterproofing Plum Under slab Address Slab Open Floor Rough In Insulation Final
Foundation Surv	ey <u>N</u> O Ei	nvir. Health <u>. N</u> lw °	Other
Additions / Othe ooting oundation lab flono pen Floor ough In inal	-		

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HARNETT COUNTY CENTRAL PERMITTING
     P.O. BOX 65
     LILLINGTON, NC 27546
     For Inspections Call: (910) 893-7525 Fax: (910) 893-2793
     Bldq Insp scheduled before 2pm available next business day.
     ......
   Application Number . . . . 16-50039942
                                             Date 11/21/16
   Property Address . . . . . 55 SOUTHERN PL
   Application type description CP NEW RESIDENTIAL (SFD) Subdivision Name . . . . . CURRIN PLANTATION Property Zoning . . . . . . RES/AGRI DIST - RA-30
                                Contractor
   Owner
                                 ______
   WELLS DESIGN BUILD, LLC
                                 WELLS DESIGN BUILD LLC
                                 4601 IRENE WAY
   4601 IRENE WAY
                   NC 27603
                                                 NC 27603
                                RALEIGH
   RALEIGH
                                 (919) 422-5280
   Applicant
   ______
   WELLS DESIGN BUILD, LLC
   4601 IRENE WAY
                   NC 27603
   RALEIGH
   (919) 422-5280
--- Structure Information 000 000 59X57 3BDR W/GARAGE W/DECK CRAWL
   Flood Zone . . . . . . . FLOOD ZONE X
   Other struct info . . . . # BEDROOMS
                                                     3.00
                          PROPOSED USE
                                               SFD
                          SEPTIC - EXISTING?
                                               NEW
                                               COUNTY
                          WATER SUPPLY
_____
   Permit . . . . . BLDG, MECH, ELEC, PLB, INSU PERMIT
   Additional desc . .
   Phone Access Code . 1163203
   Issue Date . . . . 11/21/16 Valuation . . . . Expiration Date . . 11/21/17
Special Notes and Comments
    T/S: 10/14/2016 04:04 PM LBENNETT --
    CURRIN PLANTATION ON CLARK RD - LOT 38
    55 SOUTHERN PLACE
    PERMIT INCLUDES BLDG, ELEC, MECH, PLUMB
    INSULATION AND LAND USE.
    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.

Page 2 Date 11/21/16 Application Number . . . . . 16-50039942

Property Address . . . . . . 55 SOUTHERN PL

Permit . . . . BLDG, MECH, ELEC, PLB, INSU PERMIT

Additional desc . .

Phone Access Code . 1163203

### 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	105	B105	R*OPEN FLOOR		— <sub>/</sub> — <sub>/</sub> —
40-50	129	I129	R*INSULATION INSPECTION		<del>_</del> / <del>_</del> /
40-60	425	R425	FOUR TRADE ROUGH IN		—/—/—
40-60	125	R125	ONE TRADE ROUGH IN		— <sub>/</sub> — <sub>/</sub> —
40-60	325	R325	THREE TRADE ROUGH IN		— <sub>/</sub> — <sub>/</sub> —
40-60	225	R225	TWO TRADE ROUGH IN		— <sub>/</sub> — <sub>/</sub> —
50-60	429	R429	FOUR TRADE FINAL		_/_/_
50-60	131	R131	ONE TRADE FINAL		— <sub>/</sub> — <sub>/</sub> —
50-60	329	R329	THREE TRADE FINAL		
50-60	229	R229	TWO TRADE FINAL		— <sub>/</sub> — <sub>/</sub> —
50-60	209	E209	R*ELEC TEMP POWER CERT		— <sub>/</sub> — <sub>/</sub> —
999		H824	ENVIR. OPERATIONS PERMIT		<del>_</del> / <del>_</del> / <del>_</del>
999		H828	ENVIRO. WELL PERMIT		— <sub>/</sub> — <sub>/</sub> —