

Initial Application Date: 12/22/16

Application # 40457

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: Stancil Builders Inc. Mailing Address: 466 Stancil Road
City: Angier State: NC Zip: 27501 Contact No: 9196392073 Email: wendydorman@embarqmail.com

APPLICANT*: Stanicl Builders Inc. Mailing Address: 466 Stancil Road
City: Angier State: NC Zip: 27501 Contact No: 9196392073 Email: wendydorman@embarqmail.com
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Bruce Harper Phone # 9194226134

PROPERTY LOCATION: Subdivision: Hunters Point Lot #: 35 Lot Size: .700
State Road # 1565 State Road Name: Silas Hayes Road Map Book & Page: 2006 / 112B
Parcel: 070691002336 PIN: 0691-57-2763.000

Zoning: RAB Flood Zone: X Watershed: NA Deed Book & Page: 3425 / 260 Power Company*: Duke Energy Progress
*New structures with Progress Energy as service provider need to supply premise number _____ from Progress Energy.

PROPOSED USE:

- SFD: (Size 39 x 52) # 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: Proposed Manufactured Homes: _____ Other (specify): _____

Required Residential Property Line Setbacks:

	Minimum	Actual
Front	35	36
Rear	25	124
Closest Side	10	20
Sidestreet/corner lot	_____	_____
Nearest Building on same lot	_____	_____

Comments: Ref old file
16963

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 210 to Angier, Right on 55 towards Coats, Left on Silas Hayes, S/D
down on the 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.

Wendy S. Durman
Signature of Owner or Owner's Agent

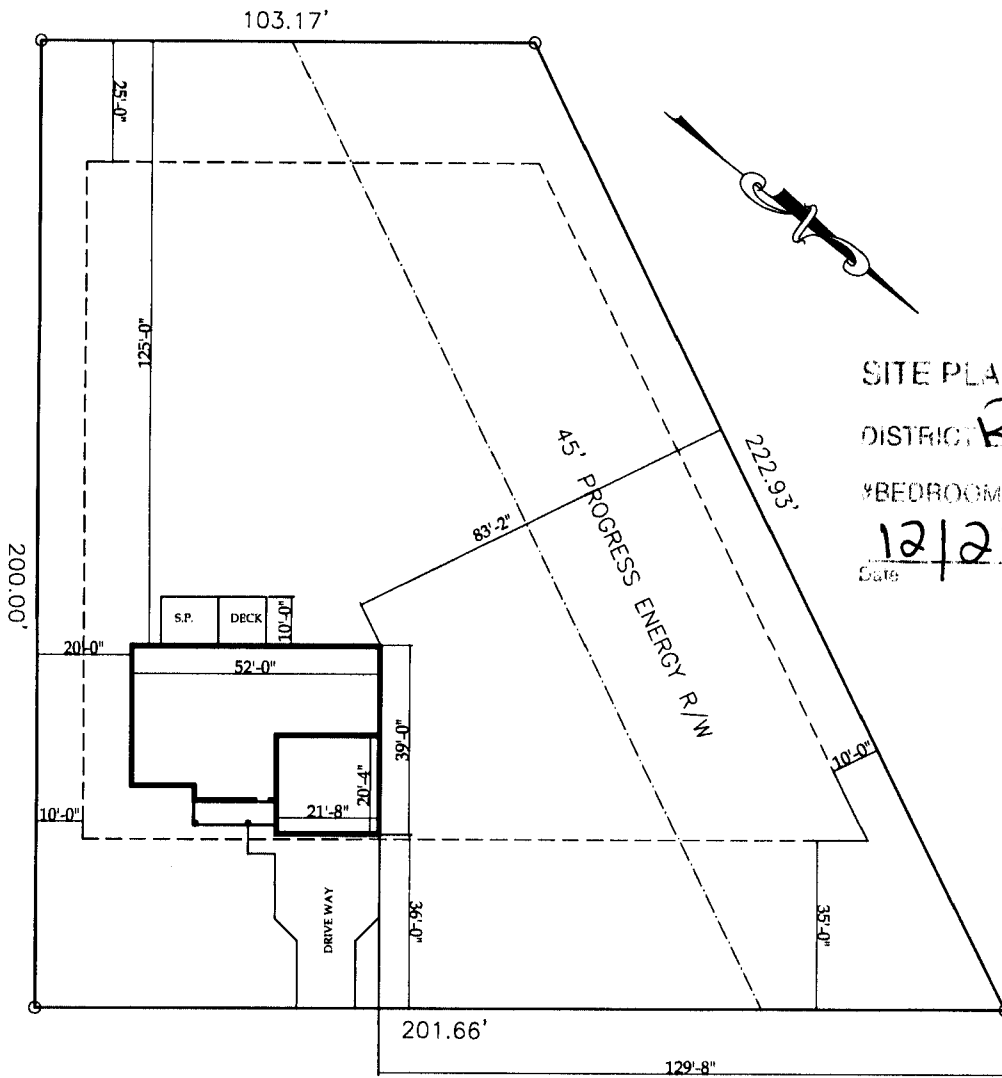
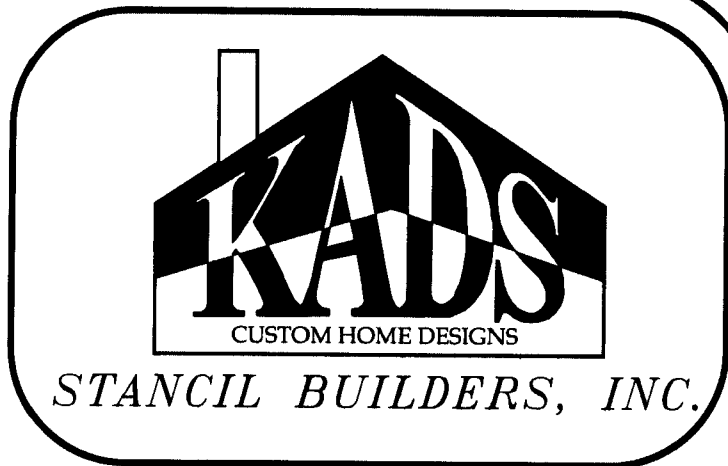
12-20-16
Date

*****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****

IMPERVIOUS CALCULATIONS

LOT = 30468 SF
 PROPOSED HOUSE - 1981 SF
 PROPOSED DRIVE - 655 SF
 PROPOSED TOTAL - 2636 SF
 IMPERVIOUS PERCENTAGE = 9%



SITE PLAN APPROVAL
 DISTRICT RA 30 USE SFD
 #BEDROOMS 3
 Date 12/22/14
 Zoning Administrator *[Signature]*

Lot 35 HUNTERS POINT
 84 HIGH STANDARD LANE
 ANGIER, NC 27501
 Pin 0691-57-1916.000
 Deed Book 3425 Page 260
 Book of Maps 2006 Page 1128

LOT 35 HUNTERS POINT

SCALE 1" = 40'-0"

NAME: Stancil Builders 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.

Wendy S. Norman
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

12-20-16
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 Stancil Builders Inc. Date _____
Site Address 84 High Standard Ln. Angier NC 27501 Phone 919-639-2073
Directions to job site from Lillington Hwy 27 to Coats, left on Hwy 55 towards Angier, right on Silas Hayes Rd
Subdivision on right
Subdivision Hunters Point Lot 35
Description of Proposed Work SFD # of Bedrooms 3
Heated SF 1340 Unheated SF _____ Finished Bonus Room? _____ Crawl Space Slab _____

General Contractor Information

Stancil Builders, Inc. 919-639-2073
Building Contractor's Company Name Telephone
440 Stancil Rd Angier NC 27501 wendydorman@embargo.com
Address Email Address
34533
License #

Electrical Contractor Information

Description of Work SFD Service Size 200 Amps T-Pole Yes No
SNO Electrical 919-427-6952
Electrical Contractor's Company Name Telephone
19655 NC 210 Hwy Angier NC 27501
Address Email Address
13675-L
License #

Mechanical/HVAC Contractor Information

Description of Work SFD
Stephenson Heating + Air 919-329-0686
Mechanical Contractor's Company Name Telephone
343 Shipwash Dr. Garner NC 27529
Address Email Address
18644
License #

Plumbing Contractor Information

Description of Work SFD # Baths 2
Barnes Plumbing, Inc 919-422-2133
Plumbing Contractor's Company Name Telephone
209 Millwood Ln Angier NC 27501
Address Email Address
P17735
License #

Insulation Contractor Information

Tatum Insulation II Inc. 519 Old Drug Store Rd. 919-661-0999
Insulation Contractor's Company Name & Address Telephone
Garner NC
27529

*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

Wendy S. Norman
Signature of Owner/Contractor/Officer(s) of Corporation

12-20-16
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 Stancil Builders Inc.

Sign w/Title Wendy S. Norman Date 12-20-16

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 578174

Filed on: 12/22/2016

Initially filed by: StencilBuildersInc

Designated Lien Agent

Fidelity National Title Company, LLC

Online: www.liensnc.com

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

Phone: 888-690-7384

Fax: 913-489-5231

Email: support@lencnc.com

Project Property

Lot 35 Hunters Point Book of Maps 2006 Page
1128 Deed Book 3425 Page 260
84 High Standard Lane
Angier, NC 27501
North Carolina County

Property Type

1-2 Family Dwelling

Date of First Furnishing

01/16/2017

Owner Information

Stencil Builders Inc
466 Stencil Road
Angier, NC 27501
United States
Email: bgoldston@embarqmail.com
Phone: 919-639-2073

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.

View Comments (0)

Technical Support Hotline: (888) 690-7384