Initial Application Date: 3/21/17

Application # 175004097	۶
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COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

108 E. Front Street, Lillington, NC 27546 Central Permitting

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: Atkins Village, LLC _____ Mailing Address: 1210 Trinity Road, Suite 102 State: NC zip: 27607 Contact No: 919-233-3886 Email: jmoxley@royaloakshomes.com City: Raleigh APPLICANT*: Royal Oaks Building Group Mailing Address: 1210 Trinity Road

City: Raleigh State: NC Zip: 27607 Contact No: 919-233-3886 Email: jmoxley@royaloakshomes.com

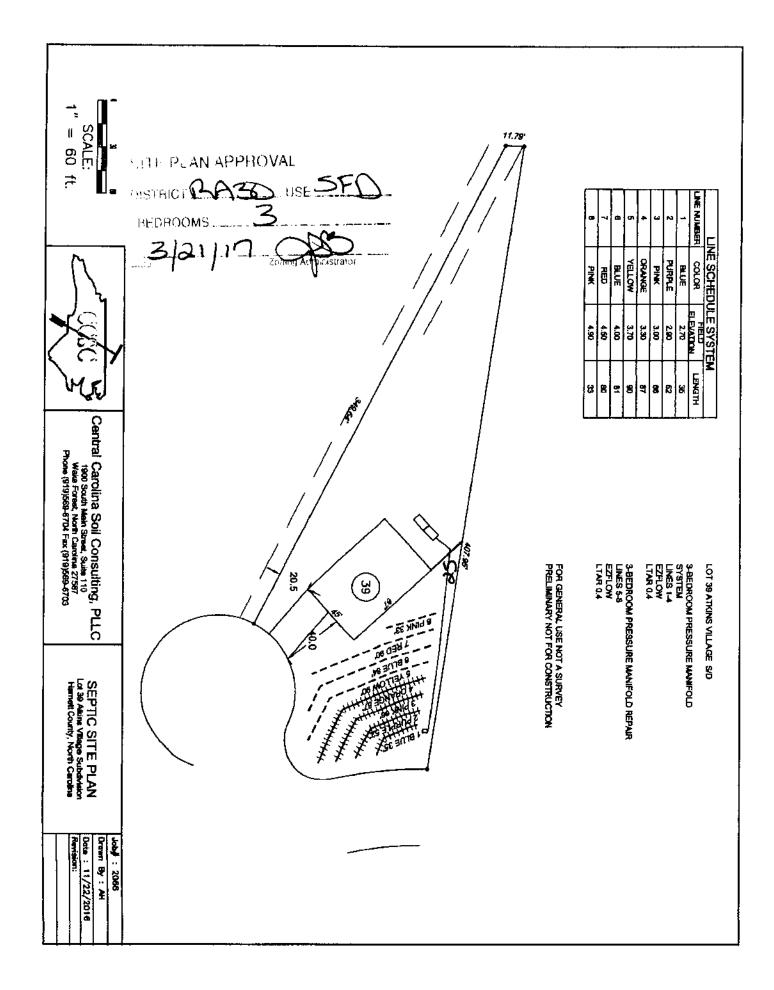
Please fill out applicant information if different than landowner. CONTACT NAME APPLYING IN OFFICE: John Moxley Phone # 919-233-3886 / 321 PROPERTY LOCATION: Subdivision: Atkin's Village ____ State Road Name: Abaco Court. ____ Map Book & Page: 2017 / PIN: 0x64-67-9114.00 Flood Zone: N/A Watershed: N/A Deed Book & Page: 3298 _ / 570 Power Company: South River *New structures with Progress Energy as service provider need to supply premise number _ PROPOSED USE: SFD: (Size 45' x 67') # Bedrooms: # Baths: Basement(w/wo bath): Garage: Deck: Crawl Space: Slab: 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: New Home Manufactured Homes: Other (specify): Required Residential Property Line Setbacks: Comments: 35' Minimum_ Front 25' Rear 10" Closest Side 20' Sidestreet/corner lot Nearest Building

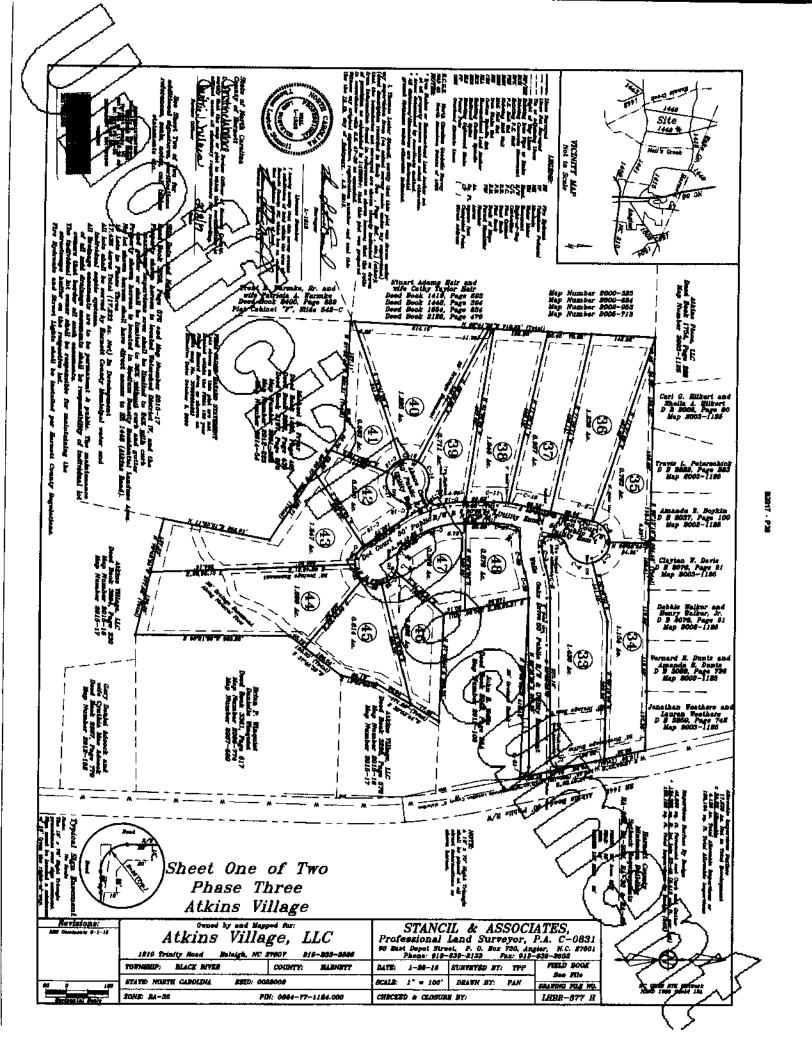
on same lot

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:	North on 401; Right onto Rawls Church Road; Right onto Atkins road
Left onto Wells Oak Drive	
f narraite are exerted (to	
hereby state that foregoing statements are accurate and correct to the	the State of North Carolina regulating such work and the specifications of plans submitted, e best of my knowledge. Permit subject to revocation if false information is provided.
Jehn Morato	3/6/2017
Signature of Owner or Owner's Ag	ent 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.***

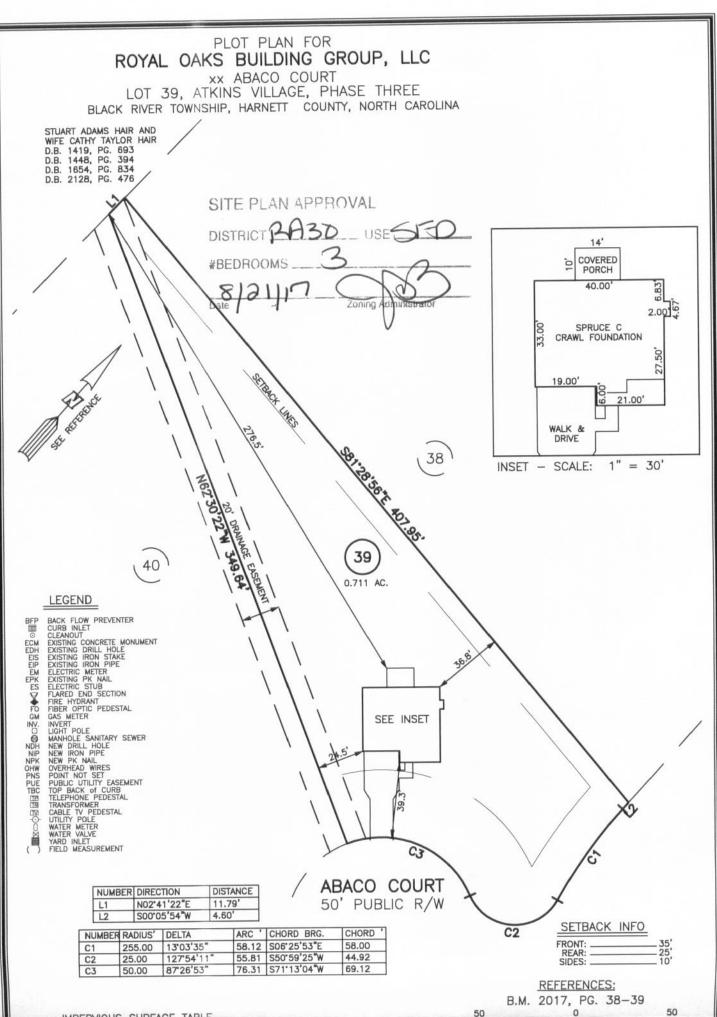
^{**}This application expires 6 months from the initial date if permits have not been issued**





PIN: 0664-67-9114.000 PARGEL: 040664 0020 41

NAME:	ABNO COURT APPLICATION #:_	
County	*This application to be filled out when applying for a septic system inspection.* Health Department Application for Improvement Permit and/or Authorization to Construct	
	n documentation submitted. (Complete site plan = 60 months; Complete plat = without expiration) 893-7525 option 1 CONFIRMATION #	
□ <u>Environ</u>	mental Health New Septic SystemCode 800	
• <u>All p</u>	property from must be made visible. Place "nink property flage" on pach corner is a 4 let 4"	
	The state of Arabit trades approximately every out their between corners	
out b	e "orange house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks, buildings, swimming pools, etc. Place flags per site plan developed at/for Central Permitting.	
* Flace	e Ordrige Environmental Health Card in location that is easily viewed from road to position location and an extension of the continuous section in t	
	sporty is trickly wooded. Environmental meann requires that you door out the undergrowth to allow the any	
0,000	savor to be performed. Inspectors subtito he able to walk treely around site. To not grade assessment	
101 11	ots to be addressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred ailure to uncover outlet lid, mark house corners and property lines, etc. once lot confirmed ready.	
- Vilei	properties proposed site call the voice permitting system at 010-803-7535 aption 4 to cohodula and the cohodula	
200 ((entry selecting notinication permit if milliple permits exist) for Environmental Books increasing Discussion	
• Use (rmation number given at end of recording for proof of request. Click2Gov or IVR to verify results. Once approved, proceed to Central Permitting for permits.	
- Enianchin	nental nealth existing lank inspections Code 800	
• Folio	w above instructions for placing flags and card on property	
 Prepa possi 	are for inspection by removing soil over outlet end of tank as diagram indicates, and lift lid straight up (if	
. 5014	ible) and then put lid back in place. (Unless inspection is for a septic tank in a mobile home park) OT LEAVE LIDS OFF OF SEPTIC TANK	
 After 	uncovering outlet end call the voice permitting system at 910,893,7525 option 1.8 polost patitional and the system at 910,893,7525 option 1.8 polost patitional and the system at 910,893,7525 option 1.8 polost patitional and the system at 910,893,7525 option 1.8 polost patitional and the system at 910,893,7525 option 1.8 polost patitional and the system at 910,893,7525 option 1.8 polost patitional and the system at 910,893,7525 option 1.8 polost patitional and the system at 910,893,7525 option 1.8 polost patitional and the system at 910,893,7525 option 1.8 polost patitional and the system at 910,893,7525 option 1.8 polost patitional and the system at 910,893,7525 option 1.8 polost patition at 1.8 polost	
ir riju	Itiple permits, then use code 800 for Environmental Health inspection. <u>Please note confirmation number</u> at end of recording for proof of request.	
• Use (Click2Gov or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.	
174 TTC		
tr applying for a	authorization to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.	
(} Accepted		
{}} Alternati	THE PROPERTY OF THE PROPERTY O	
The applicant sl question. If the	hall notify the local health department upon submittal of this application if any of the following apply to the property in 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 <u>irrigation system</u> now or in the future?	
YES (_	NO Does or will the building contain any drains? Please explain. TONDATION	
{} YES	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 {_\(\begin{array}{c} \begin{array}{c} arra	NO Is the site subject to approval by any other Public Agency?	
LAYES (_	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	s Application And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And	
State Officials Ar	re Granted Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules.	
I Understand Tha	at 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.		
	(L. W	
PROPERTY O	WNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED) DATE	



IMPERVIOUS SURFACE TABLE

50

Each section below to be filled out by whomever performing work Must be owner or licensed contractor Address company name & phone must match

Harnett County Central Permitting PO Box 65 Lillington NC 27546 910 893 7525 Fax 910 893 2793 www harnett org/permits

Application for Residential Building and Trades Permit

Owners Name Royal Oaks Building Group	Date		
Site Address Phone 919-23			
Directions to job site from Lillington North on 401; Right onto Rawls	Church Road; Right onto Atkins Road		
F: 14 1 F 101			
Night onto Bot of			
Subdivision _Atkins Village	Lot <u>39</u>		
Description of Proposed Work Single Family Home	# of Bedrooms 3		
Heated SF 2213 Unheated SF 1168 Finished Bonus Room? General Contractor Informat			
Royal Oaks Building Group, LLC	919-233-3886		
Building Contractor's Company Name	Telephone		
1210 Trinity Road, Suite 102 Raleigh, NC 27607	amacias@royaloakshomes.com		
Address	Email Address		
49775			
License #			
Electrical Contractor Informa	tion		
Description of WorkElectrical Rough in and Final Service Siz			
Ideal Electric	734-927-7448		
Electrical Contractor's Company Name	Telephone		
PO Box 969 Farmington, MI 48332			
Address	Email Address		
27078U			
License #			
Mechanical/HVAC Contractor Info			
Description of Work Install HVAC and duct system			
Carolina Air Conditioning Company, INC	919-683-2421		
Mechanical Contractor's Company Name	Telephone		
105 International Dr, Morrisville, NC 275			
Address	Email Address		
22084			
License #			
Plumbing Contractor Informa	tion		
Description of Work Plumb single Family home	# Baths_ 2.5		
Barnes Plumbing Inc	919-422-2133		
Plumbing Contractor's Company Name 239 Millwood Ln, Angier, NC 27501	Telephone		
Address	Email Address		
17735			
License #			
Insulation Contractor Informa	<u>stion</u>		
Tatum Insulation II	919-661-0999		
Insulation Contractor's Company Name & Address	Telephone		

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

15 - Avgust - 2017

Date

The und	Affidavit for dersigned applicant being the		ompensation	NCGS 87-14	4
X	General Contractor	Owner	Officer/Age	nt of the Contractor	r or Owner
	by confirm under penalties in the permit	of perjury that the	person(s) firm(s	s) or corporation(s)	performing the work
<u>X</u> +	las three (3) or more emplo	yees and has obta	ained workers o	ompensation insura	ance to cover them
them	las one (1) or more subcon	tractors(s) and has	s obtained worke	ers compensation i	nsurance to cover
	las one (1) or more subcon g themselves	tractors(s) who ha	s their own polic	y of workers comp	ensation insurance
	las no more than two (2) er	nployees and no s	ubcontractors		
Departm to issuar	orking on the project for whent issuing the permit may nce of the permit and at any out the work	require certificates	s of coverage of	worker s compens	ation insurance prior
Compan	ny or Name Royal Oa	ks Building	Group		
Sign w/T	Title ////	Direc	TOR of open	ATIONS Date	15-August-2017

LIEN AGENT INFORMATION

Effective April 1, 2013

In accordance with North Carolina General Assembly Session Law 2012-158, inspections offices 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	Chicago Title Company, LLC			
Mailing address of Agent		19 W. Hargett Street, Suite 507			
		Raleigh, NC 27601			
Physical add	ress of Agent	19 W. Hargett Street, Suite 507			
		Raleigh, NC 27607			
Telephone 888-690-73		Fax 919-489-5231			
Email support@liensnc.com					

This 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 property.

Excerpt from North Carolina G.S. 153A-357:

"(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 #: 708165

Filed on: 08/22/2017 Initially filed by: ROBG

Designated Lien Agent

Chicago Title Company, LLC

Online: www.liensnc.com

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

27601

Phone: 888-690-7384
Fax: 913-489-5231

Project Property

39 AV 18 Abaco Ct

Fuquay Varina, NC 27526

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

Royal Oaks Building Group, LLC 1210 Trinity Rd. suite 102 Raleigh, NC 27607 United States

Email: kbeyer@royaloakshomes.com

Phone: 919-233-3886

View Comments (0)

Technical Support Hotline: (888) 690-7384