nitial Application Date:	4	120	Ì

Application #	175004	1300
	CU#	

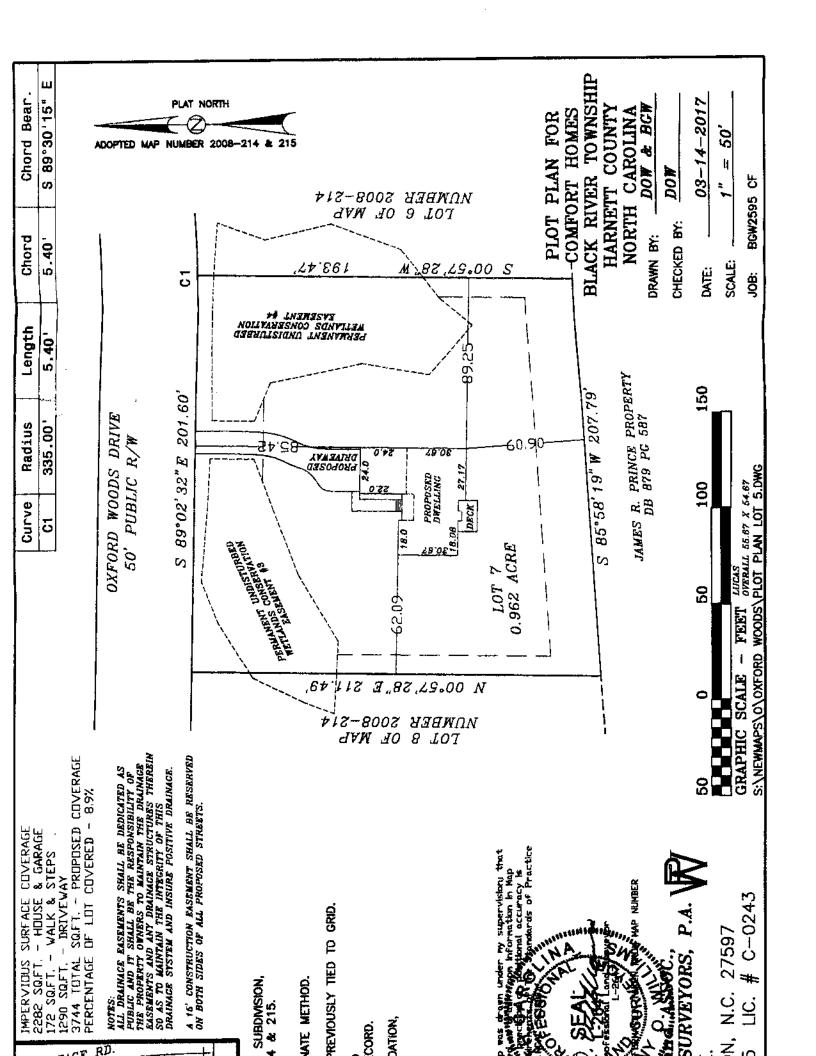
COUNTY OF HARNE Central Permitting 108 E. Front Street, Lillington, NC 2754 "A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO	TT RESIDENTIAL LAND USE APP 6 Phone: (910) 893-7525 ext:2	Fax: (910) 893-2793 usus harnett org/necmit
Q a r	PURCHASE) & SITE PLAN ARE REQUIRE Mailing Address: P O Box 30	
City: Clayton State: NC Zip: 27528	Contact No: 919 553 3242	Email: comfrthomes@aol.com
APPLICANT*: Comfort Homes, Inc. Mailing A	Address: P O Box 369	
City: Clayton State: NC Zip: 27528 *Please fill out applicant information if different than landowner	Contact No: 919 553 3242	Email: comfrthomes@aol.com
CONTACT NAME APPLYING IN OFFICE: Julian Stewart		
PROPERTY LOCATION: Subdivision: Oxford Woods State Road # 1006 State Road Name: Old Stage Ro		Lot #: 7 Lot Size: .962 acre
State Road # Old Stage Ro	ad N	Map Book & Page 000 / 214
Parcel: 040692 0017 17	PIN: 0682-98-3651.000	
Parcel: 040692 0017 17 Zoning: RA-30 Flood Zone: Watershed: IV Dee *New structures with Progress Energy as service provider need to su	d Book & Page 4468 / 353 upply premise number 34384274	Power Company*: Duke Progress Energy from Progress Energy.
PROPOSED USE:		
SFD: (Size 55.67' x 54.67') # Bedrooms: 3 # Baths: 2 Basem (Is the bonus room finished? () yes		
☐ Mod: (Sizex) # Bedrooms # Baths Basem (Is the second floor finished? () yes		
☐ Manufactured Home:SWDWTW (Sizex_) # Bedrooms: Garage:	(site built?) Deck:(site built?)
□ Duplex: (Sizex) No. Buildings:No.	o. Bedrooms Per Unit:	
☐ Home Occupation: # Rooms: Use:	Hours of Operation:	#Employees:
Addition/Accessory/Other: (Sizex) Use:		Closets in addition? () yes () no
Water Supply:	I (# of dwellings using well	_) *Must have operable water before final
Sewage Supply: New Septic Tank (Complete Checklist)		
Does owner of this tract of land, own land that contains a manufacture	ed home within five hundred feet (50	0') of tract listed above? () yes_ (✔) no
Does the property contain any easements whether underground or or	verhead (🗹 yes 👝 no	
Structures (existing or proposed) Single family dwellings: proposed	Manufactured Homes:	Other (specify):
Required Residential Property Line Setbacks: Comme	ents:	
Front Minimum 35' Actual 85'		
25' 60'	· · · · · · · · · · · · · · · · · · ·	
Closest Side 10' 62'		
Sidestreet/corner lot n/a		·
Nearest Building n/a	···	

on same lot

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:	NC 210 N; right on Benson Road; right on Old Stage; subdivision on right
<u> </u>	
AL	
f permits are granted I agree to conform to all ordinances and laws of	f the State of North Carolina regulating such work and the specifications of plans submitted
hereby state that foregoing statements are accurate and correct to the	te best of my knowledge. Permit subject to revocation if false information is provided.
tatte water	3/29/17
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



NAME: Confort Horros, Inc 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 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. If applying for authorization to construct please indicate desired system type(s : can be ranked in order of preference, must choose one. [__] Innovative Conventional {__}} Accepted (") Other {__} 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:

[]1ES	() NO	Does the site contain any Jurisdictional Wetlands? when one
{_}}YES	1 <u>X</u>) NO	Do you plan to have an <u>irrigation system</u> now or in the future?
{_}}YES	1 <u>X</u> 1 NO	Does or will the building contain any drains? Please explain.
{}}YES	$\{\underline{X}\}$ NO	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
()YES	ON K	Is any wastewater going to be generated on the site other than domestic sewage?
{}}YES	ON [X]	Is the site subject to approval by any other Public Agency?
-	() NO	Are there any Eusements or Right of Ways on this property?
()YES	ON (🛂)	Does the site contain any existing water, cable, phone or underground electric lines? - only Street is
		If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service.
I Have Read	This Applica	tion And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And
		d Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules.
		olely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making
		at A Complete Site Evaluation Can Be Performed.
75	THE !	3.29.17
PROPERT	Y OWNERS	OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED) DATE

Comfort Homes, Inc. has an option to purchase Lots 5, 6, 7, and 40 in Oxford Woods Subdivision, recorded in Map Book 2008, Pages 214-215, Harnett County Register of Deeds.

I, Patricia F. Waite, do hereby certify that Julian R. Stewart, President of Comfort Homes, Inc., personally appeared before me this day and acknowledged the due execution of the foregoing instrument.

Witness my hand and Notarial Seal, this 29th day of March 2017.

(Notary Public)

My commission expires 4/2/17.

Juli Mart

Each section below to be filled out by whomever performing work. Must be owner or iccensed contractor. Address company name & phone must match. Harnett County Central Permitting PO Box 65 Lillington NC 27548 910 893 7525 Faix 910 893 2793 www.harnett.org/permits

Application for Residential Building and Trades Permit

a priorie must materi	TIALES FEITH		
Owner & Name County House and	Date 3-29-17		
Site Address 165 Oxford Wards Dr. Angi			
December to the state of the st	Int on Renson Rd.		
right on old stage; subdivision			
3	Or right		
Subdivision DXBAD Woods	Lot		
Description of Proposed Work Construction of Single	Somily home 3		
	Crawl Space Slab		
General Contractor Information	on Space Siab		
Courter Louis Puc	919-553-3243		
Building Contractor's Company Name	Telephone		
Address Sof Carlor N. 30,238	Contet homes @ aol. com		
33184	Email Address		
License #			
Description of Work Service Size	en -		
Summer field Electric			
Electrical Contractor's Company Name	<u>414-475-0599</u> Tetephone		
205 Thousaing Volling Deat Rd	- Graphano		
Address Selma 15C	Email Address		
22635 License #			
Mechanical/HVAC Contractor Information	Tetrop		
Description of Work 2 such in time to the o			
Stechenon Healing & Air	0.0		
Mechanical Contractor's Company Name	19-329-0687		
343 Shipwish Dr. Garner 205	99		
Address	Email Address		
License #			
Plumbing Contractor Information			
Description of Work Buch in 1 trim out	# Baths		
Harris Dunbins	919-934-1379		
Plumbing Contractor's Company Name	Telephone		
155 ROCK Pillar Rd Clayburg			
Address 2752	©Email Address		
License #			
Insulation Contractor Information	on.		
103rum Insulation 510 MAN a clica	~ : ():O () : >OOO		
Insulation Contractor's Company Name & Address Conce Co	Telephone		
275529			

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.

Falle Wate 3.29.17
Signature of Owner/Contracto Officer(s) of Corporation 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 Confirt Hones In
Sign w/Title Lable Waite aust busy Date 3-29-17
\

1317

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 626907

Filed on: 03/28/2017 Initially filed by: ComfortHomes

Designated Lien Agent

WFG National Title Insurance Company

Online: www.liensnc.com map *** toms: com;

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

27601

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

Email: support@liensnc.com/mails/supportglicans/com/

Project Property

Oxford Woods lot 7 165 OXFORD WOODS DRIVE ANGIER, NC 27501

Property Type

Harnett County

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

Comfort Homes, Inc. P O Box 369 Clayton, NC 27528 United States Email comfrthomes@aol.com

Phone: 919-553-3242

View Comments (0)

Technical Support Hotline: (888) 690-7384

l of l

Plan Box #	AAY	Date Job Name	4/20/17 Comfort Hen
App # 4	SED/SEA	Valuation \$154,176	SQ Feet <u> 606</u> Garage <u>584</u> = <u>2190</u>
Crawl	Slab	Mono	Basement
Footing Foundation Address Open Floor Rough In Insulation Final	Footing Foundation Address Slab Rough In Insulation Final	Plum Under Slab Ele. Under Slab Address Mono Slab Rough In Insulation Final	Footing Foundation Waterproofing Plum Under slab Address Slab Open Floor Rough in Insulation Final
Foundation Surve	Y	Envir. Health	Other
Additions / Other Footing Foundation Slab Mono Open Floor Rough In nsulation			