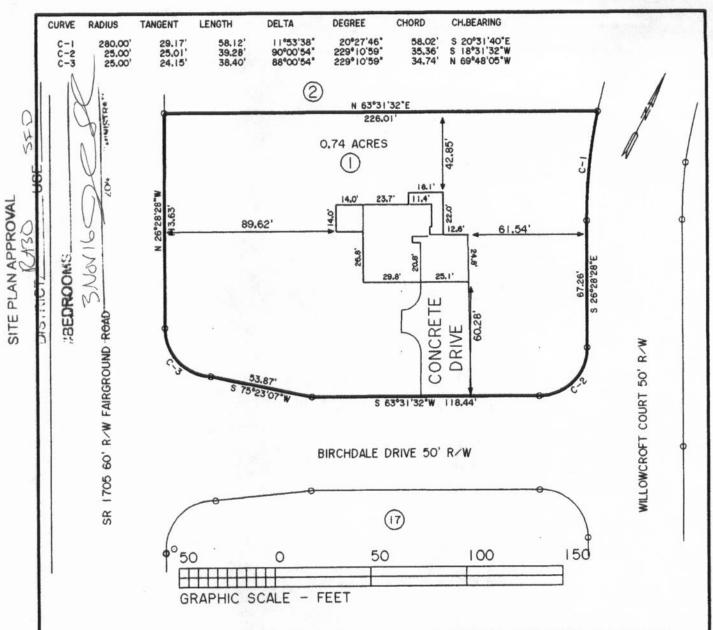
Initial Application Date: 500 106 72
CU#COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION
Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/perm
"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTURE AT AND SO OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTURE AT AND SO OFFER TO PURCHASE)
LANDOWNER: Front Porch Dirace Co., LLC Mailing Address: 136 Starmount Road VAIVE
City: <u>Clay for</u> State: No zip: 27520 Contact No: (99)423-7349 Email: <u>LADURHAM1@ gmgil</u> .
APPLICANT: Durham by Idlan & Electric Mailing Address: 4567 Little Creek Church Rd
City: Clay ton NC State: NC Zip: 27920 Contact No: (9/9)422-7349 Email: RADVRHAM1@ gmail. Please fill out applicant information if different than landowner
CONTACT NAME APPLYING IN OFFICE: Pandell Durham Phone # (919) 422-7349
PROPERTY LOCATION: Subdivision: Leigh Laure) 5/10 Lot #: 1 Lot Size 0.74 A
State Road # State Road Name: 410 Willow ( roft Map Book & Page 2004 416
Parcel: 021518009903 PIN: 1518604499.000
Zoning: KH30 Flood Zone: Watershed: Deed Book & Page 3446/996 Power Company*: Dike Energy
*New structures with Progress Energy as service provider need to supply premise number from Progress Energy.
PROPOSED USE:
SFD: (Size 47 x 69) # Bedrooms: 4 # Baths: 35 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: (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
☐ Manufactured Home:SWDWTW (Sizex) # Bedrooms:Garage:(site built?) Deck:(site built?)
□ Manufactured Home:SWDWTW (Sizex) # Bedrooms: Garage:(site built?) Deck:(site built?)
Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit:
Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit:
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
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: County Existing Well New Well (# of dwellings using well) *Must have operable water before final
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
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:CountyExisting WellNew 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
Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit: #Employees: #Empl
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Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit: #Employees: #Employees: #Employees: #Employees: #Employees: #Employees: 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
Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit: #Employees: #Employees: #Employees: #Employees:
Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit: #Employees: Hours of Operation: # Rooms: Use: Hours of Operation: #Employees: 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 Structures (existing of proposed) Single family dwellings: Manufactured Homes: Other (specify): Required Residential Property Line Setbacks: Comments: Comments: Comments: Other (specify): Comments: Comments: Comments: Comments: Comments: Comments: Comments: Other (specify): Comments: Comments:
Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit: Hours of Operation: #Employees:

CIFIC DIRECTIONS TO THE PR	OPERTY FROM LILLINGTON:		
E OLIKE STATE OF STATE STATE			The second secon
A SECURITY OF SECU	a contract of the contract of		SERVICENT DESCRIPTION
delta en e			
Company of the compan			
nits are granted I agree to confo	orm to all ordinances and laws of the State of North	h Carolina regulating such work and	the specifications of plans subr
by state that foregoing statemer	nts are accurate and correct to the best of my know	vledge. Permit subject to revocation	if false information is provided.
Kandoo	Pashon	11/03/16	
Sign	ature of Owner or Owner's Agent	/ 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 FOR LOT # I LEIGH LAUREL SUBDIVISION PER PLAT BOOK 2004 PAGE 416 OF THE HARNETT CO. REGISTRY.

THIS PROPERTY LOCATED AT 410 WILLOWCROFT COURT, DUNN, NC.

OWNER: FRONT PORCH BUILDING CO, LLC.

DEED REFERENCE: DB 3446 PAGE 0996.

69 X 47

NOTE: PRELIMINARY MAP, NOT FOR RECORDATION, CONVEYANCES OR SALES.

REVISIONS	SITE PLAN FOR FRONT PORCH BUILDING CO., LLC				SSOC   ATES
	TOWNSHIP : A	VERASBORO	COUNTY: HARNETT	DATE OF SURVEY NOT A SURVEY	
	STATE : NOR	TH CAROLINA	PIN: 1518-60-4499.00	DATE OF MAP 10-18-2016	DRAWING
SCALE: 1" - 50"	ZONE:	TAX MAP:	PARCEL:	CHECK AND CLOSURE BYEBOF	2016221

NAME: Randell Durham

<u>C(()</u>	APPLICATION #:
ation to be filled out	"Make the control singlet discount to the Make problem and the Make the control and the control of the Control

\*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) CONFIRMATION #

$\sim$		option 1	
	-Enviro	onmental Health New Septic System Code	
		Code Septic SystemCode	000
	<ul> <li>All</li> </ul>	Dropout. I	000

- 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 <u>undergrowth</u> 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
- Use Click2Gov or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.

SEPTIC	OSC CIICKZGO	or IVH to hear results. Once approved, proceed to Central Permitting for remaining permits.
If applyin	g for authorizat	ion to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.
{} Ac	cepted	Innovative {X} Conventional {} Any
() Alt	ernative	() Other
The applic question.	eant shall notify If the answer i	y the local health department upon submittal of this application if any of the following apply to the property in s "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:
{}}YES	(X) NO	Does the site contain any Jurisdictional Wetlands?
{_}}YES	(X) NO	Do you plan to have an <u>irrigation system</u> now or in the future?
{X}}YES	{_}} NO	Does or will the building contain any draine? Plants and Alexander Of the state of
[]YES	LXINO	Does or will the building contain any drains? Please explain. NORMAL PLUMBING FOR SFD  Are there any existing wells springs protections. We
{}}YES	ONIXI	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?  Is any wastewater going to be generated on the site other than domestic sewage?
{}}YES	1X) NO	Is the site subject to approval by any other Public Agency?
YES	(X) NO	Are there any Easements or Right of Ways on this property?
(X)YES	[] NO	Does the site contain any existing water, cable, phone or underground electric lines?
l Haya Daad	l Trusta en la	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.

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

## Application for Residential Building and Trades Permit

Owners Name Front Porch Billing Compan	ny Date 5/3) 16
Site Address 41 Willow Groff Court	Phone (919)422-7349
Directions to job site from Lillington	
Subdivision Leigh Laure 1 5/D	Lot20
Description of Proposed Work Construct New Ho	me # of Bedrooms 3
Heated SF 2235 Unheated SF 993 Finished Bonus Room?  General Contractor Informati	Crawl Space Slab
Durham Building & Electric	(919) 422-73491
Building Contractor's Company Name Clayton,	Telephone
4567 Little Creek Church Rd NC	RADURHAM 1@ gmail. Co
Address	Email Address
31647 license #	
Electrical Contractor Informat	tion
Description of Work Wew House Service Size	e 20 Amps T-Pole YesNo
KA Tackson Electrical	
lectrical Contractor's Gompany Name	Telephone
9261 RALGIGH RD BENSON NC	Email Address
27504	Email Address
rense #	
Mechanical/HVAC Contractor Info	
Description of Work Install new house equipm	ient
Lee Hta & AC Inc	(919)553-6957
Mechanical Contractor's Company Name	Telephone
1957 Castleberry Rd Clanton, NC	Lee hvacclayton@gat
ddress 25.0	Email Address
95108	
icense # Plumbing Contractor Information	tion
escription of Work Plumb New Noose:	# Baths
LW POVIKIN	# Dauis
lumbing Contractor's Company Name	Telephone
lumbing Contractor's Company Name	Telephone
ddress	Email Address
27529	
icense #	
Insulation Contractor Informa	tion
Mozingo Insulation	
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 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 Affidavit for Worker's Compensation N C G S 87-14 The undersigned applicant being the Officer/Agent of the Contractor or Owner General Contractor 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 \_\_\_\_\_ Date \_\_\_\_\_