

Initial Application Date: 1-12-17

Application # 1750840588

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: Wellons Realty Inc. Mailing Address: P.O. Box 730
City: Dunn State: NC Zip: 28335 Contact No: 910-892-3123 Email: R.P.Wellons@wellonsrealty.com

APPLICANT: Wellons Realty Inc. Mailing Address: P.O. Box 730
City: Dunn State: NC Zip: 28335 Contact No: 910-892-3123 Email: R.P.Wellons@wellonsrealty.com
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Duane Stephenson Phone # 910-263-0310
Hunters Run

PROPERTY LOCATION: Subdivision: 1351 Cane Mill Rd Lot #: - Lot Size: .83
State Road # _____ State Road Name: Cane Mill Map Book & Page: 2, 265

Parcel: 07140001001561 PIN: 1600-31-3252.000
Zoning: COATS Flood Zone: NO Watershed: _____ Deed Book & Page: 794, 0989 Power Company*: Duke/Progress Energy

*New structures with Progress Energy as service provider need to supply premise number _____ from Progress Energy.

PROPOSED USE:

SFD: (Size 41' x 50') # 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:

Comments: _____

Front Minimum 30 Actual 52

Rear 30' 110'

Closest Side 15' 42'+38'

Sidestreet/corner lot _____

Nearest Building on same lot N/A

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: _____

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 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****

NAME: _____

APPLICATION #: 40588

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 # 020467-LB ²⁻⁶⁻¹⁷

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.

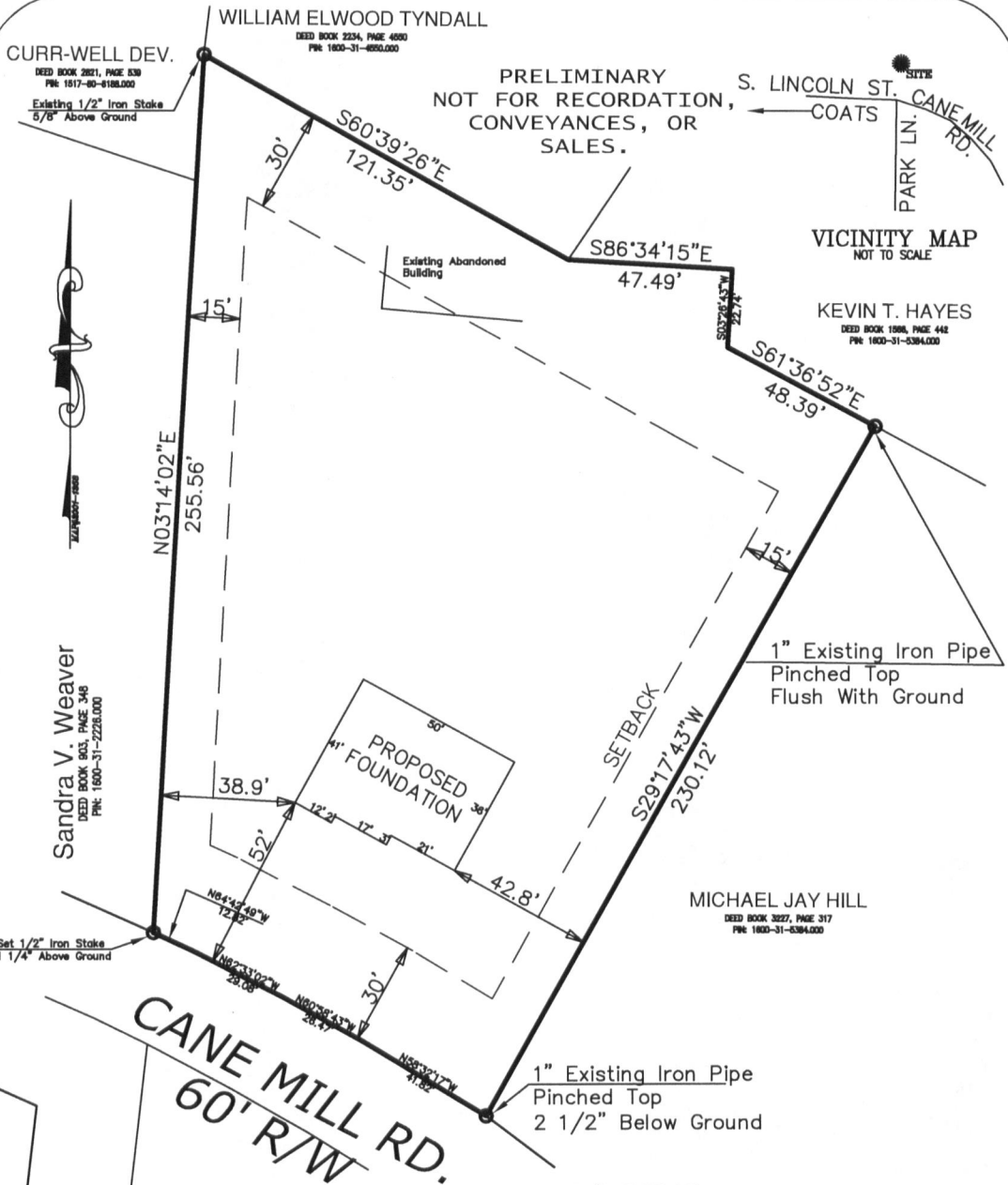
I Have Read This Application And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And State Officials Are Granted Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules.

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)

DATE

2-6-17



PLOT PLAN FOR
Wellons Realty, Inc.
 GROVE TOWNSHIP HARNETT CO.,
 NORTH CAROLINA
 SCALE: 1" = 40'
 DEC.. 17TH, 2016

I, Ronnie E. Jordan certify that this plat was drawn under my supervision from an actual survey made under my supervision (Deed description recorded in Book 794, Page 989, etc.); that the boundaries not surveyed are clearly indicated as drawn from information found in Book _____ Page _____; That the ratio of precision as calculated is 1:10,000±; Witness my original signature, license number and seal this 17th day of DEC., A.D., 2016.

I, Ronnie E. Jordan, Professional Land Surveyor No. 2556, certify that this plat is a survey of an existing parcel or parcels of land.

SURVEYOR _____ L - 2556
 REGISTRATION NUMBER

RONNIE E. JORDAN PLS

35 GLENFIELD DRIVE
 PH. (910) 897-6981

DUNN, N.C. 28334
 CELL (910) 237-5893



TOWN OF COATS

ZONING PERMIT APPLICATION

NOTE: Attach a site plan that includes property lines (front, side, and rear), location of proposed structures (including driveways, decks, etc.), and existing structures. This plan should be drawn to scale. This form along with plans shall be submitted to the Harnett County Building Inspections Department.

Permit No.: 011917-1 Date: 1/19/17 Fee: 50.00

Parcel ID*: 07160001001561 Area Zoned As: R-20

APPLICANT:

PROPERTY OWNER:

Name (Print) Wellons Realty Inc.

Name Wellons Realty Inc.

Address P.O. Box 730

Address P.O. Box 730

City, State Dunn N.C.

City, State Dunn N.C.

Zip Code 28335

Zip Code 28335

Phone # 910-892-3123

Phone # 910-892-3123

Location of Property: 1351 cane mill Rd
 IN-TOWN

ETJ _____ ETJ (contiguous) _____

Present Use of Property: Empty lot

PROPOSED USE OF PROPERTY:

- Single Family Dwelling: # Rooms: 8 # Bedrooms: 3 Square Feet: 1283
- Multi Family Dwelling: # of Units: _____ #Bedrooms (per unit): _____ Square Feet (per unit)
- Mobile Home (single lot): Single wide: _____ Double Wide: _____
- Mobile Home Park: Section 16, Zoning Ordinance must apply
- Business: Total # of employees per day _____ Type of business _____
- Others (specify): _____

Existing structure: _____ Renovate: _____ Addition: _____ Demolish: _____

WATER AND SEWER SUPPLY:

Water: Private Public Proposed Existing
 Sewer: Private Public Proposed Existing

Applicant: I certify that all of the information presented in this application is true, complete, and accurate to the best of my knowledge. False information is grounds for rejection of the application.

Signature: [Signature]

Date: 1-19-17

ZONING ADMINISTRATOR USE ONLY

Notes: _____

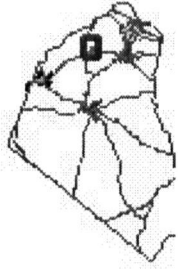
Approved: Denied:

APPROVED

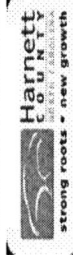
Zoning Administrator: [Signature] Date: 1/19/17

TOWN OF COATS ZONING
 THIS PERMIT IS VALID FOR 12 MONTHS

**HARNETT COUNTY, NORTH CAROLINA
GIS/LAND RECORDS**



- AddressPoints
- Road Centerlines
- MajorRoads
- Rivers
- Parcels
- County_Boundary
- CityLimits
- Harnett_2013.sid
- Red: Band_1
- Green: Band_2
- Blue: Band_3



Any use of this map shall be at the sole risk of the user of this map. Although, all effort has been taken to insure accuracy in the data presented, Harnett County makes no warranty, expressed or implied, as to the accuracy of this information represented herein. Any user of this product shall hold harmless Harnett County, its elected officials, employees and agents from and against any claim, damage, loss, action, cause of action, or liability arising from the use of this GIS product.

Harnett County GIS
305 W Cornelius Harnett Blvd, Suite 100
Lillington NC 27546
Phone: 910-893-7523 www.harnett.org

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 Wellons Realty Inc. Date 1-5-17
Site Address 1351 Cave Mill Road Phone _____
Directions to job site from Lillington Turn east on Main St. in Coats, follow out of town, to large sign @ Hunters Run @ Park Ln. straight across rd from sign
Subdivision _____ Lot _____
Description of Proposed Work SFD # of Bedrooms _____
Heated SF _____ Unheated SF _____ Finished Bonus Room? _____ Crawl Space _____ Slab _____

General Contractor Information

Wellons Realty Inc. 910-892-3123
Building Contractor's Company Name Telephone
P.O. Box 730 Dunn N.C. R.P. Wellons@wellonsrealty.com
Address Email Address
7746
License #

Electrical Contractor Information

Description of Work SFD Service Size 200 Amps T-Pole Yes No
jhpe electrical 919-820-0837
Electrical Contractor's Company Name Telephone
81 Beaver Creek Dr. Dunn N.C. 28334 jhpelectrical@hotmail.com
Address Email Address
27284 U
License #

Mechanical/HVAC Contractor Information

Description of Work SFD
J+M HVAC 910-897-5501
Mechanical Contractor's Company Name Telephone
724 Tarlington rd. Dunn N.C. jandmhracecenturylink.net
Address Email Address
17164
License #

Plumbing Contractor Information

Description of Work SFD # Baths 2
Wagner Plumbing 910-890-2299
Plumbing Contractor's Company Name Telephone
555 Tirzah rd. Lillington N.C. wagnerplumbingco@yahoo.com
Address Email Address
315760
License #

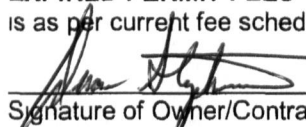
Insulation Contractor Information

Tri-City Insulation 910-486-8855
Insulation Contractor's Company Name & Address 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


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

1-5-17
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

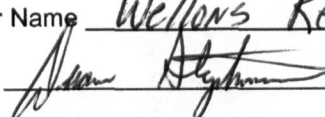
Has three (3) or more employees and has obtained workers compensation insurance to cover them

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 Wellons Realty Inc.
Sign w/Title  Superintendent Date 1-5-17

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 583061

Filed on: 01/06/2017

Initially filed by: WellonsR

Designated Lien Agent

Investors Title Insurance Company

Online: 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>)

Owner Information

Wellons Realty, Inc.
P.O. Box 730
Dunn, NC 28335
United States
Email: dllucas@wellonsconstruction.com
Phone: 910-892-3123

Project Property

Near Hunters Run Subdivision
1351 Cane Mill Road
Coats, NC 27521
Harnett County

Property Type

1-2 Family Dwelling

Date of First Furnishing

01/16/2017

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

Plan Box # B4

Date 1-19-17
Job Name Wellons Realty Inc

App # 40588

Valuation 123072

SQ Feet 1282

Garage 480

= _____

Inspections for SFD/SFA

Crawl Slab _____ Mono _____ Basement _____

Footing	Footing	Plum Under Slab	Footing
Foundation	Foundation	Ele. Under Slab	Foundation
Address	Address	Address	Waterproofing
Open Floor	Slab	Mono Slab	Plum Under slab
Rough In	Rough In	Rough In	Address
Insulation	Insulation	Insulation	Slab
Final	Final	Final	Open Floor
			Rough In
			Insulation
			Final

Foundation Survey NO

Envir. Health 20

Other _____



Additions / Other

- Footing _____
- Foundation _____
- Slab _____
- Mono _____
- Open Floor _____
- Rough In _____
- Insulation _____
- Final _____