

Initial Application Date: 2-3-17

Application # 1756040094
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: Connie Stewart Currin & Douglas Brian Currin Mailing Address: P.O. Box 752
City: Mamers State: NC Zip: 27552 Contact No: 910-612-0902 Email: dougcurrin@nccumc.org

APPLICANT: Same Mailing Address: _____
City: _____ State: _____ Zip: _____ Contact No: _____ Email: _____
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Douglas Currin Phone # 910-612-0902

PROPERTY LOCATION: Subdivision: "minor subdivision surveyed and mapped for: Connie Stewart Currin and Douglas Brian Currin" Lot #: 1 Lot Size: 2.001 a

State Road # 2048 State Road Name: Bethel Baptist Road Map Book & Page: 2016 / 311

Parcel: 010534 0057 07 PIN: 0534-78-3162.000

Zoning: RA-20R Flood Zone: - Watershed: - Deed Book & Page: 3450 / 387 Power Company*: South River Electric

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

PROPOSED USE:

CARPORT 30x24

SFD: (Size 40 x 65) # 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 _____ Actual 148'

Rear _____ 25'

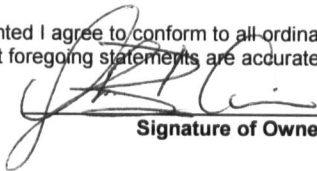
Closest Side _____ 45'

Sidestreet/corner lot _____

Nearest Building on same lot _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Take Hwy 210 south toward Spring Lake; turn left onto Elliott Bridge Road; turn right onto Bethel Baptist Road; entrance to property is the second drive 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.



Signature of Owner or Owner's Agent

2-3-17
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 #: 40694

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 # 020452-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)

2/3/17
DATE

SITE PLAN APPROVAL

DISTRICT RA-20R USE JFD

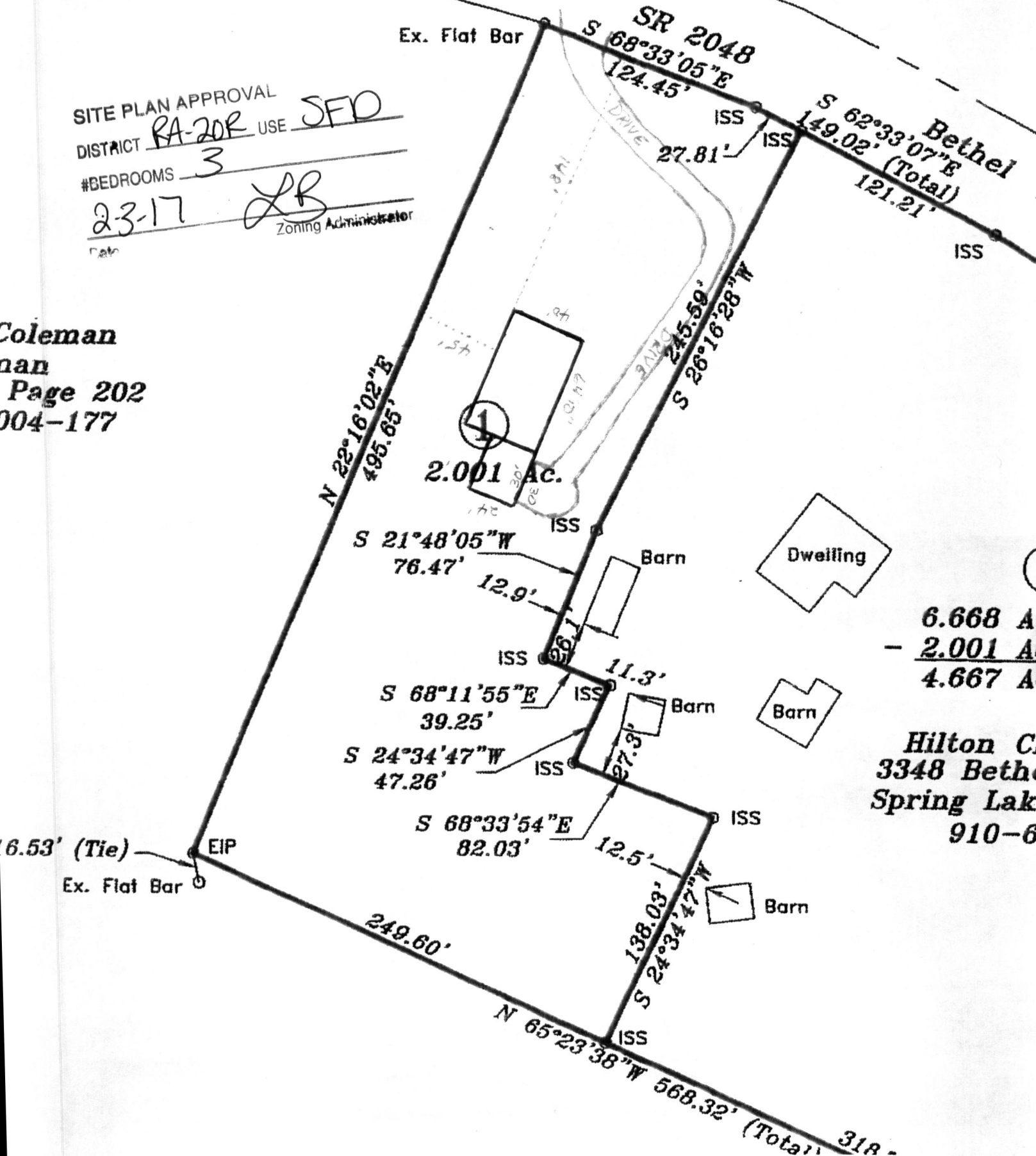
#BEDROOMS 3

2-3-17

LB

Zoning Administrator

Coleman
man
Page 202
004-177



6.668 Ac
- 2.001 Ac
4.667 Ac

Hilton CI
3348 Bethel
Spring Lake
910-6

Notes for Clarification: The footprint of the house is 40' by 64'10" with a 24' by 24' carport off the backside. The footprint of the carport is drawn on the map as 24' by 30' due to a six foot offset between the home and the carport that includes a 63 square foot storage area. As it is drawn, the front west corner of the house is approximately 148' from the road front property line and the right side of the house(if facing the front of the structure) is approximately 45' from the west side property line. The driveway is drawn running down the left side of the house near the east side property line to the east side of the carport which will serve as the carport entrance.

Directions to Property: From Lillington take Hwy 210 south toward Spring Lake; Turn left on Elliott Bridge Road; Turn right on Bethel Baptist Road; Entrance to property is the second driveway on the left.

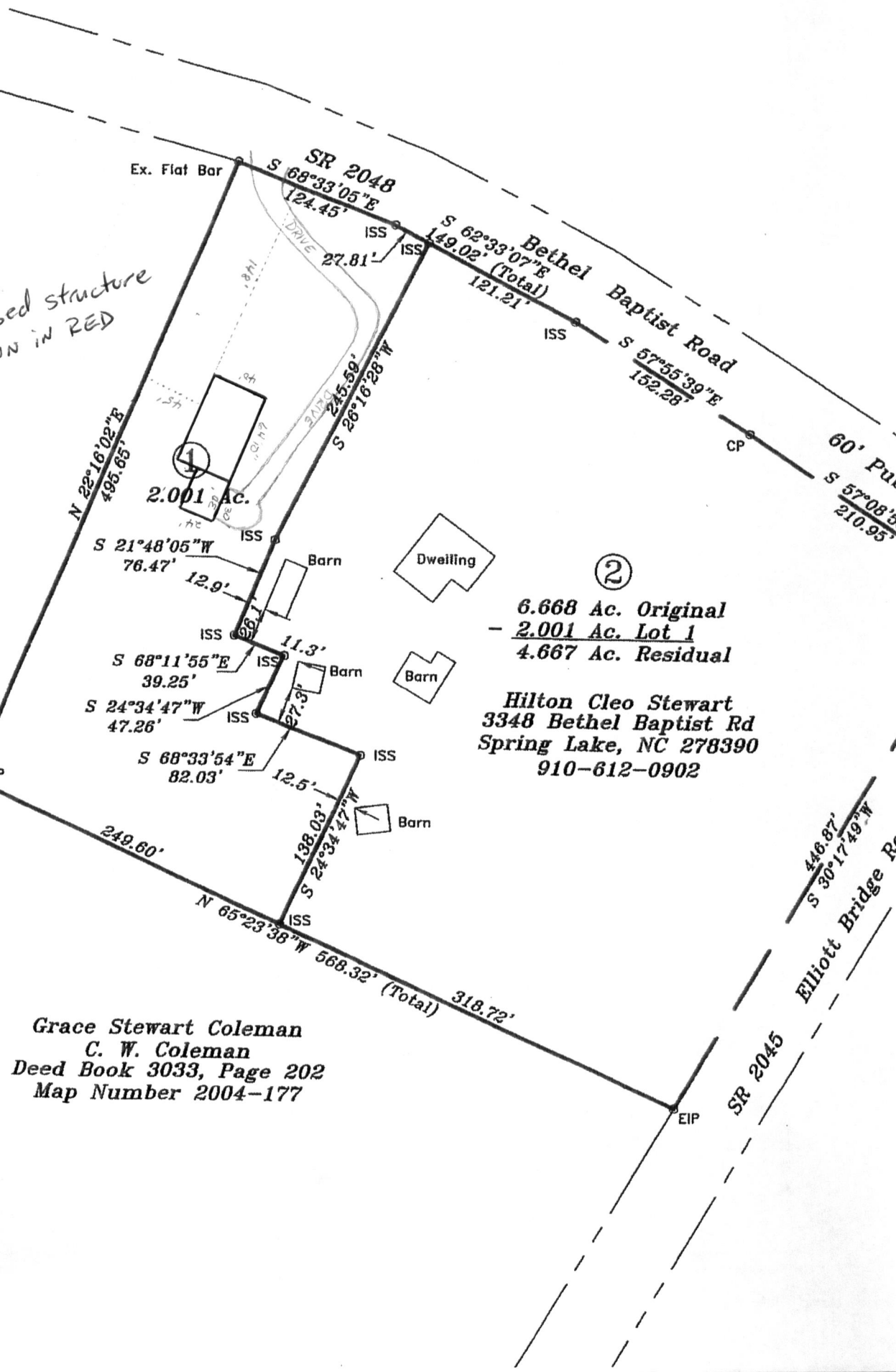
FRONT: 35' from R/W
REAR: 25'
SIDE: 10'
CORNER LOT SIDE: 20'

located with
Hazard "Z"
FEMA map
Effective D

Proposed structure
drawn in RED

Stewart Coleman
W. Coleman
ok 3033, Page 202
umber 2004-177

18°31'E 16.53' (Tie)
Ex. Flat Bar



②
 6.668 Ac. Original
 - 2.001 Ac. Lot 1
 4.667 Ac. Residual

Hilton Cleo Stewart
 3348 Bethel Baptist Rd
 Spring Lake, NC 278390
 910-612-0902

Grace Stewart Coleman
 C. W. Coleman
 Deed Book 3033, Page 202
 Map Number 2004-177

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 he subdivision
 re) hereby
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 that I (we)
 r had any
 cated directly
 roperty

40694

Application for Building and Trade Permit

Owner's Name: LEUGLASS CURRIN Date: 3/15/17
Address: _____ Phone: _____
Directions to job site: _____

Subdivision: N/A Lot: _____
Type Construction: (Please Check) Building Use: (Please Check)
New Renovation Addition
Moved House Other Residential Modular
Specify Type of Work: _____ Commercial Multi-Family

Building Permit Information

Heated: Crawl Space
Unheated: Slab
Building Construction Cost \$ _____
Acres Disturbed 1 Stories _____
Building Contractor's Company Name Mass Pole Builders & Realty
W. Almon Address PO Box 577 Lillington NC
Signature of Officer(s) of Corporation License # 18637 Telephone 910-893-4875

Electrical Permit Information

Description of Work Electrical Electrical Cost \$ _____
TS Pole: Yes No Underground Overhead
Permanent Service: Underground Overhead
Electrical Contractor's Company Name Pioneer Electric Maintenance Co., Inc. Service Size: _____ Amps
Neil B. Johnson Address 422 Old US 421 Lillington NC, 27546
Signature of Officer (s) of Corporation License # 21643 Telephone 910-814-3751

Insulation Permit Information

Residential Other Not Required
Insulation Contractor's Company Name TGI City Insulation Address 418 Person St Fayetteville NC
910-486-8855 Telephone _____

Mechanical Permit Information


Description of Work HVAC Number of Units _____ Type System _____ Mechanical Cost \$ _____
Number of Tons _____
Mechanical Contractor's Company Name Beasley's HVAC, Inc. Address 57 W.C. Beasley Ln. Coats NC, 27521
R. Brent Beasley License # 9497 Telephone 919-894-4248
Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work Plumbing Number of Baths _____ Plumbing Cost \$ _____
Plumbing Contractor's Company Name W.W. Plumbing Co. Address PO Box 1237e Angier NC
Rich Wells License # 14087 Telephone 639-0195
Signature of Officer (s) of Corporation

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

3/15/17

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

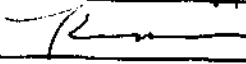
____ Has one (1) or more subcontractors(s) and has obtained workers compensation insurance to cover them

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 Moss Home Builders & Realty Inc

Sign w/Title  VP Date 3/15/17

3-14-17

Plan Box # C5

Job Name MOSS, Alan

App # 1750040694

Valuation \$179,808

SQ Feet 1873

Garage 621
= 2494

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 New Septic

Other _____

Additions / Other

Footing _____

Foundation _____

Slab _____

Mono _____

Open Floor _____

Rough In _____

Insulation _____

Final _____

DO NOT REMOVE!

40694

Details: Appointment of Lien Agent

Entry #: 626524

Filed on: 03/28/2017

Initially filed by: mosshomebuilders

Designated Lien Agent

Investors Title Insurance Company

Online: 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

Project Property

Curran Residence
3308 Bethel Baptist Road
Spring Lake, NC 28390
Harnett County

Property Type

1-2 Family Dwelling

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.

Owner Information

Douglas and Connie Curran
3308 Bethel Baptist Road
Spring Lake, NC 28390
United States
Email: 2526mossh@gmail.com
Phone: 910-890-2111

Date of First Furnishing

04/01/2017

View Comments (0)

Technical Support Hotline: (888) 690-7384