		1	1	
Initial Application Date:_	121	181	17	

Application #	7-50042953

Application #	1 3007,6433				
Ct I#					

Central Permitting

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (91)

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 REQUIR	
LANDOWNER: Watermark Homes, Inc. Proce Develop Mailing Address: 1308 For	t Bragg Road Suite 201 — PC BAX 27
City: Favetteville Surf City State: NC Zip: 28305 28445 No: (910) 483-2229	Email: sharon@watermarkkhomesnc.u
APPLICANT*: Watermark Homes, Inc.  Mailing Address: 1308 Fort Bragg Road  City: Fayetteville State: NC Zip: 28305 Contact No: (910) 483-2229  Please fill out applicant information if different than landowner	- Suite 201
City: Fayetteville State: NC Zip: 28305 Contact No: (910) 483-2229	Email: sharon@watermarkkhomesnc.c
Please fill out applicant information if different than landowner	
CONTACT NAME APPLYING IN OFFICE: Sharon Timothy/ JT	Phone # 910-483-2229 -(JT 910-670-4459)
PROPERTY LOCATION: Subdivision: The Reserve	Lot #: 13 Lot Size: \.35 A
State Road # 1413 State Road Name: Trophy Ridge Polins	Man Book & Bane 2010101
State Road # 1413 State Road Name: Trophy Ridge Polins Parcel: 5 080013 PIN: 00045 4	1-92102 222
71 26 V V V V V V V V V V V V V V V V V V	2 Duke France
Zoning: 2A 36 Flood Zone: X Watershed: No Deed Book & Page: 3323 / 336	Power Company*: Duke Energy Progress
New structures with Progress Energy as service provider need to supply premise number	from Progress Energy.
PROPOSED USE:	
SFD: (Size (x) x bb) # Bedrooms: 4 # Baths: 3 Basement(w/wo bath): Garage:	Deck: Crawl Space: Slab: Monolithic Slab:
(Is the bonus room finished? (♥) yes () no w/ a closet? (♥) yes (_	
Mod: (Sizex) # Bedrooms# Baths Basement (w/wo bath) Garage:  (Is the second floor finished? () yes () no Any other site built add	
—	<b>—</b> ; —
Manufactured Home:SWDWTW (Sizex) # Bedrooms: Garage:	(site built?) Deck:(site built?)
Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit:	
Home Occupation: # Rooms: Use: Hours of Operation:	#Employees:
Addition/Accessory/Other: (Sizex) Use:	Closets in addition? () yes () no
ater Supply: County Existing 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	555 ) St. Wast Hatel above. (
tructures (existing or proposed): Single family dwellings: Manufactured Homes:	Other (specify):
Required Residential Property Line Setbacks: Comments:	
ront Minimum 35 Actual 30	
Rear <u>25</u> <u>317.00</u>	
closest Side 10 21	
Sidestreet/corner lot 20	
	***************************************
Nearest Building	

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:		
······		<del></del> -
		<del></del>
····	11 44	
f permits are granted I agree to conform to all ordinances and laws of the State of North Car hereby state that foregoing statements are accurate and correct to the best of my knowledg	olina regulating such work and the specifications of e. Permit subject to revocation if false information is	plans submitted provided.
15//	12/13/2017	
Signature of Owner or Owner's Agent	Date	

\*\*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.\*\*\*

\*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

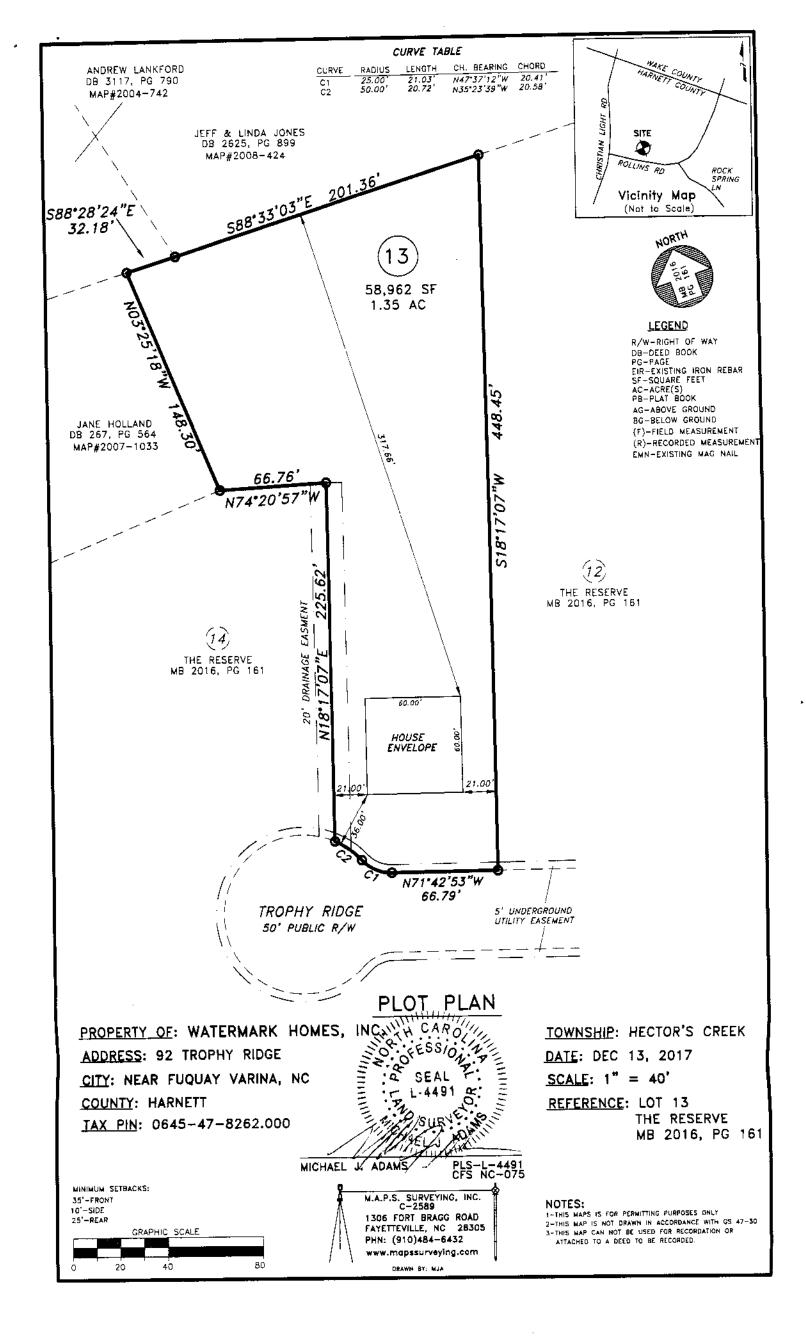
CONFIRMATION # (ACTIVAL)

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. <u>Do not grade property.</u>
- 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 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.

				<del>-</del>	<del>-</del> '
SEPTIC If applying	for authorizat	ion to construct please in	dicate desired system type(s):	can be ranked in order of preference	, must choose one.
{}} Acc		{2} Innovative	{ 1 } Conventional	{ <b>3</b> } Any	
{}} Alte	rnative	{}} Other			
			ment upon submittal of this a attach supporting documenta	application if any of the following attion.	apply to the property in
{}}YES	{ <b>⊻</b> } NO	Does the site contain	any Jurisdictional Wetlands?	•	
{}}YES	{ <b>∠</b> } NO	Do you plan to have a	ın <u>irrigation system</u> now or i	n the future?	
{}}YES	{ <b>∠</b> } NO	Does or will the build	ing contain any <u>drains</u> ? Plea	se explain.	
{}}YES	{ <b>∠</b> } NO	Are there any existing	wells, springs, waterlines o	r Wastewater Systems on this prope	erty?
{}}YES	{ <b>∠</b> } NO	Is any wastewater goi	ng to be generated on the sit	e other than domestic sewage?	
{_}}YES	{ <b>⊬</b> } NO	Is the site subject to a	pproval by any other Public	Agency?	
{ <b>∠</b> }YES	{}} NO	Are there any easeme	nts or Right of Ways on this	property? Ogget was the majority .	e.
{ <b>∠</b> }YES	{}} NO	Does the site contain a	any existing water, cable, ph	one or underground electric lines?	
		If yes please call No	Cuts at 800-632-4949 to loca	ate the lines. This is a free service.	
I Have Rea	d This Applica	tion And Certify That Th	e Information Provided Here	in Is True, Complete And Correct.	Authorized County And
State Offici	als Are Grante	d Right Of Entry To Cor	duct Necessary Inspections T	o Determine Compliance With Appl	icable Laws And Rules.
l Understar	d That I Am !	Solely Responsible For Th	e Proper Identification And I	abeling Of All Property Lines And (	Corners And Making
The Site Ac	cessible So Th	at A Complete Site Evalu	ation Can Be Performed.		
	The				12 13/17
PROPER 1	TÝ OWNER!	OR OWNERS LEGA	L REPRESENTATIVE SI	GNATURE (REQUIRED)	DATE

E-Health Checklist



Application # 17-5-4295

Harnett County Central Permitting
PO Box 65 Lillington NC 27546
Porforming work

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 Vvatermark Homes, Inc.	Date 1/26/18
Site Address 92 Trophy Ridge Drive	Phone 910-483-2229
Directions to job site from Lillington	
From 401, Left onto W Cornelius Harnett Blvd, Left onto Piney Grove onto Rolands Rd., Destination is on Right Side.	Rawls rd., Left onto Wagstaff Rd., Left
Subdivision The Reserve	Lot <u>13</u>
Description of Proposed Work Single Family	# of Bedrooms 3
Heated SF 2,541 Unheated SF 1173 Finished Bonus Room?  General Contractor Information	
Watermark Homes, Inc.	910-483-2229
Building Contractor's Company Name	Telephone
1308 Fort Bragg Road - Suite 201 Fayetteville, NC 28305	sharon@watermarkkhomesnc.cc
Address	Émail Address
49261BLD-U	
License #	
Description of Work Electical Service Service Service Service	<u>ion</u> eAmps T-PoleYesNo
Sandy Ridge Electric Electrical Contractor's Company Name	910-323-2458 Telephone
· · ·	•
454 Whitehead Road, Fayetteville, NC 28305 Address	diane@sandyridgeelectric.com Email Address
	Liliaii Addiess
L08700 License #	
Mechanical/HVAC Contractor Info	rmation
Description of Work HVAC Heating and Air System	
Stephenson Heating and Air Inc.	919-329-0686
Mechanical Contractor's Company Name	Telephone
343 Shipwash Drive Garner, NC 27520	stephensonhvac@aol.com
Address	Email Address
18644	
License #	
Plumbing Contractor Informat	<u>tion</u>
Description of Work Plumbing	# Baths 2 1/2
Chris Holloway Plumbing	910-624-2670
Plumbing Contractor's Company Name	Telephone
737 Old NC 20 St Pauls, NC 28384	chrisholloway@nc.rr.com
Address	Email Address
28541	
License #	
Insulation Contractor Information	<u>tion</u>
Cumberland Insulation- 4205 Clington Rd. Fayetteville NC, 28312	910-484-7118
Insulation Contractor's Company Name & Address	Telephone

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 <u>by signing below I have obtained atl subcontractors permission to obtain these permits</u> and if <u>any</u> 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.

is as	per current tee schedule	_		
	7/		01/25/2018	
Sign	ature of Owner/Contractor/Off	icer(s) of Corpora	ation Date	
The	Affidavit ( undersigned applicant being t		Compensation N C G S 87-14	
<u>x</u>	General Contractor	Owner	Officer/Agent of the Contractor or Owner	
	ereby confirm under penalties orth in the permit	s of perjury that the	e person(s) firm(s) or corporation(s) performing the wor	гk
	_ Has three (3) or more empl	oyees and has ob	otained workers compensation insurance to cover them	
them		ntractors(s) and h	as obtained workers compensation insurance to cover	
	Has one (1) or more subcorring themselves	ntractors(s) who h	has their own policy of workers compensation insurance	<del>)</del>
	_ Has no more than two (2) e	mployees and no	subcontractors	
Depa to iss	artment issuing the permit ma	y require certificat	sought it is understood that the Central Permitting tes of coverage of worker's compensation insurance propermitted work from any person, firm or corporation	OF
Com	pany or Name Watermark Ho	omes, Inc.		
Sign	w/Title	PAGS	Date 01/26/18	

## DO NOT REMOVE!

# **Details: Appointment of Lien Agent**

Entru #: 790347

Filed on: 01/29/2018 Initially filed by: watermarkhomes1308

### **Designated Lien Agent**

First American Title Insurance Company

Online: www.liensne.com

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

27601

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

### **Project Property**

Reserve Lot 13 Tax Pin: 0645-47-8262 92 Trophy Ridge Drive Fuguay Varina, NC 27526 Harnett County County

1-2 Family Dwelling

### Property Type

### Owner Information

### Date of First Furnishing

02/02/2018

Watermark Homes Inc. 1308 FORT BRAGG RD STE 201 FAYETTEVILLE, NC 28305 United States

Email: sharon@watermarkhomesnc.com

Phone: 910-483-2229

View Comments (0)

Technical Support Hotline: (888) 690-7384

### Print & Post



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.