

Initial Application Date: 7/18/17

Application # 17-50041865
CU# _____

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 www.harnett.org/permits

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

LANDOWNER: Farrish Hayes + William Laris Dugan Mailing Address: 1563 Chicora Rd
City: Dunn State: NC Zip: 28334 Contact No: 910-890-9337 Email: Larry@signaturehomebuilders.com

APPLICANT: Signature Home Builders Mailing Address: 1209 N. Main St.
City: Lillington State: NC Zip: 27546 Contact No: 910-985-1136 Email: cshemod.shb@gmail.com
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Chris Shemod Phone # 910-985-1136

PROPERTY LOCATION: Subdivision: _____ Lot #: C Lot Size: 1.25

State Road # _____ State Road Name: Carson Gregory Rd. Map Book & Page: GIS 1

Parcel 070691 0001 0003 PIN: 0691-61-7650.000

Zoning: Coats Flood Zone: X Watershed: GIS Deed Book & Page: 3469 / 586 Power Company*: _____

*New structures with Progress Energy as service provider need to supply premise number 25603587 from Progress Energy.

PROPOSED USE:

SFD: (Size 50 x 50) # Bedrooms 4 # Baths 2.5 Basement (w/wo bath): Garage: Deck: _____ Crawl Space: Slab: Slab: ^{stem wall} Monolithic
(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: 12 SFD Manufactured Homes: _____ Other (specify): _____
1 proposed SFD


Required Residential Property Line Setbacks:

	Minimum	Actual
Front	<u>35'</u>	<u>40'</u>
Rear	<u>25'</u>	<u>25'</u>
Closest Side	<u>10'</u>	<u>50'</u>
Sidestreet/corner lot	<u>20'</u>	<u>—</u>
Nearest Building on same lot	<u>10'</u>	<u>—</u>

Comments: _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: _____

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.

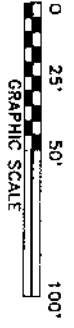
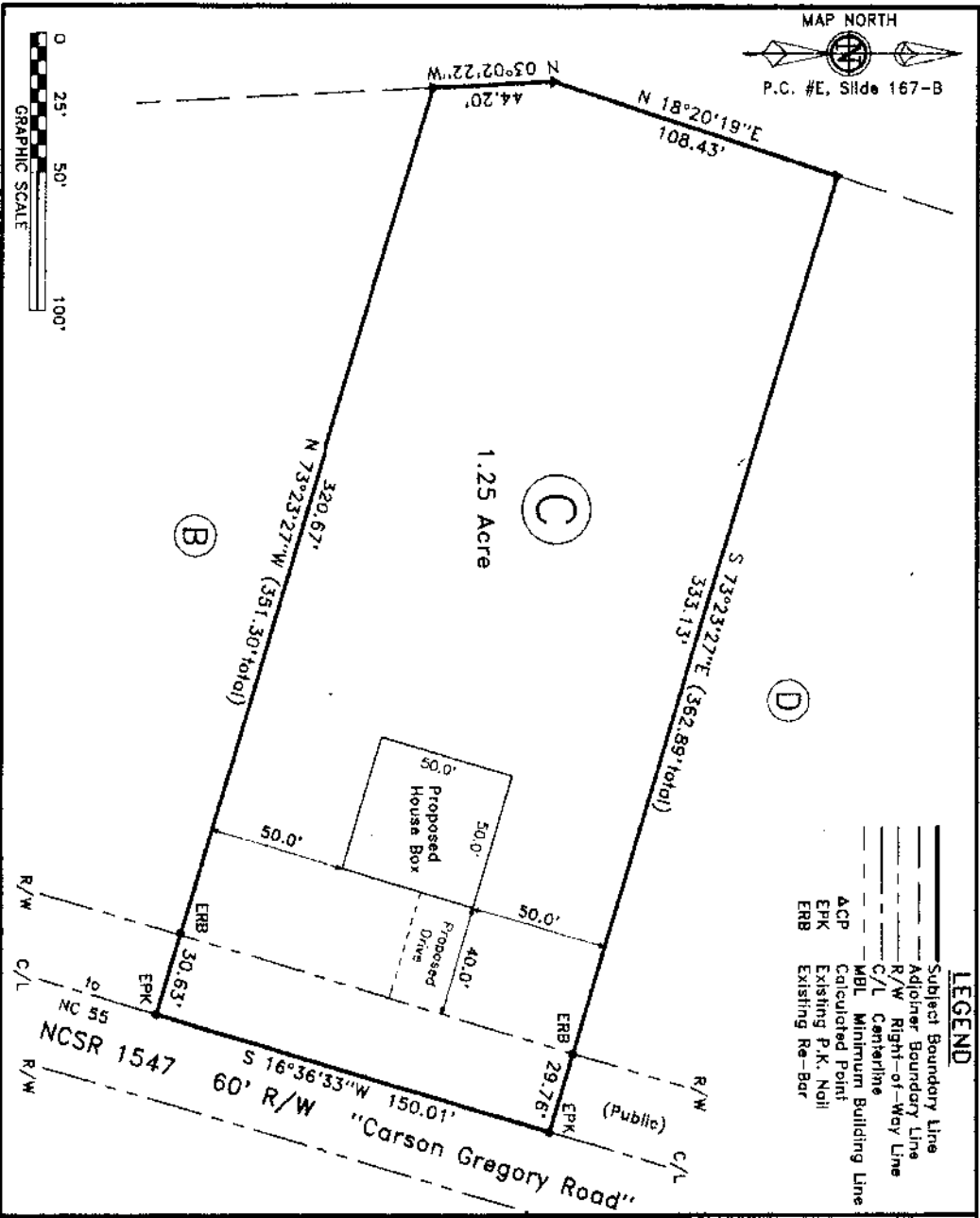


Signature of Owner or Owner's Agent

7-18-17
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****



- LEGEND**
- Subject Boundary Line
 - Adjacent Boundary Line
 - - - R/W Right-of-Way Line
 - · - C/L Centerline
 - · - MBL Minimum Building Line
 - · - ACP Calculated Point
 - · - EPK Existing P.K. Nail
 - · - ERB Existing Re-Bar

VICINITY MAP

Survey For
Parrish Hayes & William Laris Daughtry AND Heather Hayes & John Michael Williams
 Care of: Signature Home Builders

Grove Twp. Harrell Co.

Scale: 1" = 50' Date: 7-12-2017

Surveyed & Mapped By
LAND SURVEYING, Inc.
 870 NC 55 W, Coats, N.C. 27521
 910-897-7715 910-897-7284 (FAX)

I hereby certify that the survey represented herein was actually made under my supervision in accordance with the Standards of Practice for Land Surveying in North Carolina (21 NCAC 56.1600); that the ratio of precision meets Class A standards and there were no encroachments across surveyed property lines unless otherwise shown herein.

NOT FOR RECORDATION

SITE PLAN APPROVAL
 DISTRICT Coats USE SFD

#BEDROOMS 4

28 7/18/17

ADMINISTRATOR



TOWN OF COATS

ZONING PERMIT APPLICATION

NOTE: Attach a site plan that includes property lines (front, side, and rear), location of proposed structures (including driveways, decks, etc.), and existing structures. This plan should be drawn to scale. Also, in order to receive a Privilege License from the Town of Coats to open a business, you must have a valid Zoning Permit, along with all applicable inspections from Harnett County.

Permit No.: 071417-1 Date: 7-14-17 Fee: \$50.00

Parcel ID*: 0691-61-7650.000 Area Zoned As: RA

APPLICANT:

PROPERTY OWNER:

Name (Print) Signature Home Builders

Name Pamish Hayes + William Laris Daughtry

Address 1269 N. Main St

Address 1563 Chicora Rd.

City, State Lillington NC

City, State Dunn NC

Zip Code 27546

Zip Code 28334

Phone # 910-892-9299

Phone # 910-890-9337

Location of Property: IN-TOWN ETJ ETJ (contiguous)

Present Use of Property: _____

PROPOSED USE OF PROPERTY:

Single Family Dwelling: # Rooms: 9 # Bedrooms: 4 Square Feet: 1525
 Multi Family Dwelling: # of Units: _____ #Bedrooms (per unit): _____ Square Feet (per unit) _____
 Mobile Home (single lot): Single wide: _____ Double Wide: _____
 Mobile Home Park: Section 16, Zoning Ordinance must apply
 Business: Total # of employees per day _____ Type of business _____
 Others (specify): _____

Existing structure: Renovate: _____ Addition: _____ Demolish: _____

WATER AND SEWER SUPPLY:

Water: Private Public Proposed Existing
 Sewer: Private Public Proposed Existing

Applicant: I certify that all of the information presented in this application is true, complete, and accurate to the best of my knowledge. False information is grounds for rejection of the application.

Signature: [Signature] Date: 7-13-17

Notes: House Construction

ZONING ADMINISTRATOR USE ONLY

APPROVED

Approved: Denied:

Zoning Administrator: Karen F. Wood TOWN OF COATS ZONING VALID FOR 12 MONTHS 7-14-17

NAME: _____

APPLICATION #: 17-50041865

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 # BP 7/18 023032

- 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.

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.

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

7-19-17
DATE

HARNETT COUNTY CASH RECEIPTS

*** CUSTOMER RECEIPT ***

Oper: BPETRICH Type: CP Drawer: 1
Date: 7/18/17 51 Receipt no: 23685

Year	Number	Amount
2017	58041865	
92941 TECH 4		
LILLINGTON, NC 27546		
B4	BP - ENV HEALTH FEES	\$750.00
NEW FANK		

SIGNATURE HOME BUILDERS, INC

Tender detail		
CK CHECK PAYMEN	12711	\$750.00
Total tendered		\$750.00
Total payment		\$750.00

Trans date: 7/18/17 Time: 16:00:59

** THANK YOU FOR YOUR PAYMENT **