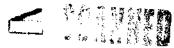
Initial Application Date: 6 26/17



Central Permitting

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext;2 Fax: (910) 893-2793

www.ffarnett.org/permits

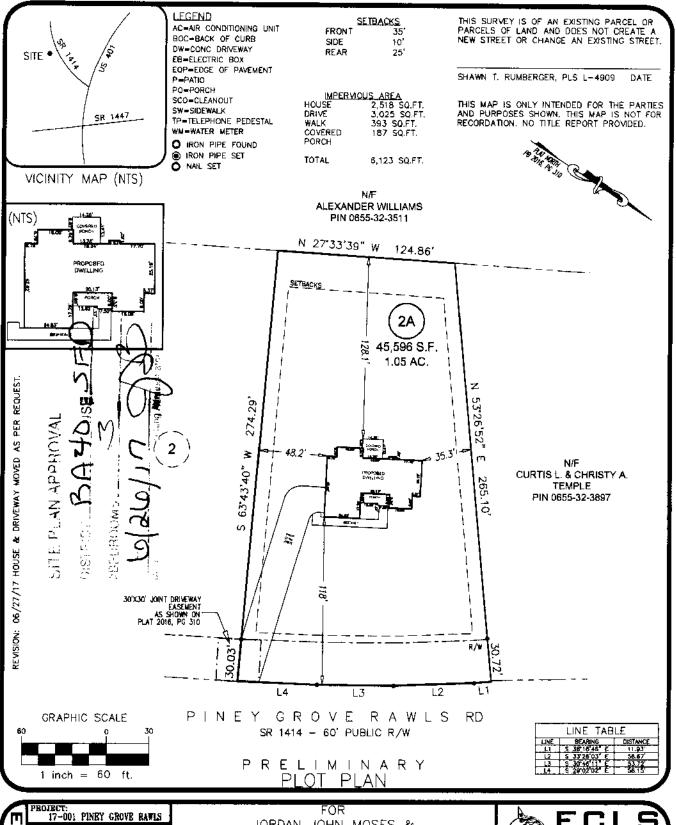
A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION

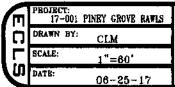
ANDOWNER: 30hm M 7 3rden B 30rdar Mailing Address: 20	3 13/air Dr.
City: Avgic State X Zip 2501 Contact No:	Email:
APPLICANI Southern Touch Homes 4 Mailing Address: PO Box 213	5
City: Angles State: M. Zip: 2750 Contact No: 9/9-524-3 Please fill out applicant information if different than landowner	354 Email: 50 throntor homes 1/2 69 mg. 1
Please fill o d t applicant information if different than landowner	_
CONTACT NAME APPLYING IN OFFICE:	Phone #
PROPERTY LOCATION: Subdivision:	Lot #: 2A Lot Size: 1.05 AC
State Road # 1414 State Road Name: Piney Grove Rou	SIS RM Book & Page 2016 , 310
Parcel: 08 0655 6030 45 PIN: 0655-	32-5710.000
coning RA40 Flood Zone: X Watershed: A Deed Book & Page 3471 / Lou	
New structures with Progress Energy as service provider need to supply premise number	
PROPOSED USE:	Monolithic
SFD: (Size 65'7" x 48-7") # Bedrooms: 3 # Baths: 2 Basement(w/wo bath): Garage: 1/2	
(Is the bonus room finished? () yes (/no_w/ a closet? () yes () no (ii yes aud in with # beurooms)
Mod: (Sizex) # 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 add	ditions? () yes () no
Manufactured Home:SWDWTW (Sizex) # Bedrooms: Garage	· (cite built?) Deck / (cite built?)
Walidaduled Hollie547DN177 (012e	(site built:) Deck(site built:)
Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit:	<u></u>
Home Occupation: # Rooms: Use: Hours of Operation:	#Employees:
Addition/Accessory/Others (Size	Classic in addition 2 () ()
Addition/Accessory/Other: (Sizex) Use:	Closets in addition? () yes () no
ater Supply:CountyExisting Well New Well (# of dwellings using well) *Must have operable water before final
ewage Supply: New Septic Tank (Complete Checklist) Existing Septic Tank (Complete	Checklist) County Sewer
oes owner of this tract of land, own land that contains a manufactured home within five hundred feet ((500') of tract listed above? () yes _() no
oes the property contain any easements whether underground or overhead () yes() no	
tructures (existing or proposed) Single family dwellings: Manufactured Homes:	Other (specify):
OZV.	
<u> </u>	
11.62	
ront Minimum 35 Actual 118	
ront Minimum 35 Actual 11.8 ear 25 128-1	
ront Minimum 35 Actual 118	

•	
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^{***}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 indorrect or missing information that is contained within these applications.***

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





FOR
JORDAN JOHN MOSES &
JORDAN BECKY C
251 PINEY GROVE RAWLS RD
HECTOR'S CREEK TWP., HARNETT CO., NC
P.B. BM2016, PG. 310



APPLICATION #:	
ALL DICALION W.	

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 from 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 fid 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.

SEPTIC If applying for authorization	on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.				
{}} Accepted	{_}} Innovative {_\sumset} Conventional () Any				
{}} Alternative	{}} Other				
	the local health department upon submittal of this application if any of the following apply to the property in "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:				
{_}}YES	Does the site contain any Jurisdictional Wetlands?				
_)YES { NO	Do you plan to have an irrigation system now or in the future?				
{_}}YES {_\underline{NO}	YES { NO Does or will the building contain any drains? Please explain.				
YES /NO	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 10	Are there any Easements or Right of Ways on this property?				
{_}}YES {_KNO	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 Applicat	ion And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And				
State Officials Are Grante	d Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules.				
1 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.					

Plan Box # App #(+ 1		
DD# 4170		Job Name	Leutherr
,	<u> </u>	Valuation 1575376	SQ Feet Garage _ = 3
nspections for s	SFD/SFA Slab	Mono	Basement
ooting oundation ddress oen Floor ough In sulation	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
undation Surve	Fr	ovir. Health	Other

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 John & Becky Jordan	Date
	Phone
Directions to job site from Lillington	
Subdivision	Lot
	# of Bedrooms
Heated SF Unheated SF Finished Bonus Room? General Contractor Informat	Crawl Space Slab
Southern Touch Homes LLC Building Contractor's Company Name	910-639-4672
Building Contractor's Company Name	9/9-639-4672- Telephone
941 Ogkgran church Ro Ania N.C.	<u> </u>
Address	Email Address
78270	
License # Electrical Contractor Informs	tion
Description of Work Service Size	ze 200 Amps T-Pole Yes No
SNO Electine	919-427-6952
Electrical Contractor's Company Name	Telephone
19655 NG 210 Ansig NG 27501	
Address	Email Address
1307-4	
License # Mechanical/HVAC Contractor Info	ormation
Description of Work	
	919-550-7711
Mechanical Contractor's Company Name	9/9-550-77// Telephone
5212 USBUS 70 WEST Claybon Nº	
Address	Email Address
29077	
License #	etion
Plumbing Contractor Informa	_
Description of Work	# Baths 2
Plumbing Contractor's Company Name	910-814-7705 Telephone
Plumbing Contractor's Company Name	Telephone
614 BYRD RD BURNEY NE. 253	Email Address
, 1081.000	
<u>2/6 49</u> License #	
Insulation Contractor Inform	ation
Insulation Contractor's Company Name & Address	<u> 1910-308-3338</u> Telephone
Insulation Confractor's Company Name & Address	i elepnone

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 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 i/ 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

Sign w/Title By John John Mones LLC

Date 7-14-17

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 676759

Filed on: 06/26/2017 Initially filed by: southerntouchhomestic

Designated Lien Agent

Project Property

Investors Title Insurance Company

Outline: www.llenang.com/www/www.com

Address: 19 W. Hargart Sc., Suita 507 / Raleigh,

NC 27601

Phone: RIS-690-7284

Fas: 913-489-5231

Frank: proved (Allenant, com sen en en en ellere sen)

Lot 2A

Piney Grove Rawls rd
Fuquey 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 Lim Agent for this project.

Owner Information

Southern Touch Homes LLC PO Box 2135 Angier, NC 27501 United States

Email: southerntouchhomesle@gmail.com

Phone: 919-524-3354

View Comments (0)

Technical Support Horline: (888) 690-7384

LILLINGTON, NC 27546 For Inspections Call: (910) 893-7525 Fax: (910) 893-2793 Bldg Insp scheduled before 2pm available next business day. ______ Application Number 17-50041708 Date 7/14/17 Property Address 94672 *UNASSIGNED Application type description CP NEW RESIDENTIAL (SFD) Subdivision Name VANNA ROBINSON ESTATE Property Zoning RES/AGRI DIST - RA-40 Owner Contractor ----------JORDAN JOHN M & BECKY C SOUTHERN TOUCH HOMES, LLC PO BOX 2135 203 BLAIR DRIVE ANGIER, NC 27501 ANGIER NC 27501 ANGIER NC 27501 (919) 639-4672 Applicant SOUTHERN TOUCH HOMES PO BOX 2435 ANGIER NC 27501 (919) 524-3354 --- Structure Information 000 000 65.7X48.7 3BDR 2BA CRAWL W/GARAGE & DECK Flood Zone FLOOD ZONE X Other struct info # BEDROOMS PROPOSED USE 3000000.00 SFD SEPTIC - EXISTING? NEW TANK WATER SUPPLY COUNTY Permit BLDG, MECH, ELEC, PLB, INSU PERMIT Additional desc . . Phone Access Code . 1197813 Issue Date 7/14/17 Valuation Expiration Date . . . 7/14/18Special Notes and Comments T/S: 06/26/2017 11:15 AM JBROCK ----401 TO PINEY GROVE RAWLS RD PERMIT INCLUDES BLDG, ELEC, MECH, PLUMB INSULATION AND LAND USE. 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

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 7/14/17 Application Number 17-50041708

Property Address 94672 *UNASSIGNED

Permit BLDG, MECH, ELEC, PLB, INSU PERMIT

Additional desc . .

Phone Access Code . 1197813

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	105	B105	R*OPEN FLOOR		/_/
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		_/_/_