

Initial Application Date: 10/26/16

Application # 105004003  
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** Ralph and Shirley Darch Mailing Address 345 Will Lucas Road  
City Linden State NC Zip 28356 Contact No: 910-591-8049 Email: \_\_\_\_\_

**APPLICANT\*** Ralph Darch Mailing Address SAME AS ABOVE  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Contact No \_\_\_\_\_ Email: \_\_\_\_\_  
\*Please fill out applicant information if different than landowner

**CONTACT NAME APPLYING IN OFFICE:** Craig Byrd (Banah Homes Inc) Phone # 910-813-0194

**PROPERTY LOCATION:** Subdivision: NA Lot # NA Lot Size: 11.42 Ac  
State Road # 2044 State Road Name: Will Lucas Map Book & Page 2016, 338  
Parcel 12 0555 0187 PIN 0554-18-3758 .000  
Zoning: RA 20R Flood Zone: X Watershed: NA Deed Book & Page: 653/515 Power Company\*: South River  
AE  
\*New structures with Progress Energy as service provider need to supply premise number \_\_\_\_\_ from Progress Energy.

**PROPOSED USE:**

- SFD. (Size 32 x 44) # Bedrooms 3 # Baths 2 Basement(w/wo bath) \_\_\_\_\_ Garage: \_\_\_\_\_ Deck: \_\_\_\_\_ Crawl Space:  Slab \_\_\_\_\_ 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:**

|                              | Minimum | Actual |
|------------------------------|---------|--------|
| Front                        | 35      | 80     |
| Rear                         | 25      | 360    |
| Closest Side                 | 10      | 140    |
| Sidestreet/corner lot        | _____   | _____  |
| Nearest Building on same lot | _____   | _____  |

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

**SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:** 401 South to Bunnlevel. Turn right on Mclean Chapel Church Road

One mile and turn left onto Wire Road. Follow 3-4 miles and turn right onto Will Lucas. Property is about 3/4 mile on left.

---

---

---

---

---

---

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.

Craig Byrd  
Signature of Owner or Owner's Agent

10-25-16

Date

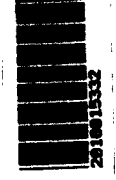
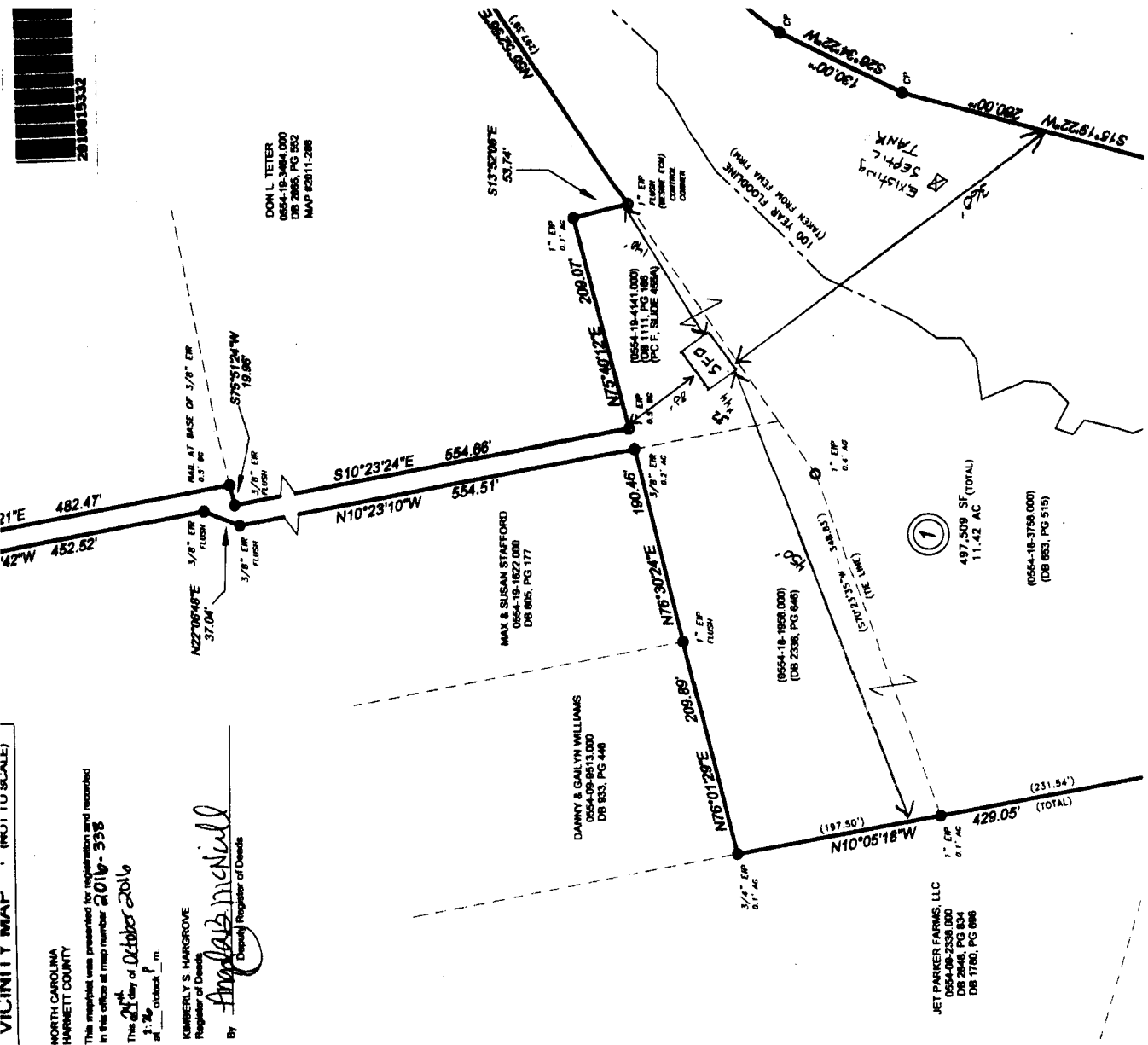
**\*\*\*It is the owner/applicants responsibility to provide the county with any applicable information about the subject property, including but not limited to: boundary information, house location, underground or overhead easements, etc. The county or its employees are not responsible for any incorrect or missing information that is contained within these applications.\*\*\***

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

VICINITY MAP (MULTISCALE)

NORTH CAROLINA  
 HARNETT COUNTY  
 This map/draft was prepared for registration and recorded  
 in this office at map number **2016-338**  
 The 21<sup>st</sup> day of October 2016  
 at 11:00 o'clock A.M.

KIMBERLY S. HARGROVE  
 Register of Deeds  
 By Angela B. Merrill  
 Deputy Register of Deeds



DON L. TETER  
 0564-18-344 000  
 DB 2885, PG 502  
 MAP 82011-288

MAX & SUSAN STAFFORD  
 0564-19-1622 000  
 DB 605, PG 177

DANNY & GAILYN WILLIAMS  
 0564-09-9513 000  
 DB 633, PG 446

JET PARKER FARMS, LLC  
 0564-08-2338 000  
 DB 2646, PG 834  
 DB 1780, PG 896

497,509 SF (TOTAL)  
 11.42 AC (TOTAL)  
 (0564-18-3756 000)  
 (DB 653, PG 515)

SITE PLAN APPROVAL  
 DISTRICT: RAVENSUSE  
 #BEDROOMS: 3  
 Date: 10/20/16  
 Zoning Administrator



NAME: Ralph Darch

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 but will not affect septic access  
 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.**

Clare Bond  
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

10-25-16  
DATE

Harnett County Central Permitting  
PO Box 85 Lillington NC 27546  
910 893 7525 Fax 910 893 2793 www.harnett.org/permits

**Application for Residential Building and Trades Permit**

Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address company name & phone must match.

Owner's Name Ralph & Shirley Dorch Date 10-28-16  
Site Address 345 Will Lucas Road Linden Phone 910-891-8049  
Directions to job site from Lillington 401 south to Bunklevel T/R ON McLEAN Chapel Church Road. T/L on Wire Rd. 3-4 miles T/R ON Will Lucas Rd. Project 3/4 mile on left  
Subdivision N/A Lot N/A  
Description of Proposed Work SFD # of Bedrooms 3  
Heated SF 1775 Unheated SF X Finished Bonus Room?      Crawl Space  Slab

**General Contractor Information**

Barah Homes Inc  
Building Contractor's Company Name 910-813-0194 Telephone  
2703 Will Lucas Road Linden N.C. 28356 barahhomesnc@aol.com Email Address  
Address 56520  
License #     

**Electrical Contractor Information**

Description of Work      Service Size      Amps T-Pole  Yes  No  
Mabry's Electrical 919-639-4837 Telephone  
Electrical Contractor's Company Name  
Angier N.C. Email Address  
Address 150770  
License #     

**Mechanical/HVAC Contractor Information**

Description of Work       
Radford Heating & Air 919-427-7463 Telephone  
Mechanical Contractor's Company Name  
Clayton N.C. Email Address  
Address 22024  
License #     

**Plumbing Contractor Information**

Description of Work      # Baths 2  
Gilbert Plumbing Co. 910-214-1274 Telephone  
Plumbing Contractor's Company Name  
DUNN, N.C. Email Address  
Address 10929  
License #     

**Insulation Contractor Information**

Parker Brothers Insulation 910-990-5928 Telephone  
Insulation Contractor's Company Name & Address

\*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**

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

10-28-16  
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 Banah Homes Inc.

Sign w/Title Craig Byrd Date 10-28-16