

Initial Application Date: 2/28/17

Application # 1750040842
CU# _____

Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.hamett.org/permits

owner: Culement Development

"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION"

Buyer: McKee Homes, LLC Mailing Address: 109 Hay Street, Suite 301
LANDOWNER: Fayetteville State: NC Zip: 28301 Contact No: (910) 475-7100 ext 722 Email: jparton@mckeehomesnc.com

APPLICANT: McKee Homes, LLC Mailing Address: 109 Hay Street, Suite 301
City: Fayetteville State: NC Zip: 28301 Contact No: (910) 475-7100 ext 722 Email: jparton@mckeehomesnc.com
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Josh Parton Phone # (910) 475-7100 ext 722

PROPERTY LOCATION: Subdivision: Dakmont Lot #: 187 Lot Size: 0.49 acre
State Road # 244 State Road Name: Heatherwood br. Map Book & Page: 2016, 47
Parcel: 03958901 1021 20 PIN: 0507-44-4262.000
Zoning: BA200 Flood Zone: X Watershed: NA Deed Book & Page: 03364, 0106 Power Company: Central Electric
*New structures with Progress Energy as service provider need to supply premise number _____ from Progress Energy.

- PROPOSED USE:**
- SFD: (Size 38' x 64') # Bedrooms: 4 # Baths: 2.5 Basement (w/wo bath): _____ Garage: Deck: _____ Crawl Space: _____ Slab: _____ Monolithic 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 <u>100'</u>	_____
Rear _____ <u>56'</u>	_____
Closest Side _____ <u>28'</u>	_____
Sidestreet/corner lot _____	_____
Nearest Building on same lot _____ <u>N/A</u>	_____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:

Docs Rd. to Executive Dr. to Heatherwood Dr.

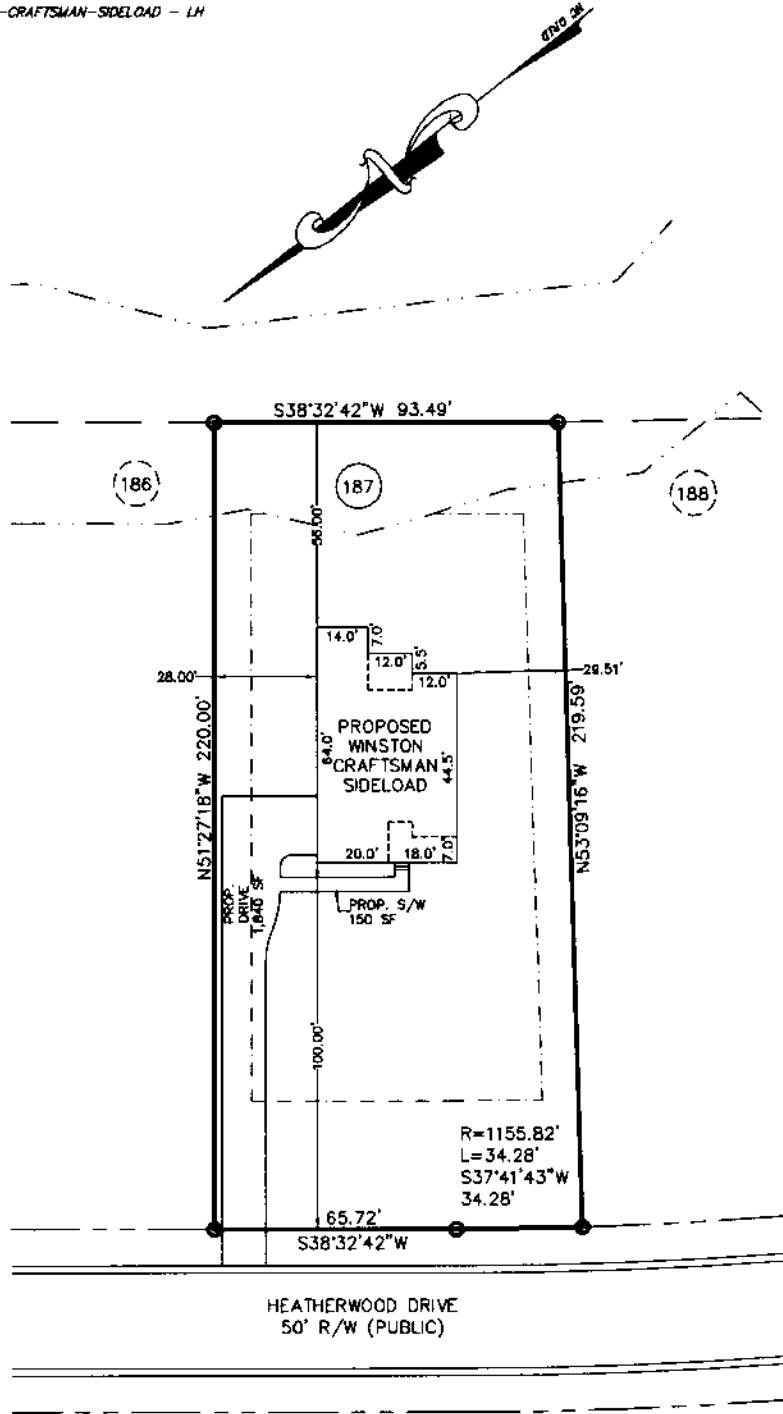
If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted. I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

Josh Parker
Signature of Owner or Owner's Agent

2/22/17
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**



PLOT PLAN

SUBDIVISION: OAKMONT SUBDIVISION
PHASE TWO, SECTION ONE

MB 2016, PG 47

OWNER: MCKEE HOMES, LLC

SCALE: 1" = 40'



The design for the proposed sewage disposal system _____ approved.

Sanitarian Supervisor
Harnett County Health Dept.

Date _____

Averette Engineering Co., P.A.
Established 1970

CIVIL ENGINEERING
LAND SURVEYING
PLANNING

Address:
712 E. Lake Ridge Road
Raeferd, NC 28376

Phone: (910) 488-5656
Fax: (910) 488-0187
License: C-0146

Web: www.averette-eng.com

Michael D. Averette
Michael D. Averette PE-021411
Professional Engineer
FEBRUARY 20, 2017

Date _____

NAME: McKee Homes, LLC

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.

Josh Pantan
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

2/22/17
DATE

SOUTHEASTERN SOIL & ENVIRONMENTAL ASSOC., INC.

PROPOSED SUBSURFACE WASTE DISPOSAL SYSTEM DETAIL SHEET

SUBDIVISION: OAKMONT

LOT 187

INITIAL SYSTEM: APPROVED 25% REDUCTION

REPAIR APPROVED 25% REDUCTION

DISTRIBUTION: D-Box

DISTRIBUTION P-Box

BENCHMARK: 100.0

LOCATION PT ON LINE 187/188

NO. BEDROOMS: 4

LTAR 0.8 GPD/FT²

LINE FLAG COLOR ELEVATION LENGTH

Initial
system

1	P	99.67	50'
2	W	99.08	50'
3	P	98.42	50'
			<u>150'</u>

4	W	97.92	50'
5	P	97.25	50'
6	W	96.50	50'
			<u>150'</u>

BY M. E. ALLEN

DATE 03/20/15

TYPICAL PROFILE

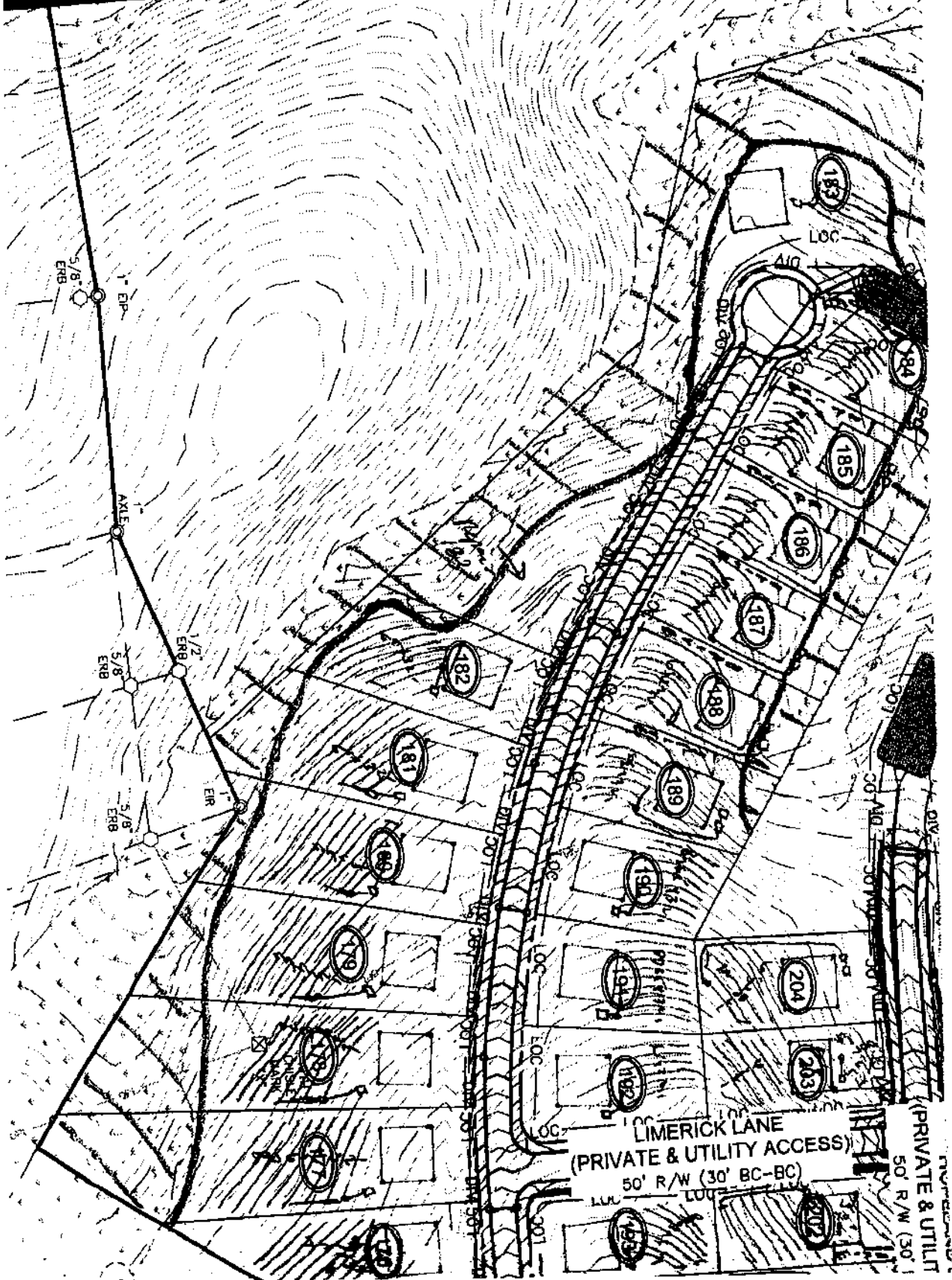
0-48 S/W (VFr, wgr)
11 2 > 48"
INITIAL AT 18-30"

THERE SHALL BE NO GRADING,
CUTTING, LOGGING OR OTHER SOIL
DISTURBANCE IN SEPTIC AREA

OAKMONT SUBDIVISION
 PROPOSED HOUSE BOX/BEDROOM COUNT

LOT	BEDROOMS	HOUSE BOX	ENTRY
157	3	60'X60'	S
158	3	60'X60'	S
159	4	60'X60'	S
160	5	60'X60'	S
161	5	60'X60'	F
162	5	60'X60'	F
163	4	60'X60'	F
164	3	60'X60'	F
165	3	60'X60'	F
166	3	60'X60'	F
167	3	60'X60'	F
168	3	60'X60'	S
169	3	60'X60'	S
170	3	60'X60'	S
172	5	60'X60'	F
173	5	60'X60'	F
174	3	60'X60'	F
175	3	60'X60'	F
176	4	60'X60'	F
177	4	60'X60'	F
178	5	60'X60'	F
179	5	60'X60'	F
180	5	60'X60'	F
181	4	60'X60'	F
182	4	60'X60'	F
183	4	60'X60'	F
184	3	60'X60'	S
185	4	60'X60'	S
186	4	60'X60'	S
187	4	60'X60'	S
188	4	60'X60'	S
189	4	60'X60'	S
190	4	60'X60'	F
191	4	60'X60'	F
192	3	60'X60'	F
193	3	60'X60'	F
194	3	60'X60'	F
195	3	45'X60'	F
196	3	60'X60'	F
197	5	60'X60'	F
198	5	60'X60'	F
199	5	60'X60'	F
200	4	60'X60'	F

201	3	50'X60'	S
202	3	50'X60'	S
203	4	50'X60'	S
204	3	60'X60'	F
289	4	60'X60'	F
290	4	60'X60'	F
291	5	60'X60'	F
292	5	60'X60'	F
293	5	60'X60'	F
294	5	60'X60'	F
295	5	60'X60'	F
296	5	60'X60'	F
297	4	60'X60'	F
298	4	60'X60'	F
299	5	60'X60'	F
300	5	60'X60'	F
301	5	60'X60'	F
302	5	60'X60'	F
303	5	60'X60'	F
304	4	60'X60'	F
305	3	50'X60'	F
306	4	50'X60'	F
307	4	60'X60'	F
308	4	60'X60'	F
314	4	60'X60'	F
315	3	45'X60'	F



LIMERICK LANE
(PRIVATE & UTILITY ACCESS)
50' R/W (30' BC-BC)

(PRIVATE & UTILITY)
50' R/W (30'

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

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

4-7-17
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 McKee Homes, LLC

Sign w/Title Sebastian Rivera Per. Construction Coordinator Date 4-7-17

LIEN AGENT INFORMATION

Effective April 1, 2013

In accordance with North Carolina General Assembly Session Law 2012-158, Inspection Departments are not allowed to issue any permit where the project cost is \$30,000 or more unless the application is for improvements to an existing dwelling that the applicant uses as a residence OR the property owner has designated a lien agent and provided the inspections office with the information below:

Name of Lien Agent First American Title Insurance Company

Mailing address of Agent 19 W. Hargett St., Suite 507
Raleigh, NC 27601

Physical address of Agent same as above

Telephone 888-690-7384 Fax 913-489-5231

Email support@liensnc.com

The information will be attached to the permit record and a copy provided to the applicant. The applicant is required to post a copy on the construction site.

Excerpt from North Carolina G.S. 160A-417:

“(Effective April 1, 2013) No permit shall be issued pursuant to subdivision (1) of subsection (a) of this section where the cost of the work is thirty thousand dollars (\$30,000) or more, other than for improvements to an existing single-family residential dwelling unit as defined in G.S. 87-15.5(7) that the applicant uses as a residence, unless the name, physical and mailing address, telephone number, facsimile number, and electronic mail address of the lien agent designated by the owner pursuant to G.S. 44A-11.1(a) is conspicuously set forth in the permit or in an attachment thereto. The building permit may contain the lien agent's electronic mail address. The lien agent information for each permit issued pursuant to this subsection shall be maintained by the inspection department in the same manner and in the same location in which it maintains its record of building permits issued.”

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 632290

Filed on: 04/07/2017

Initially filed by: j buckwalter

Designated Lien Agent

First American 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>)

Project Property

Oakmont Lot 187 Harnett County
NC

Property Type

1-2 Family Dwelling

Date of First Furnishing

04/21/2017

Owner Information

McKee Homes, LLC

109 Hay Street

Suite 301

Fayetteville, NC 28301

United States

Email: krivera@mckeehomesnc.com

Phone: 910-475-7100

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