

Initial Application Date: 2/28/17

Application # 1750040843
CU# _____

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION
Central Permitting 108 E. Front Street, Lillington, NC 27548 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits

Owner: Oakmont 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
City: 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

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

PROPERTY LOCATION: Subdivision: Oakmont Lot #: 188 Lot Size: 0.52 acre

State Road # 224 State Road Name: Heatherwood Dr. Map Book & Page: 2016, 47

Parcel: 03958401 1021 21 PIN: 0507-44-4104.000

Zoning: RFP20 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 363'x415') # Bedrooms: 3 # 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:

Front Minimum _____ Actual 100'
Rear _____ 67.28'
Closest Side _____ 28'
Sidestreet/corner lot _____
Nearest Building on same lot _____ N/A

Comments: _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:

Dogs Rd. to Executive Dr. to Heatherwood Dr.

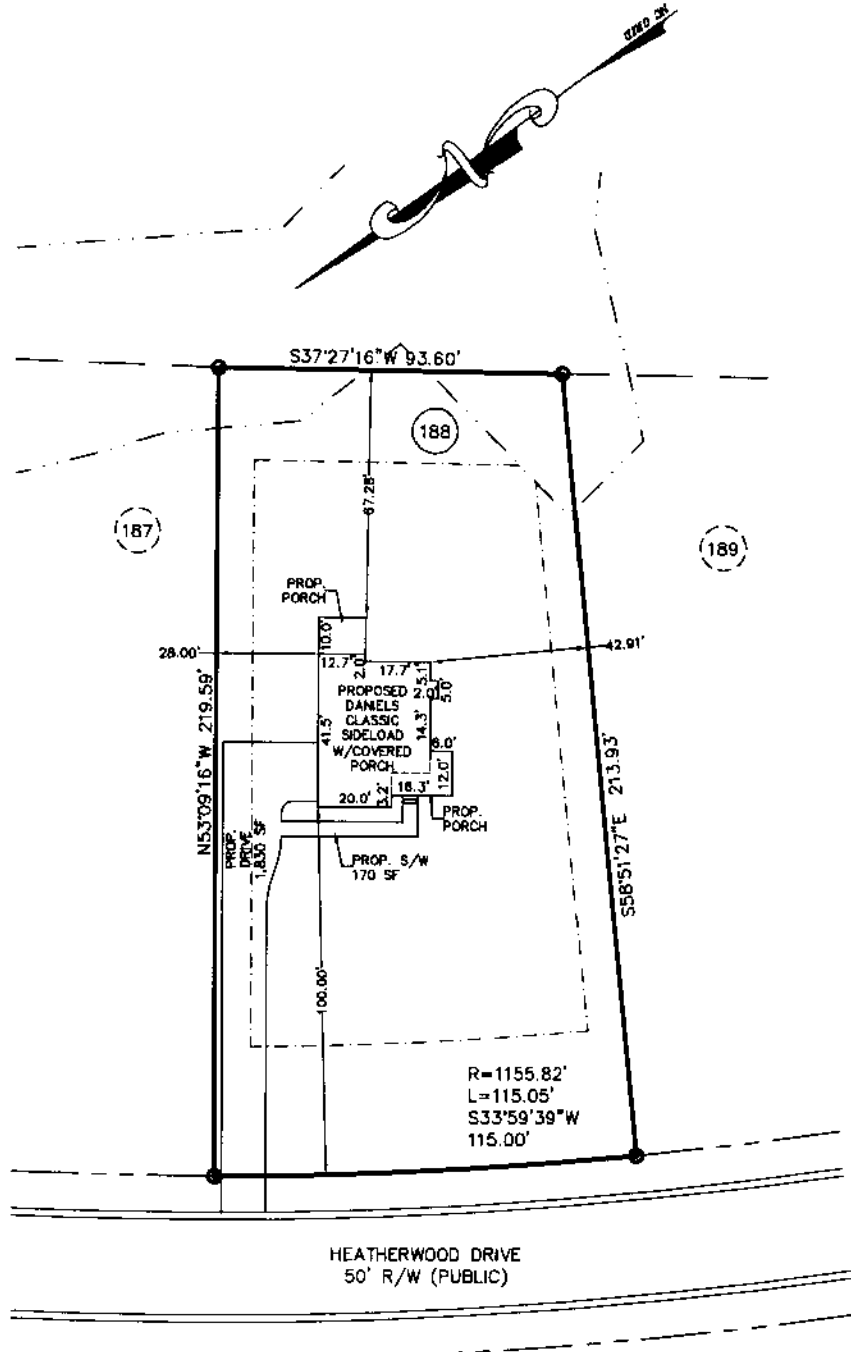
If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted. I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information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

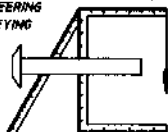
Sanitarian Supervisor
Harnett County Health Dept.

Date _____

Averette Engineering Co., P.A.

Established 1970

CIVIL ENGINEERING
LAND SURVEYING
PLANNING



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

Phone: (910) 488-5656
Fax: (910) 488-0181
License: C-0146

Web: www.averette-eng.com

Michael D. Averette
Michael D. Averette PE-021411
Professional Engineer

FEBRUARY 20, 2017

Date _____

PPLAN132 T

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 plan = 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.

John Parton
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 188

INITIAL SYSTEM: APPROVED 25% REDUCTION

REPAIR APPROVED 25% REDUCTION

DISTRIBUTION: D-Box

DISTRIBUTION D-Box

BENCHMARK: 100.0

LOCATION PT ON LINE 188/189

NO. BEDROOMS: 4

LTAR 0.8 GPD/FT²

LINE FLAG COLOR ELEVATION LENGTH

Initial system

1	P	98.42	50'
2	W	98.25	50'
3	P	97.58	50'
			<u>150'</u>

4	W	96.92	50'
5	P	96.67	50'
6	W	96.67	50'
			<u>150'</u>

BY M. CAHER

DATE 03/2015

TYPICAL PROFILE

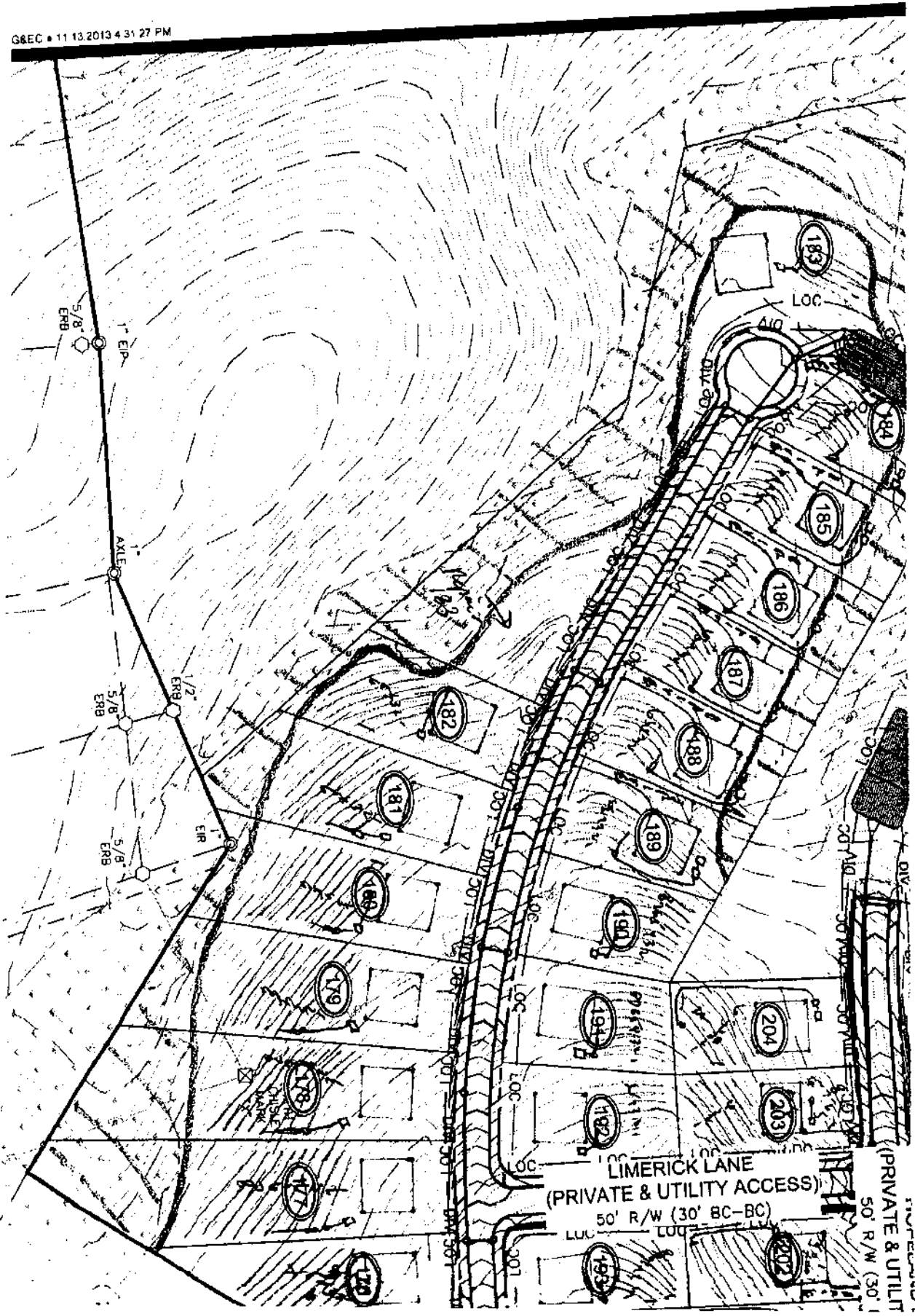
0-48 S/W (VFr, wgs)
1" 2/PA > 48"
INSTALL AT 18-30"

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' BC-BC)

09/09/11

Application # 40843

Harnett County Central Permitting
PO Box 85 Lillington NC 27546
910 893 7525 Fax 910 893 2783 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 McKee Homes, LLC Date _____
Site Address 224 Heatherwood Drive Phone 910-475-7100
Directions to job site from Lillington I 27 to Docs Road, development on the left

Subdivision Oakmont Valley View Lot 188
Description of Proposed Work Single Family Home # of Bedrooms 3
Heated SF 1791 Unheated SF 670 Finished Bonus Room? No Crawl Space _____ Slab X

General Contractor Information

GML Development, Inc
Building Contractor's Company Name 910-475-7100,727 Telephone
109 Hay Street, Ste 301, Fayetteville, NC 28301 krivera@mckeehomesnc.com
Address 63970 Email Address
License # _____

Electrical Contractor Information

Description of Work Single Family Home Service Size 200 Amps T-Pole Yes No
J.M. Pope Electric 919-776-5144 Telephone
409 Chatham St., Sanford, NC 27330 jmpopeelectric@gmail.com
Address 21326-L Email Address
License # _____

Mechanical/HVAC Contractor Information

Description of Work Single Family Homes
Certified Heating & Air 910-858-0000 Telephone
Mechanical Contractor's Company Name P.O. Box 1071, Hope Mills, NC 28348 certifiedheatair@embarqmail.com
Address 20012- H3-1 Email Address
License # _____

Plumbing Contractor Information

Description of Work Single Family Home # Baths 3
Dell Haire Plumbing 910-818-4863 Telephone
Plumbing Contractor's Company Name 7612 Documentary Drive, Fayetteville, NC 28306 dellhaireplumbing@hotmail.com
Address 32886 P1 Email Address
License # _____

Insulation Contractor Information

Cumberland Insulation 910-484-7118 Telephone
Insulation Contractor's Company Name & Address _____

***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.

Yelbey 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/T title Yelbey Rivera Pre-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 #: 632335

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 188 Hargett County NC

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

McKee Homes, LLC
109 Hay Street
Suite 301
Fayetteville, NC 28301
United States
Email: krivera@mckeehomesnc.com
Phone: 910-475-7100

Date of First Furnishing

04/21/2017

[View Comments \(0\)](#)

Technical Support Hotline: (888) 690-7384