Initial Application Date: 15 mark 2017 Application	tion#17-58040948
COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fa	CU#
"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WH	EN SUBMITTING A LAND USE APPLICATION**
LANDOWNER: Brancon Matthew Schoen Mailing Address: 1531 Hill	mon bove Road
City: <u>Cameron</u> State: <u>N.C.</u> zip: <u>28326</u> Contact No: <u>864-275-2844</u>	Email: brandon hamah schoen Romai
APPLICANT*:SAME AS ABOVE Mailing Address:	
City: State: Zip: Contact No:	Email:
*Please fill out applicant information if different than landowner	
CONTACT NAME APPLYING IN OFFICE: Both Petrich Phon	# 814.4435 BPetrich@Ham
PROPERTY LOCATION: Subdivision: Halcyon Hills State Road # 1106 State Road Name: Hillman Grove Road	Lot #: 2 B Lot Size: 2, 8 (
State Road # 1106 State Road Name: Hilmon Grove Road	Map Book & Page: 2017 / 79
Parcel: <u>099564008904</u> PIN: <u>9565-30-6</u>	0215.000
Zoning: RA-20 R Flood Zone: Watershed: Deed Book & Page: 3238 / 855 Pov	wer Company*: Central Electric
*New structures with Progress Energy as service provider need to supply premise number	from Progress Energy.
PROPOSED USE:	
PROPOSED USE: Attached SFD: (Size 45x 52) # Bedrooms: 4 # Baths: 3 Basement(w/wo bath): Garage: 2 Deck:	onolithic
	Crawl Space Slab: Slab:
(le the horse room friehed? / \ \ \ / \ \ / \ \ \ \ \ \ \ \ \	

ius room finished? (___) yes (___) no w/ a closet? (___) yes (___) no (if yes add in with # bedrooms) _)# 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:_____ 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:_ Required Residential Property Line Setbacks: Comments: Minimum 35 Actual 691

Residential Land Use Application

Rear

Closest Side

Sidestreet/corner lot_ Nearest Building _ on same lot

Page 1 of 2

APPLICATION CONTINUES ON BACK

03/11

the Pollar	General turi	. / . / . /	2 0	Springs Fire
les you w	ill see Env	rironmental	Health Sig.	n. It's across
n the ma	ilbox for 15	531 m Hillm	on Grove R	oad.
to are granted Lagrage to a	onform to all ordinances and l	aws of the State of North (Carolina regulating such w	ork and the specifications of plans

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

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 SystemCode 800

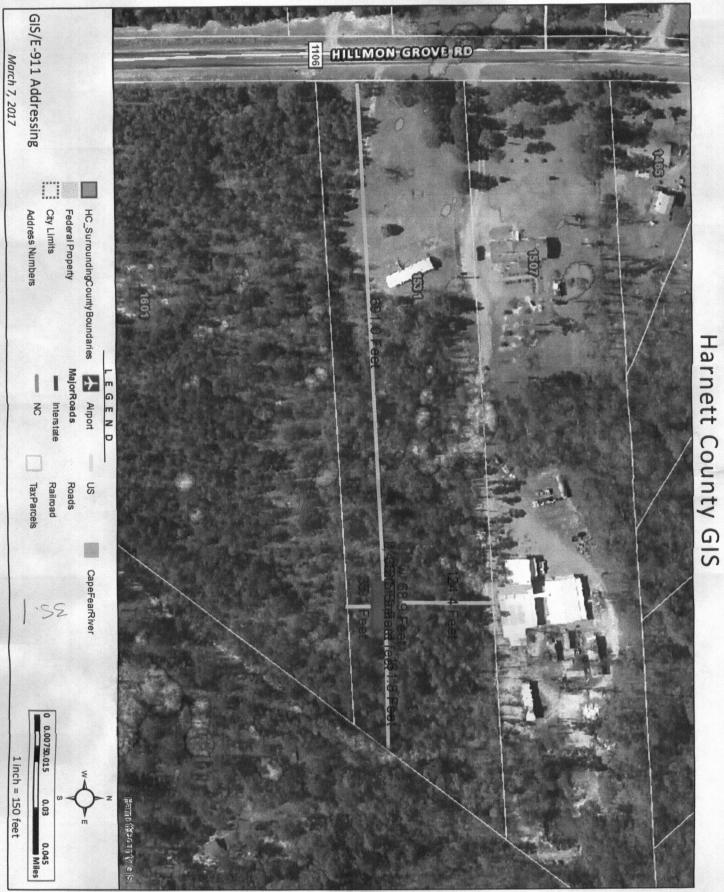
- All property irons must be made visible. Place "pink property flags" on each corner iron of lot. All property lines must be clearly flagged approximately every 50 feet between corners.
- Place "orange house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks, 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

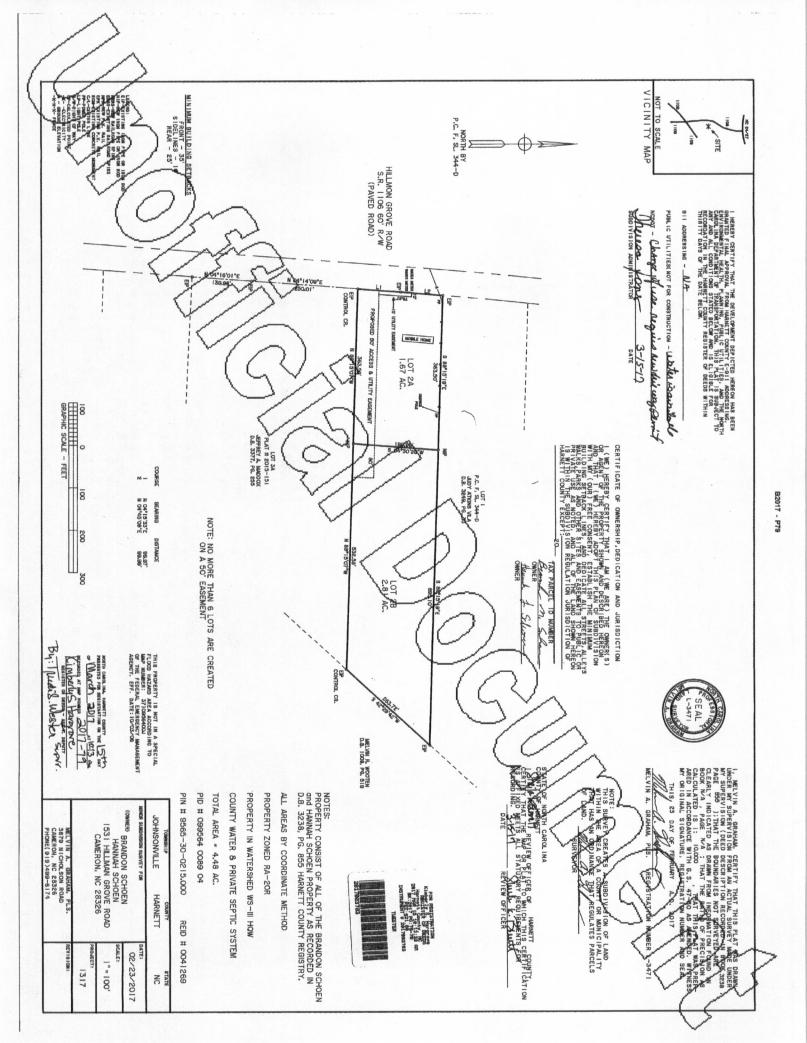
- Follow above instructions for placing flags and card on property.
- Prepare for inspection by removing soil over outlet end of tank as diagram indicates, and lift lid straight up (if possible) and then put lid back in place. (Unless inspection is for a septic tank in a mobile home park)
- DO NOT LEAVE 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

		recording for proof of				
• Use C	lick2Gov	or IVR to hear results	. Once approved, procee	d to Central Permitting for re	maining permits.	
SEPTIC If applying for a	uthorizatio	on to construct please indi	cate desired system type(s):	can be ranked in order of prefere	nce must choose one	
{2} Accepted			$\{ \bot \}$ Conventional	{5} Any	nice, must choose one.	
{ 4} Alternativ						
The applicant shuestion. If the	nall notify answer is	the local health departm "yes", applicant MUST	ent upon submittal of this a	pplication if any of the following DOCUMENTATION:	ng apply to the property in	
_}YES { <u>\</u>	NO	Does the site contain a	ny Jurisdictional Wetlands?			
_}YES {\underline{\une	NO	Do you plan to have an <u>irrigation system</u> now or in the future?				
_}YES { <u>~</u>	NO	Does or will the building contain any drains? Please explain				
)YES {	INO	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?				
_}YES {\u2222	INO	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 Easemen	ts or Right of Ways on this	property?		
_}YES { <u>\(\lambda \)</u>) NO	Does the site contain ar	ny existing water, cable, pho	one or underground electric line	s? existing utility caseme	
		If yes please call No C	uts at 800-632-4949 to loca	te the lines. This is a free service	ce in Front conver of lot:	
Have Read This	s Applicati	on And Certify That The	Information Provided Herei	n Is True, Complete And Correct	. Authorized County And	
				Determine Compliance With Ap	12:200 (18:10) - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
Understand Th	at I Am So	olely Responsible For The	Proper Identification And L	abeling Of All Property Lines An	d Corners And Making	
The Site Accessil	ble So That	A Complete Site Evaluat	tion Can Be Performed.		_ / _	
DODEDTY	222	S M. a	62		15 March 2017	
ROPERTYO	WNERS	OK OWNERS LEGAI	A REPRESENTATIVE SIG	GNATURE (REQUIRED)	DATE	

10/10



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PUBLIC UTILITIES (NOT FOR CONSTRUCTION - WATER SOME DELLE 911 ADDRESSING - NA I HEREBY CERTIFY THAT THE DEVELOPMENT DEPICTED HEREON HAS BEEN GRANTED FINAL APPROVAL FROM HARNETT COUNTY E-911 ADDRESSING, ENVIRONMENTAL HEALTH, PLANNING, PUBLIC UTILITIES, AND THE NORTH CAROLINA DEPARTMENT OF TRANSPORTATION. THIS PLAT IS SUBJECT TO ANY AND ALL CONDITIONS STATED BELOW AND IS ELIGIBLE FOR RECORDATION IN THE HARNETT COUNTY REGISTER OF DEEDS WITHIN THIRITY DAYS OF THE DATE BELOW. SUBDIVISION ADMINISTRATOR recuire hundrid up, permit I (WE) HEREBY CERTIFY THAT I AM (WE ARE) THE OWNER(S) OR AGENT OF THE PROPERTY SHOWN AND DESCRIBED HEREON AND THAT I (WE) HEREBY ADSHOWN AND DESCRIBED HEREON WITH MY (OUR) FREE CONSENT, ESTABLISH THE MINIMUM BUILDING SETBACK LINES, AND DEDICATE ALL STREETS, ALLEYS WALKS, PARKS AND OTHER SITES AND EASEMENTS TO PUBLIC OR PRIVATE USE AS NOTED, AND ALL OF THE LAND SHOWN HEREON IS WITHIN THE SUBDIVISION REGULATION JURISDICTION OF HARNETT COUNTY EXCEPT: CERTIFICATE OF OWNERSHIP, DEDICATION AND JURISDICTION

DISTRICT PA 202 USE SITE P AN APPROVAL BEDROOM



UNDER MY SUPERVISION FROM AN ACTUAL S MY SUPERVISION (DEED DESCRIPTION RECO PAGE 855); THAT THE BOUNDARIES NOT S CLEARLY INDICATED AS DRAWN FROM INFOR BOOK N/A , PAGE N/A ; THAT THE RATIO CALCULATED IS : 10,000 , THAT TH CALCULATED IS 1: 10,000 , THAT TH ARED IN ACCORDANCE WITH G.S. 47-30 AS MY ORIGINAL SIGNATURE, REGISTRATION N

MELVIN A. GRAHAM, PLS. REGISTRATION

THIS, 23 DAY OF FEBRUARY

A. D. 20

NOTE:
THIS SURVEY CREATES A SUBDIVISIC
WITHIN THE AREA OF A COUNTY OR A
THAT HAS AN ORDINANCE THAT REGUL

SURVEYOR

STATE OF NORTH CAROLINA THAT THE IXED METS REVIEW OFFICER OF ICH

Brann OWNER

AX PARCEL

ID NUMBER

3,61,91,88 1.55 MELVIN R. WOOTEN D.B. 1008, PG. 519 EP FOR REGISTE
Kimberly S.
REGISTER
Harnett Cou
2017 MAR 15 1
2017 PG
BK 72017 PG
FEE: \$21
INSTRUMENT #

PROPERTY CONSIST OF ALL OF TH NOTES:

and HANNAH SCHOEN PROPERTY L D.B. 3238, PG. 855 HARNETT COL ALL AREAS BY COORDINATE METH

OVE ROAD 60' R/W ROAD)

PROPOSED 50' ACCESS & UTILITY EASEMENT

80

もあ

LOT 2B

695, 10

WATER METER

MOBILE HOME

LOT 1.67

AC.

199,99°

EP

88°15'19"E 363,50

NIP

JUDY ATKINS VILA D.B. 3249, PG. 33 P.C. F, SL. 344-D LOT I

EP

-10' UTILITY EASEMENT

N 04°14'09"E 250.01

CONTROL CR.

N 88° 15'07"W

NIP

N 88°15'07"W

CONTROL CR

Application # 17 500 40 9 4 8

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 BRANDON Schoen	Date				
Site Address Hill Mon Grove Rd	Phone				
Directions to job site from Lillington Highway 27 WES	TO Johnsonville				
Right on Highway 24+27 WES-	to Left on Hillmon				
GROVE ROAD					
Subdivision MA HALCYON Hill	5 Lot <u>28</u>				
Description of Proposed Work NEW SWGLE FAMILY					
Heated SF 2168 Unheated SF 446 Finished Bonus Room? N	A Crawl Space Slab				
General Contractor Information	910-170-0000				
Ked Door Homes	910 - 672 - 8900 Telephone				
Hooz Fovetter le Road, Ractord 38376	Craig @ reddoor homes Mc. Con				
	Email Address				
699 45	Email 764/655				
License #					
Floatrian Contractor Information	CAN Amora T Data V Yes No.				
Description of Work Elect Ral Service Size	Amps 1-Pole V resNo				
SANDY RIDGE ELECTRIC	910-323-42458 Telephone				
Electrical Contractor's Company Name	releprione				
454 Whitehead, Fayetteville	Email Address				
Address 08700-L	Email Address				
License #					
Mechanical/HVAC Contractor Inform	ation				
Description of Work HVAC					
Carolina COMFORT AIR	(919 339 2374				
Machanical Contractor's Company Name	Telephone				
5212 US Hwy 70 Bus W, Clayton	MARIE & Caroling COMFORTAN				
Address	Email Address				
29077 H3-1					
License #					
Plumbing Contractor Information					
Description of Work Plum Bing	_# Baths				
VANCE Johnson Plumbing	910 424-6712				
Plumbing Contractor's Company Name	Telephone				
3242 Mid Pine Drive Fayetterly					
Address	Email Address				
07756 P I					
Insulation Contractor Information					
CUAR ELLAND INSULation	[910] 4847118				
Insulation Contractor's Company Name & Address	Telephone				
HIDGIGGO OF COLLEGE OF					

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 FEE\$ - 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 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

Sign w/Title

I hereby certify that I have the authority to make necessary application, that the application is correct

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 657681

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 (madto support

Owner Information

Brandon Schoen
1531 Hillmon Grove Road
Cameron, NC 28326
United States
Email: brandonhannahschoen@gmail.com
Phone: 864-275-2844

Project Property

06-726 Schoen, B PIN 9565-30-0215.000 Parcel # 099564 0089 04 Lot # 2 Halcyon Hills 1531 Hillmon Grove Road Cameron, NC 28326 Harnett County

Property Type

1-2 Family Dwelling

Date of First Furnishing

06/06/2017

Print & Post

Initially filed by: Reddoorhomes4002

Filed on: 05/23/2017



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