Initial Application Date: 3011 10	Application # 150040986
COUNTY OF HARNETT RESIDENTIAL LAND USE A Central Permitting 108 E. Front Street Lillington, NC 27546 Phone, (910) 903 7505 with	CU#
2 Phone: (310) 635-7525 ext:	
**A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQU	
LANDOWNER: Atkins Village, LLC Mailing Address: 1210 Tri City: Raleigh State: NC Zip: 27607 Contact No: 919-233-3886	nity Road, Suite 102
City: State: Zip: Contact No: 919-233-3886	Email: moxley@royaloakshomes.com
APPLICANT*: Royal Oaks Building Group Mailing Address: 1210 Trinity Road	
APPLICANT*: Royal Oaks Building Group Mailing Address: 1210 Trinity Road City: Raleigh State: NC Zip: 27607 Contact No: 919-233-3886 *Please fill out applicant information if different than landowner	Email: imoxley@royaloakshomes.com
CONTACT NAME APPLYING IN OFFICE: John Moxley	_ Phone #
PROPERTY LOCATION: Subdivision:Atkin's Village	Lot # <u>48</u> Lot Size: .62
State Road # State Road Name:Oalls Oak Drive	Man Book & Page: 2017 / 38
Parcel: 040664 0020 5 PIN: 0664-77	-2212.000
Zoning: RA30 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:	
$\mathbf{Z} = \text{SFD: (Size } \frac{45' \times 67'}{x \times 67'} \text{ # Bedrooms: } \frac{4}{x} \text{ # Baths: } \text{Basement(w/wo bath): } \text{Garage: } \mathbf{Z} = \text{Garage: } \mathbf{Z} = \frac{1}{x \times 67} \text{ Garage: } \mathbf{Z} = \frac{1}{x \times 67} G$	Monolithic
(Is the bonus room finished? (✓) yes () no w/ a closet? () yes (▼	Deck: Crawl Space: Slab: Slab: Slab:
Mod: (Sizex) # Bedrooms # Baths Basement (w/wo bath) Garage: (Is the second floor finished? () yes () no Any other site built additional second floor finished? () yes () no Any other site built additional second floor finished? () yes () no Any other site built additional second floor finished? () yes () no Any other site built additional second floor finished? () yes () no Any other site built additional second floor finished? () yes () no Any other site built additional second floor finished?	Site Built Deck:On FrameOff Frame
□ Manufactured Home:SWDWTW (Sizex) # Bedrooms: Garage:_	(site built?) Deck:(site built?)
Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit:	
Home Occupation: # Rooms: Use: Use: Hours of Operation:	#Employees:
Addition/Accessory/Other: (Sizex) Use:	
Water Supply: County Existing Well New Well (# of dwellings using well	Closets in addition? () yes () no
Sewage Supply: New Septic Tank (Complete Checklist) Existing Septic Tank (Complete of	_) *Must have operable water before final
Sewage Supply: New Septic Tank (Complete Checklist) Existing Septic Tank (Complete Does owner of this tract of land, own land that contains a manufactured home within five hundred feet (5)	_) *Must have operable water before final Checklist) County Sewer
Does owner of this tract of land, own land that contains a manufactured home within five hundred feet (5 Does the property contain any easements whether underground or overhead (\checkmark) yes () no	_) * Must have operable water before final Checklist) County Sewer 00') of tract listed above? () yes (✔) no
Does owner of this tract of land, own land that contains a manufactured home within five hundred feet (5	_) * Must have operable water before final Checklist) County Sewer 00') of tract listed above? () yes (✔) no
Does owner of this tract of land, own land that contains a manufactured home within five hundred feet (5 Does the property contain any easements whether underground or overhead (\checkmark) yes () no Structures (existing or proposed): Single family dwellings: <u>New Home</u> Manufactured Homes:) *Must have operable water before final Checklist) County Sewer 00') of tract listed above? () yes (✓) no Other (specify):
Does owner of this tract of land, own land that contains a manufactured home within five hundred feet (5 Does the property contain any easements whether underground or overhead (\checkmark) yes () no Structures (existing or proposed): Single family dwellings: <u>New Home</u> <u>Manufactured Homes</u> : <u></u> Required Residential Property Line Setbacks: <u>Comments</u> : <u></u> Eront <u>Minimum</u> 35' <u>Actual</u> 27.5) *Must have operable water before final Checklist) County Sewer 00') of tract listed above? () yes (✓) no Other (specify):
Does owner of this tract of land, own land that contains a manufactured home within five hundred feet (5 Does the property contain any easements whether underground or overhead (✓) yes () no Structures (existing or proposed): Single family dwellings: New Home Manufactured Homes:) *Must have operable water before final Checklist) County Sewer 00') of tract listed above? () yes (✓) no Other (specify):
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Does owner of this tract of land, own land that contains a manufactured home within five hundred feet (5 Does the property contain any easements whether underground or overhead (1) yes Structures (existing or proposed): Single family dwellings: New Home Manufactured Homes: Required Residential Property Line Setbacks: Front Minimum 35' Actual Actual 37.5 Rear 25' Olosest Side 10' 30') *Must have operable water before final Checklist) County Sewer 00') of tract listed above? () yes (✓) no Other (specify):

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: North on 401; Right onto Rawls Church Road; Right onto Atkins road Left onto Wells Oak Drive

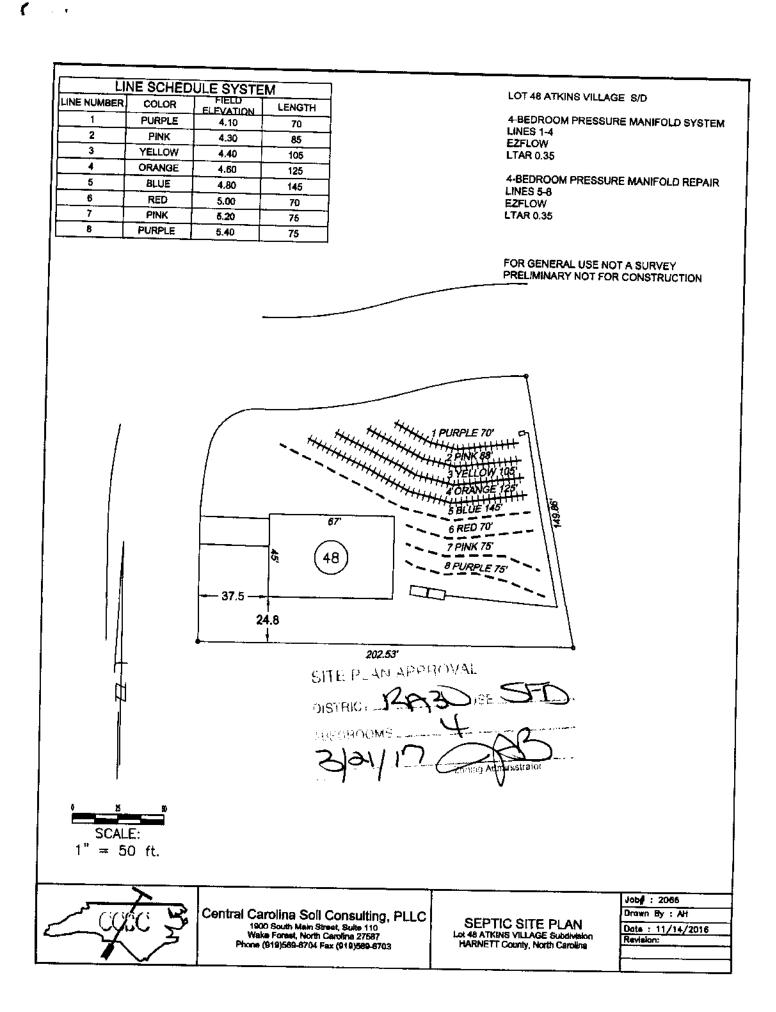
If permits are granted Lagree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted. I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information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

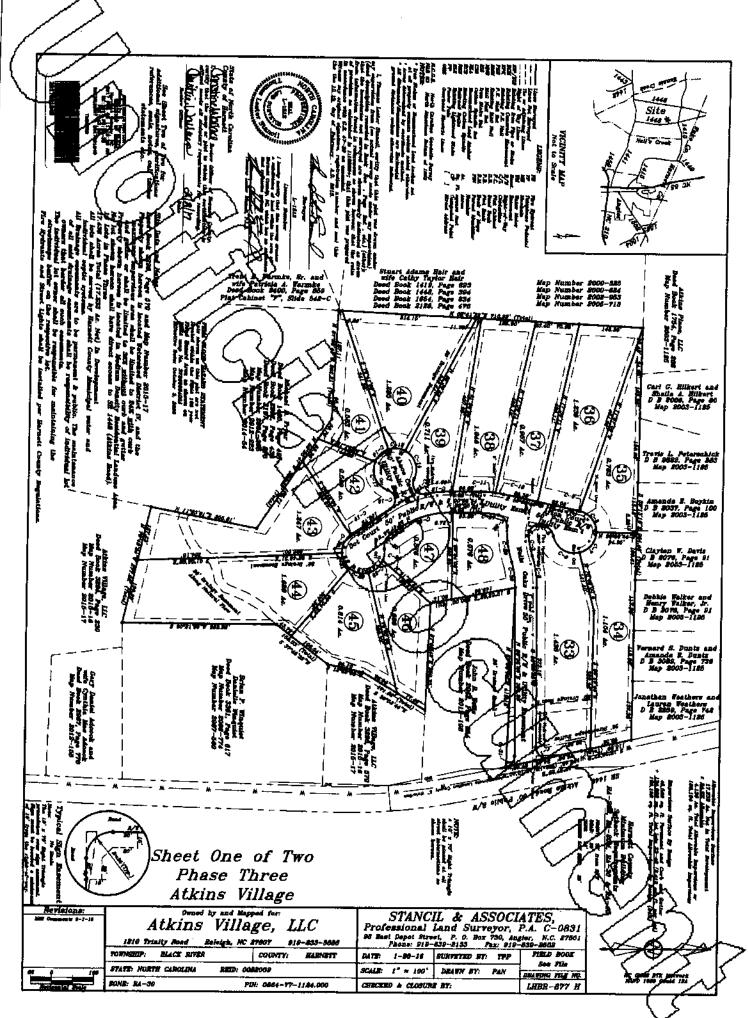
	and the second
- John Mark	3/6/2017
Signature of Owner Growner's	Agent Date

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

e.,





12017 - PM

PIN: 0664-77-2212.000	
PARCEL: 040664 0020 51	

NAME: DCT COURT

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 Ē1
 - 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 D

- 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 IId 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.

{__} Innovative {__} Accepted [_] Conventional {___} Any 1 Other PRESSURE MANIFOLD Alternative

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 <u>irrigation system</u> now or in the future?
{YTES	{} NO	Does or will the building contain any drains? Please explain. Foundation
{}}YES	{ 1 // NO	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
[]YES	{ _∕ } №	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)

2/20/17

Application #

i

	Harnett County Central Perm		
section below to be filled out mever performing work e owner or licensed	PO Box 65 Lillington NC 2754 910 893 7525 Fax 910 893 2793 www.ham		
btor Address company & phone must match	Application for Residential Building an	d Trades Permit	
Owners NameRo	yal Oaks Building Group		Date
Site Address		Phone	<u>919-233-388</u> 6
Directions to job site fr	om Lillington North on 401; Right onto Rawl	s Church Road; Right o	onto Atkins Road
	e Court		
Subdivision _Atkin	s Village	Lot	8
Description of Propose	d Work Single Family Home	# of Be	drooms <u>5</u>
	nheated SF Finished Bonus Room General Contractor Informs	² Crawl Spac	
Royal Oaks Bu	ilding Group, LLC	<u>919-233-38</u>	386
Building Contractor s C	Company Name	Telephone	
	ad, Suite 102 Raleigh, NC 27607		loakshomes.com
Address		Email Address	
49775			
	Electrical Contractor Inform	ation	
Description of Work _E	Electrical Contractor Inform	ize <u>200</u> Amps T-Pe	ole <u>X</u> Yes <u>No</u>
Ideal Electr		734-927-74	148
Electrical Contractor s	Company Name	Telephone	
	armington, MI 48332		
Address		Email Address	
27078U	_		
License #	Mechanical/HVAC Contractor Int	formation	
Description of Work	Install HVAC and duct system		
	Conditioning Co	919-683-	2421
Mechanical Contractor	s Company Name	Telephone	
	ional Dr, Morrisville, NC 27	560	
Address		Email Address	
22084	_		
License #			
	Plumbing Contractor Inform		
 Description of Work Barnes Plumbing, Inc. 	Plumb single Family home	# Baths 919-422-2133	
		Telephone	
Plumbing Contractors 239 Millwood Lane,			
Address		Email Address	;
17735			
License #			
	insulation Contractor Inform		
Tatum Insula		<u>919-661-09</u>	999
Insulation Contractors	Company Name & Address	Telephone	

*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 <u>by signing below I have obtained all subcontractors</u> <u>permission to obtain these permits</u> and if <u>any</u> changes occur including listed contractors site plan number of bedrooms building and trade plans Environmental Health permit changes or proposed use changes 1 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 perfect fee Achedule

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

20-September-2017

Date

Affidavit for Worker's Compensation N C G S 87-14 The undersigned applicant being the
X 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_ Royal Oaks Building Group
Sign w/Title

Details: Appointment of Lien Agent

Entry #: 717777

2760E

Designated Lien Agent

Online: www.hensne.com/ac-

Address: 19 W Hargett St., Sonte 507 - Raleigh, NC

Project Property

Chicago Title Company, LLC

Phone: 888-690-7384

Fax: 913-489-5231

48 AV 21 Dot Ct Fuquay Varina, NC 27526 Harnett County

Property Type

Filed on: 09/08/2017

Initially filed by: ROBG



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, 1.1.C 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