

Initial Application Date: 1.31.17

Application # 1750040054
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: Diversified Investors Inc. Mailing Address: P.O. Box 1685

City: Jacksonville State: NC Zip: 28540 Contact No: 910-346-9800 Email: bettyb@jlpnc.com

APPLICANT: Atlantic Construction Inc. Mailing Address: 7 Doris Ave. E.

City: Jacksonville State: NC Zip: 28540 Contact No: 910-938-9053 Email: aci@atlanticconstructioninc.com

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Lee Huffman Phone # 910-330-9706

PROPERTY LOCATION: Subdivision: Sweetwater Lot #: 49 Lot Size: 0.42 A

State Road # 2044 State Road Name: Will Lucas Rd. Map Book & Page: 2011 / 470

Parcel: 010544 000457 PIN: 0544-46-0751.000

Zoning: AA-20R Flood Zone: _____ Watershed: _____ Deed Book & Page: 2363 / 0941 Power Company*: South River Electric

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

PROPOSED USE:

SFD: (Size 40' x 40') # Bedrooms: 4 # Baths: 2 1/2 Basement(w/wo bath): _____ Garage: X Deck: V Crawl Space: _____ Slab: X Monolithic Slab: _____
(Is the bonus room finished? (X) yes () no w/ a closet? (X) 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: 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 (V) no

Does the property contain any easements whether underground or overhead (V) yes () no drainage easement

Structures (existing or proposed): Single family dwellings: 1 Manufactured Homes: _____ Other (specify): _____

Required Residential Property Line Setbacks:

	Minimum	Actual
Front	<u>35</u>	<u>36</u>
Rear	<u>25</u>	<u>112.55</u>
Closest Side	<u>10</u>	<u>34</u>
Sidestreet/corner lot	<u>20</u>	<u>—</u>
Nearest Building on same lot	<u>10</u>	<u>—</u>

Comments: _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: South on 401

TURN RIGHT onto W. Reeves Bridge Rd


TURN LEFT onto Lucas Rd

TURN LEFT Hybrid Ln

TURN RIGHT onto RAIN maker St.

TURN RIGHT onto Folly Ct.

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.

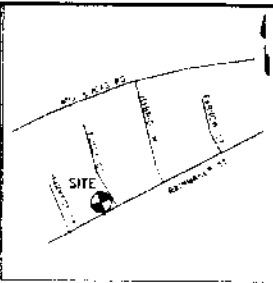


Signature of Owner or Owner's Agent

1-31-2017
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

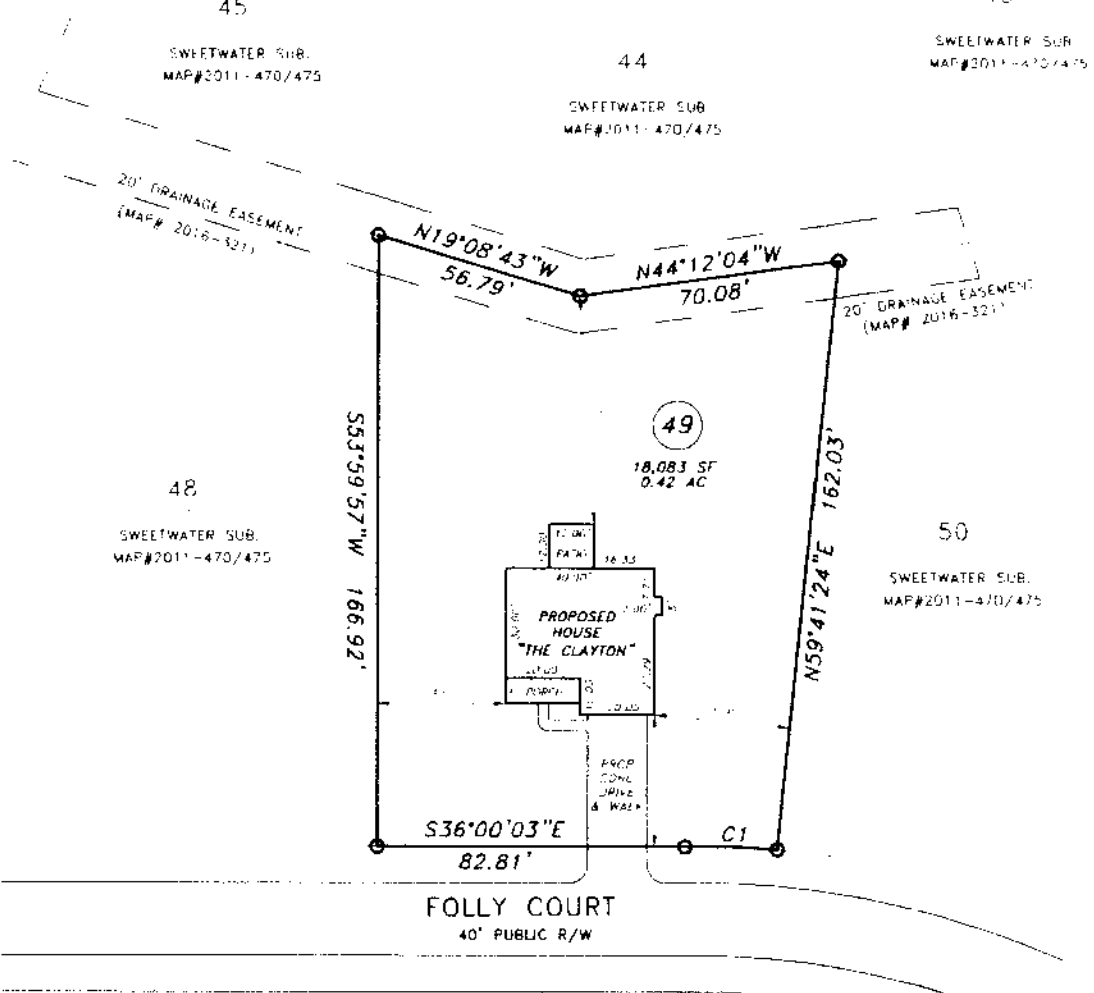


LEGEND
 P/W - RIGHT OF WAY
 DB - DEED BOOK
 PL - PLAT
 PROP - PROPOSED
 SF - SQUARE FEET
 AC - ACRES
 CONC - CONCRETE
 EASEM - EASEMENT
 PL - PROPERTY LINE

CURVE	RADIUS	ARC LENGTH	CHORD LENGTH	CHORD BEARING
C1	250.00'	24.83'	24.82'	S33°09'19"E

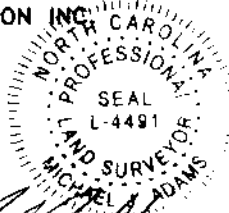


Vicinity Map
(Not to Scale)



PLOT PLAN

PROPERTY OF: ATLANTIC CONSTRUCTION INC.
 ADDRESS: 51 FOLLY COURT
 CITY: LINDEN, NC
 COUNTY: HARNETT
 TAX PIN: 0544-46-0751.000



MICHAEL J. ADAMS
 PLS-L-4491
 CFS NC-075

TOWNSHIP: STEWARTS CREEK
 DATE: JANUARY 24, 2017
 SCALE: 1" = 40'
 REFERENCE: LOT 49
 SWEETWATER SUB
 MAP # 2011
 PGS 470-475

MIN. DIM. (1/8" = 10')
 38'-0" (100')



M.A.S.S. SURVEYING, INC.
 C-2589
 1306 FORT BRAGG ROAD
 FAYETTEVILLE, NC 28305
 PHN: (910)484-6432
 MAPSSURVEYING@NC.RR.COM

- NOTES**
- THIS MAP IS NOT A CERTIFIED SURVEY AND NO RELIANCE MAY BE PLACED IN ITS ACCURACY.
 - THIS MAP IS FOR PERMITTING PURPOSES ONLY.
 - THIS MAP CAN NOT BE USED FOR RECORDATION OR ATTACHED TO A DEED TO BE RECORDED.
 - THIS MAP IS NOT DRAWN IN ACCORDANCE WITH G.S. 17-110.

THIS PLAT IS TO BE USED
IN CONJUNCTION WITH
SHEET S-2, S-3, S-4, & S-5

setbacks: FRONT: 10'
SIDE: 10'
REAR: 20'
CORNER: 20'

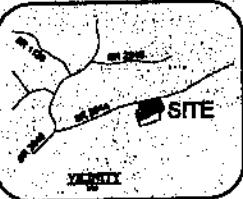
THESE ARE RESERVED A PUBLIC HIGHWAY
AND UTILITY EASEMENT OR BARRIERS
CONFORM WITH NEIGHBORHOOD PLANNING
ON ALL LOTS IN THIS SUBDIVISION.

WILL LUCAS RD. (SR 2044) (60' RW)

JAMES F. MATTHEWS
PIN# 0544-37-5118
D.B. 1484, PG. 721
MAP# 2000-228

SHAYLA HARTLEY MATTHEWS
PIN# 0544-38-8900
D.B. 2514, PG. 752
MAP# 2007-323

SARAH S. GRAMBOER
PIN# 0544-25-8998
D.B. 1198, PG. 193



REVIEW OFFICER'S CERTIFICATE

STATE OF NORTH CAROLINA, COUNTY OF HARNETT
I, Kimberly S. Harpave

REVIEW OFFICER OF HARNETT COUNTY,
CERTIFY THAT THE MAP OR PLAT TO WHICH THIS
CERTIFICATION IS APPLIED MEETS ALL STATUTORY
REQUIREMENTS FOR RECORDING.

Kimberly S. Harpave
REGISTERED OFFICER DATE OF EXPIRATION OF LICENSE OF OFFICE
MAY 26, 2011 11:55 PM
MAY 26, 2011 PG. 08-02 FEE: \$150.00

REGISTER OF DEEDS CERTIFICATE

STATE OF NORTH CAROLINA, HARNETT COUNTY
FILED FOR REGISTRATION AT

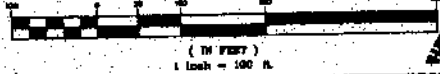
2011, IN THE REGISTER OF DEEDS OFFICE

RECORDED IN PLAT BOOK 2011 PAGE 419-420 (170)

Kimberly S. Harpave
REGISTER OF DEEDS
or Angela J. Boyd Ready

28.60 ACRES TOTAL
FUTURE DEVELOPMENT
DIVERSIFIED INVESTORS, INC.
PIN#0544-46-6001
D.B. 2393, PG. 341
MAP# 2007-323

GRAPHIC SCALE



28.60 ACRES
FUTURE DEVELOPMENT
DIVERSIFIED INVESTORS, INC.
PIN#0544-46-6001
D.B. 2393, PG. 341
MAP# 2007-323

FLOOD ZONE AE

FLOOD ZONE X

Enoch Engineers, P.A.
CORPORATE ENGINEERS & SURVEYORS
1405 W. HARRIS ST. SUITE 200
RANDOLPH, NC 28134
PHONE: (704) 944-7700 FAX: (704) 944-1174
WWW.ENOCHENGINEERS.COM

PLAN INFORMATION	HORIZONTAL SCALE
CREATED BY:	1" = 300'
DATE:	VERTICAL SCALE:
12/14/11	1" = 10'
CHECKED BY:	DATE CHECKED:
JTS	APRIL 25, 2011
SURVEY INFORMATION	

LOCATION:
WILL LUCAS RD (SR 2044)
STERNAWITS CREEK TOWNSHIP
HARNETT COUNTY, NC
PROPERTY OWNERS:
DIVERSIFIED INVESTORS, INC.
P.O. BOX 9888
JACKSONVILLE, NC 28140

**SUBDIVISION PLAT
FOR
SWEETWATER
SUBDIVISION**

RE PROBLEM: 3440
19
0 1

S:\projects\3440 - 07 Area Three - 08 Lucas Road\Area Three\080808.dwg 7/18/2011 1:06:31 PM DDT

NAME: Atlantic Construction Inc

APPLICATION #: 17-50040654

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.

[Signature]
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

1/31/2017
DATE

DIVERSIFIED INVESTORS INC.
P.O. BOX 1685 – 405 JOHNSON BLVD.
JACKSONVILLE, NC 28540
(910) 346-9800 – FAX (910) 346-1210
E-mail: bettyb@jlpnc.com

July 21, 2011

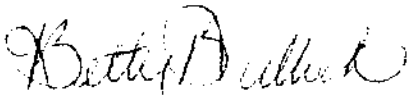
Re: Sweetwater Subdivision – Harnett County, NC

To Whom It May Concern:

As the developers of Sweetwater Subdivision, we have granted Atlantic Construction Inc., to construct single family dwellings in the subdivision project.

Should you have any questions or need any additional information concerning this authorization, please do not hesitate to contact me.

Sincerely,



Betty Bullock, President
DIVERSIFIED INVESTORS INC.

bb

09/09/11

Application #

40054

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 Diversified Innovations INC Date
Site Address 51 Folly Ct. Linden, NC 27356 Phone 910-346-9800
Directions to job site from Lillington South 401, Turn Right onto W. Reeves Bridge rd
Turn Left onto W.11 Lucas Rd, Turn Left onto Hybrid Ln
Turn Right onto Rainmaker St, Turn Right Folly Ct.
Subdivision Sweetwater Lot 49
Description of Proposed Work S.F.D. # of Bedrooms 4
Heated SF 2212 Unheated SF 528 Finished Bonus Room? Yes Crawl Space Slab

General Contractor Information

Atlantic Construction Inc. 910-939-9053
Building Contractor's Company Name Telephone
7 Doris Ave E. Traskville, NC 28540
Address aci@atlanticconstruction.com
37596 Email Address
License #

Electrical Contractor Information

Description of Work S.F.D. (new) Service Size 200 Amps T-Pole Yes No
Tareal Pride Electrical Corp 910-531-4371
Electrical Contractor's Company Name Telephone
P.O. Box 452 Steadman, NC 28391
Address
22985-6 Email Address
License #

Mechanical/HVAC Contractor Information

Description of Work S.F.D. (new)
CERTIFIED HEATING & AIR CONDITIONING, LLC 910-858-0000
Mechanical Contractor's Company Name Telephone
P.O. Box 1071 Hope Mills, NC 28348
Address
H3C1-20012 Email Address
License #

Plumbing Contractor Information

Description of Work S.F.D. (new) # Baths 2 1/2
Dell Haine Plumbing 910-429-9939
Plumbing Contractor's Company Name Telephone
7612 Documentary Dr. Fayetteville, NC 28306
Address
24204 P-1 Email Address
License #

Insulation Contractor Information

A-1 Insulation Inc. P.O. Box 150 Hope Mills, NC 28348 910-850-3462
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

X [Signature]
Signature of Owner/Contractor/Officer(s) of Corporation

X 1-31-2017
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 ATLANTIC CONSTRUCTION INC.

Sign w/Title [Signature] Vice President Date 1-30-17

Designated Lien Agent

Investors Title Insurance Company

Entry Number: 594527

Filed by: twotees

Filing Date: 01/30/2017

Online: www.liensnc.com

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

Email: support@liensnc.com

Fax: (919) 489-5231

Technical

Support Hotline: (888) 690-7384

Owner Information

Atlantic Construction Inc.

7 Doris Ave. E.

Jacksonville

NC

28540

910-938-9053

danny@atlanticconstructioninc.com

Project Property

Sweetwater Lot 49

51 Folly Ct.

Linden

NC

28356

Property Type: 1-2 Family Dwelling

Date First Furnished:

Comments

No comments have been made.