Initial Application Date:	/27/17
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Application #	17-58641745
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COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Central Permitting

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

"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION" LANDOWNER: Comfort Homes, Inc. Mailing Address: P O Box 369 State: NC Zip: 27528 Contact No: 919 553 3242 Email: comfrthomes@aol.com APPLICANT\*: Comfort Homes, Inc. City: Clayton CONTACT NAME APPLYING IN OFFICE: Julian Stewart PROPERTY LOCATION: Subdivision: Oxford Woods State Road Name: Old Stage Road N

PIN: 0682-89-9147.000 \_\_\_\_\_ Map Book & Page: 2017 / 147 Parcel: 040692 0017 51 Zoning: RA-30 Flood Zone: X Watershed: IV 615 Deed Book & Page: 3516 / Power Company\* Duke Progress Energy \*New structures with Progress Energy as service provider need to supply premise number \_\_\_\_\_\_ PROPOSED USE: SFD: (Size 72.5' x 36' ) # Bedrooms: 3 # Baths: 2 Basement(w/wo bath): Garage: V Deck: V Crawl Space: V Slab: 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:\_\_\_\_\_#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 ( \breve{\sigma}) no Does the property contain any easements whether underground or overhead ( v ) yes ( ) no Structures (existing or proposed): Single family dwellings: proposed Manufactured Homes: Other (specify): Required Residential Property Line Setbacks: Comments: Actual 40' **Minimum** Front 25' 1501 Rear 10' 13' Closest Side n/a Sidestreet/corner lot Nearest Building

on same lot

NC 210 N; right 6	on Benson Road; right on Old Sta	ge; subdivision on right
	<del></del>	
	<del> </del>	
	6/27/17	
gent	Date	
	f the State of North (	

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

<sup>\*\*\*</sup>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.\*\*\*

NAME: Confort Homes, Enc. APPLICATION #: 17-500H

\*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

F 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 # 20 012.791

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 <u>undergrowth</u> 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. <u>Please note confirmation number given at end of recording for proof of request.</u>
- 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 fo	r authorizatio	on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.
() Accept		(_) Innovative {_} Conventional {_} Any
{}} Alterna	ative	{} Other
The applicant question. If the	shall notify he answer is	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 {	} NO	Does the site contain any Jurisdictional Wetlands?
(_)YES (	X) NO	Do you plan to have an <u>irrigation system</u> now or in the future?
{}}YES {	$\overline{\chi}$ ) no	Does or will the building contain any drains? Plet se explain.
	X <sub>I NO</sub>	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
	X) NO	Is any wastewater going to be generated on the site other than domestic sewage?
{\_}YES {\.	. /	Is the site subject to approval by any other Public Agency?
	_} NO	Are there any Easements or Right of Ways on this property?
{\(\frac{1}{2}\)}YES {\(\frac{1}{2}\)}	<b>₹</b> 1 NO	Does the site contain any existing water, cable, phone or underground electric lines? - only & street ric
		If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service.
I Have Read Th	his Applicatio	on And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And
		Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules.
		ely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making
13	af 6 /r	A Complete Site Evaluation Can Be Performed.
PROPERTY (	OWNERS C	OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)  DATE

Application #

Harnett County Central Permitting PO Box 65 Lillington NC: 27546

910 893 7526 Faix 910 893 2793 www.y.harnett.ixrg/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 Combot Domos Mo	Date 6-27-17
Site Address 36 Clarendon Court	Angier Phone 919-553-3242
Directions to job site from Lillington 100-3100: 5:0	2ht on Benson Rd.
right on Old Stage: Subdivision	on cight
	22.71
Subdivision Dx67d Woods	Lot 32
Description of Proposed Work Construction of Single	family home
Heated SF 1051 Unheated SF 516 Finished Bonus Room?	CO Crawl Space X Slah
Chailetel Counactor Intormati	20_
Building Contractor's Company Name	919-223-3249
	Telephone
Address Soy Clayer M. 37538	Contrthomes @ aol. Con Email Address
33184	Email Address
License #	
Description of Work Service Size	
	Amps T-PoleYesNo
Electrical Contractor's Company Name	<u>919-905-0599</u> Telephone
19 And will assissant 200	repriore
Address Se ma 15C	Email Address
2636	
icense #	
Mechanical/HVAC Contractor Infor	· <del>·············</del>
Description of Work Lough in time to toker	^ ^ -
Mechanical Contractor's Company Name 3	919-329-0181
343 Shipwish Dr. Garner 2005	Telephone
Address	Email Address
18644	Fillen Madicas
License #	
Plumbing Contractor informati	<u>on</u>
Description of Work Buch in I frim out	# Baths
Hup's printow	<u>919-934-1379</u>
Plumbing Contractor's Company Name  255 Rock Pillar Rd Clauber N	Telephone
Address	***
30833	OEmail Address
License #	
Insulation Contractor Information	
1 atum I resolver - 519 Old Drugton	re Rd 919-661-0999
Insulation Contractor's Company Name & Address Garner &C	Telephone
375:39	

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/Contracto Officer(s) of Corporation Date
Affidavit for Worker's Compensation N C G S 87-14 The undersigned applicant being the
General ContractorOwner Officer/Agent of the Contractor or Owner
Do hereby confirm under penalties of penalty that the person(s) rfirm(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 Content Homes In
Sign w/Title Latte Waite and the Date (0-27-17)
V

144

## DO NOT REMOVE!

## Details: Appointment of Lien Agent

Entry #: 678204

Filed on: 06/28/2017

initially filed by: ComfortHomes

Designated Lien Agent

**Project Property** 

WFG National Title Insurance Company

Online: www.liensnc.com/pap-waw.icome.com/

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

27601

Phone: 888-690-7384

Fax: 913-489-5231

Email: support@itensac.com(male.apport@itensc.tom)

Oxford Woods lot 32 36 CLARENDON COURT ANGIER, NC 27501 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

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

