

Initial Application Date: 3/31/17

Application # 1750041178

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

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

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

LANDOWNER: CUMBERLAND HOMES INC Mailing Address: Same as below
City: " State: " Zip: " Contact No: " Email: joannorris1957@yahoo.com

APPLICANT: CUMBERLAND HOMES INC Mailing Address: P.O. Box 727
City: DUNN State: NC Zip: 28335 Contact No: 910 892-4345 Email: "

CONTACT NAME APPLYING IN OFFICE: MICHELLE OR JOAN Phone # 910-892-4345

PROPERTY LOCATION: Subdivision: N/A Lot #: 2 Lot Size: .72
State Road # 1443 State Road Name: LAFAYETTE RD Map Book & Page: 2017, 52
Parcel: 080653 0097 01 PIN: 0653-64-0176-000
Zoning: RA-30 Flood Zone: X Watershed: N/A Deed Book & Page: 3473/320 Power Company*: DUKE

PROPOSED USE:

- SFD: (Size 74 x 48) # Bedrooms: 3 # Baths: 2 1/2 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: 1 Manufactured Homes: Other (specify):

Required Residential Property Line Setbacks:

	Minimum	Actual
Front	<u>35</u>	<u>50</u>
Rear	<u>25</u>	<u>159'7"</u>
Closest Side	<u>10</u>	<u>26</u>
Sidestreet/corner lot	<u>20</u>	<u>N/A</u>
Nearest Building on same lot	<u>N/A</u>	<u>N/A</u>

Comments:

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: TAKE 401 TOWARDS FUQUAY
FROM LILLINGTON TURN RIGHT ONTO LAFAYETTE RD
LOT IS ON (R)

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.

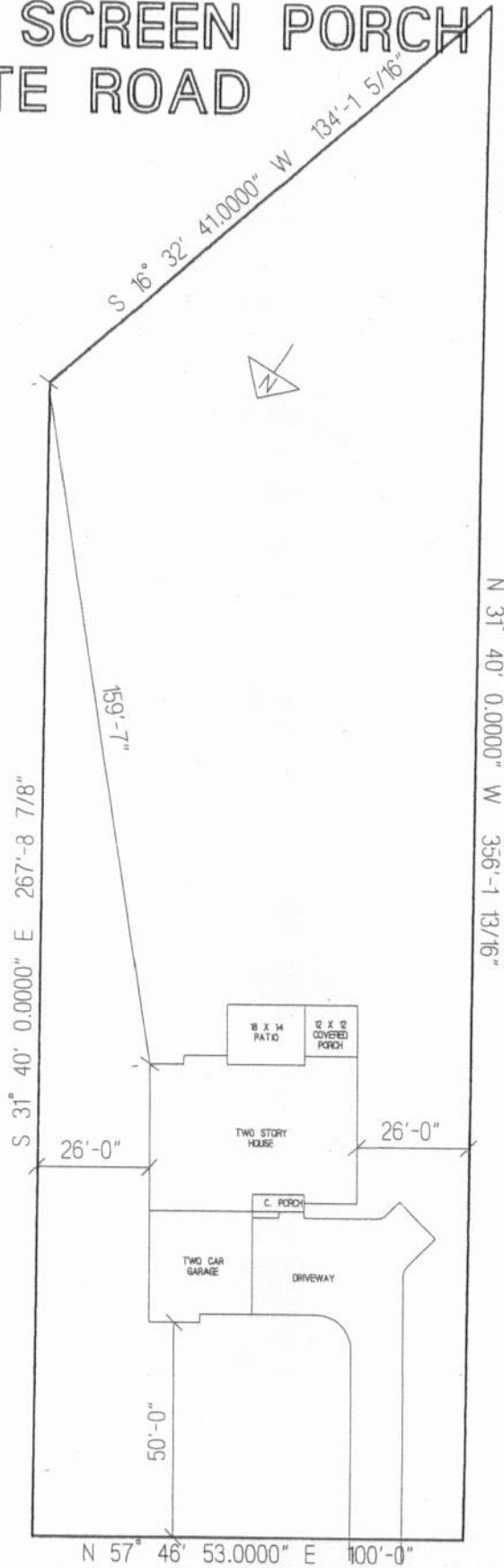
Sea Smith
Signature of Owner or Owner's Agent

3/31/17
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

CUMBERLAND HOMES, INC.
THE AVALON WITH SCREEN PORCH
LOT # 2 LAFAYETTE ROAD
SCALE: 1"=40'



LAFAYETTE ROAD

NAME: AMBERLAND Homes

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 8 00

- **All property irons must be made visible.** Place "pink p roperty 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 over outlet end as diagram indicates, and lift lid straight up (if possible) and then close back down. (Unless inspection is for a septic tank in a mobile home park)
- 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.

Sea Smith

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

3/31/17
DATE

Application # _____

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: CUMBERLAND HOMES, INC Date: 3/31/17
Site Address: LAFAYETTE RD Phone: 910-892-4345
Directions to job site from Lillington: TAKE HWY 401 TOWARDS FURQUAY FROM LILLINGTON TURN (R) ONTO LAFAYETTE RD LOT 15 ON (R)
Subdivision: N/A Lot: 2
Description of Proposed Work: N.S.F. # of Bedrooms: 3
Heated SF: 2 Unheated SF: _____ Finished Bonus Room? YES Crawl Space: _____ Slab:

General Contractor Information

CUMBERLAND HOMES, INC 910-892-4345
Building Contractor's Company Name Telephone
P.O. BOX 727 DUNN, NC 28335 joannorris1957@yahoo.com
Address Email Address
59493
License #

Electrical Contractor Information

Description of Work N.S.F. Service Size: 200 Amps T-Pole: Yes No
WESTER & PACE ELECTRIC 919-499-5389
Electrical Contractor's Company Name Telephone
546 LESLIE DR. SANFORD, NC N/A
Address Email Address
12007-4 28330
License #

Mechanical/HVAC Contractor Information

Description of Work N.S.F.
STEPHENSONS HEATING & AIR INC 919-329-0686
Mechanical Contractor's Company Name Telephone
343 SHIPWASH DR GARNER NC N/A
Address Email Address
18644 27529
License #

Plumbing Contractor Information

Description of Work N.S.F. # Baths 2 1/2
GLOVER CONTRACT PLUMBING 919-868-0959
Plumbing Contractor's Company Name Telephone
304 QUAIL HOLLOW WAY SANFORD, NC N/A
Address Email Address
23160 27332
License #

Insulation Contractor Information

INSULATING INC 5902 FAYETTEVILLE RD 919-772-9000
Insulation Contractor's Company Name & Address Telephone
RALEIGH NC

*NOTE: General Contractor must fill out and sign the second page of this application.

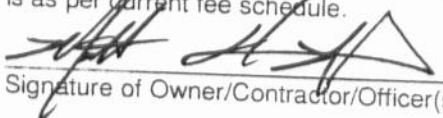
Homeowners Applying to Build Their Own Home

Please answer the following questions then see a Permit Technician to determine if you qualify for permit under Owners Exemption. Questionnaire per G.S. 87-14 Regulations as to Issue of Building Permits (Memo available upon request)

1. Do you own the land on which this building will be constructed? ___ Yes ___ No
2. Have you hired or intend to hire an individual to superintend and manage construction of the project? ___ Yes ___ No
3. Do you intend to directly control & supervise construction activities? ___ Yes ___ No
4. Do you intend to schedule, contract, or directly pay for all phases of construction work to be done? ___ Yes ___ No
5. Do you intend to personally occupy the building for at least 12 consecutive months following completion of construction and do you understand that if you do not do so, it creates the presumption under law that you fraudulently secured the permit? ___ Yes ___ No

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 **I affirm that I have obtained all listed contractors 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  Date 3/28/17

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: CUMBERLAND HOMES, INC
 Sign w/Title: Sean Smith / agent Date: 3/31/17

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 647880

Filed on: 05/05/2017

Initially filed by: cumberlandhomes

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 (<mailto:support@liensnc.com>)

Project Property

Lot # 2 Lafayette Road PIN # 0653-64-0176.000
258 Lafayette Road
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

Cumberland Homes, Inc.
PO Box 727
Dunn, NC 28335
United States
Email: norrisbuildinggroup@yahoo.com
Phone: 910-892-4345

View Comments (0)

Technical Support Hotline: (888) 690-7384

HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

LILLINGTON, NC 27546

For Inspections Call: (910) 893-7525 Fax: (910) 893-2793

Bldg Insp scheduled before 2pm available next business day.

Application Number 17-50041178 Date 5/05/17
Property Address 258 LAFAYETTE RD
PARCEL NUMBER 08-0653- - -0097- -01-
Application type description CP NEW RESIDENTIAL (SFD)
Subdivision Name
Property Zoning RES/AGRI DIST - RA-30

Owner

Contractor

CUMBERLAND HOMES INC
PO BOX 727
DUNN NC 28335

CUMBERLAND HOMES INC
PO BOX 727
DUNN NC 28335
(910) 892-4345

Applicant

CUMBERLAND HOMES INC #2
PO BOX 727
DUNN NC 28335
(910) 892-4345

--- Structure Information 000 000 74X48 3BDR SLAD W/ GARAGE & COV PORCH
Flood Zone FLOOD ZONE X
Other struct info # BEDROOMS 3000000.00
PROPOSED USE SFD
SEPTIC - EXISTING? NEW TANK
WATER SUPPLY COUNTY

Permit BLDG, MECH, ELEC, PLB, INSU PERMIT
Additional desc
Phone Access Code 1189968
Issue Date 5/05/17 Valuation 0
Expiration Date 5/05/18

Special Notes and Comments

T/S: 04/18/2017 04:08 PM JBROCK ----
LAFAYETTE RD
XX
PERMIT INCLUDES BLDG, ELEC, MECH, PLUMB
INSULATION AND LAND USE.
XX
Work must conform and comply with the
STATE BUILDING CODE and all other State
and local laws, ordinances & regulations

HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

LILLINGTON, NC 27546

For Inspections Call: (910) 893-7525 Fax: (910) 893-2793

Bldg Insp scheduled before 2pm available next business day.

Page 2
Date 5/05/17

Application Number 17-50041178
 Property Address 258 LAFAYETTE RD
 PARCEL NUMBER 08-0653- - -0097- -01-
 Application description . . . CP NEW RESIDENTIAL (SFD)
 Subdivision Name
 Property Zoning RES/AGRI DIST - RA-30

Permit BLDG, MECH, ELEC, PLB, INSU PERMIT

Additional desc . . .
 Phone Access Code . . . 1189968

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
10-30	814	A814	ADDRESS CONFIRMATION	_____	___/___/___
10	101	B101	R*BLDG FOOTING / TEMP SVC POLE	_____	___/___/___
20	103	B103	R*BLDG FOUND & TEMP SVC POLE	_____	___/___/___
30-999	111	B111	R*BLDG SLAB INSP/TEMP SVC POLE	_____	___/___/___
30-999	309	P309	R*PLUMB UNDER SLAB	_____	___/___/___
30-999	205	E205	R*ELEC UNDER SLAB	_____	___/___/___
40-50	129	I129	R*INSULATION INSPECTION	_____	___/___/___
40-60	425	R425	FOUR TRADE ROUGH IN	_____	___/___/___
40-60	125	R125	ONE TRADE ROUGH IN	_____	___/___/___
40-60	325	R325	THREE TRADE ROUGH IN	_____	___/___/___
40-60	225	R225	TWO TRADE ROUGH IN	_____	___/___/___
50-60	429	R429	FOUR TRADE FINAL	_____	___/___/___
50-60	131	R131	ONE TRADE FINAL	_____	___/___/___
50-60	329	R329	THREE TRADE FINAL	_____	___/___/___
50-60	229	R229	TWO TRADE FINAL	_____	___/___/___
50-60	209	E209	R*ELEC TEMP POWER CERT	_____	___/___/___
999		H824	ENVIR. OPERATIONS PERMIT	_____	___/___/___

Plan Box # AA1

Date 5/4/17

Job Name Cumberland

App # 41178

Valuation 243072

SQ Feet 2532

Garage 696

= 3228

Inspections for SFD/SFA

Crawl

Slab

Mono

Basement

Footing	Footing	Plum Under Slab	Footing
Foundation	Foundation	Ele. Under Slab	Foundation
Address	Address	Address	Waterproofing
Open Floor	Slab	Mono Slab	Plum Under slab
Rough In	Rough In	Rough In	Address
Insulation	Insulation	Insulation	Slab
Final	Final	Final	Open Floor
			Rough In
			Insulation
			Final

Foundation Survey

Envir. Health

Other

Additions / Other

Footing

Foundation

Slab

Mono

Open Floor

Rough In

Insulation

Final