

Initial Application Date: 1/2/18

Application # 1850043017
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: Wade Journey Homes Mailing Address: 3300 Battleground Ave Ste 230
City: Greensboro State: NC Zip: 27410 Contact No: 910-925-8254 Email: Trabitz@wadejourneyhomes.com

APPLICANT: Tara Rabitz Mailing Address: 1016 E. Shoppes at Midway Rd
City: Knightsdale State: NC Zip: 27545 Contact No: SAME Email: _____
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: _____ Phone # _____

PROPERTY LOCATION: Subdivision: Meadows at Bulls Creek Lot # 144 Lot Size: 0.15

State Road # 98 State Road Name: Alvan Ht. Map Book & Page: 2007/094

Parcel: 1101801000 TA PIN: 0680252736000

Zoning: R3D Flood Zone: N Watershed: OK Deed Book & Page: 3535/1000 Power Company: SOUTH WARE EMC

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

PROPOSED USE:

SFD: (Size 24 x 24) # Bedrooms: 3 # Baths: 2.5 Basement(w/wo bath): N Garage: N Deck: N Crawl Space: _____ Slab: _____ Monolithic 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: _____

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 Check/af) _____ Existing Septic Tank (Complete Check/af) 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: Manufactured Homes: _____ Other (specify): _____

Required Residential Property Line Setbacks:

	Minimum	Actual
Front	<u>15</u>	<u>15</u>
Rear	<u>25</u>	<u>25</u>
Closest Side	<u>10</u>	<u>10</u>
Sidestreet/corner lot	<u>20</u>	<u>20</u>
Nearst Building on same lot	_____	_____

Comments: _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Head W on E. Front toward 1st St.
Take US 421S to LESLIE Campbell AVE in NELLIS CREEK
Continue on LESLIE Campbell to Ann St.

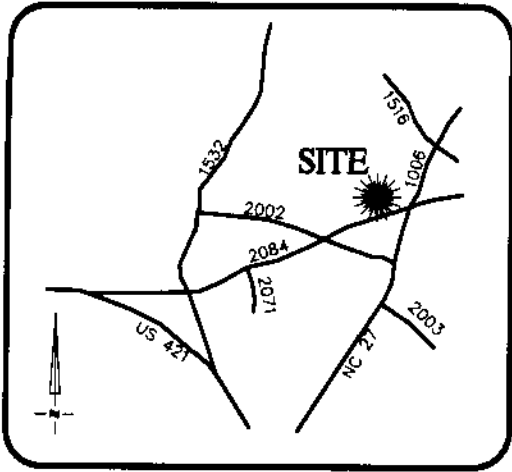
If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted. I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

Tina Rabitz
Signature of Owner or Owner's Agent

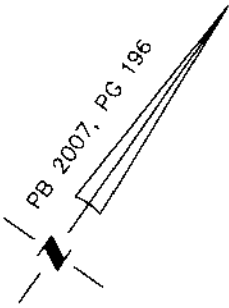
9/18
Date

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



VICINITY MAP
Not To Scale



NOTE:

ALL DIMENSIONS, LOCATIONS AND FEATURES SHOWN ON THIS PLOT PLAN ARE APPROXIMATE AND ARE ONLY AN ARTIST'S RENDITION. EXACT LOCATION OF ALL FEATURES ARE SUBJECT TO CHANGE AND MAY NOT BE INSTALLED EXACTLY AS SHOWN ON PLANS AND/OR IN MODELS. PLACEMENT OF HOME, DRIVEWAY, SIDEWALKS AND EXTERIOR FEATURES ARE SUBJECT TO MODIFICATION AS DEEMED NECESSARY BY FIELD PERSONNEL.

CUSTOMER _____ DATE _____

CUSTOMER _____ DATE _____

WADE JOURNEY REPRESENTATIVE _____ DATE _____

APPROVAL FOR STAKING:

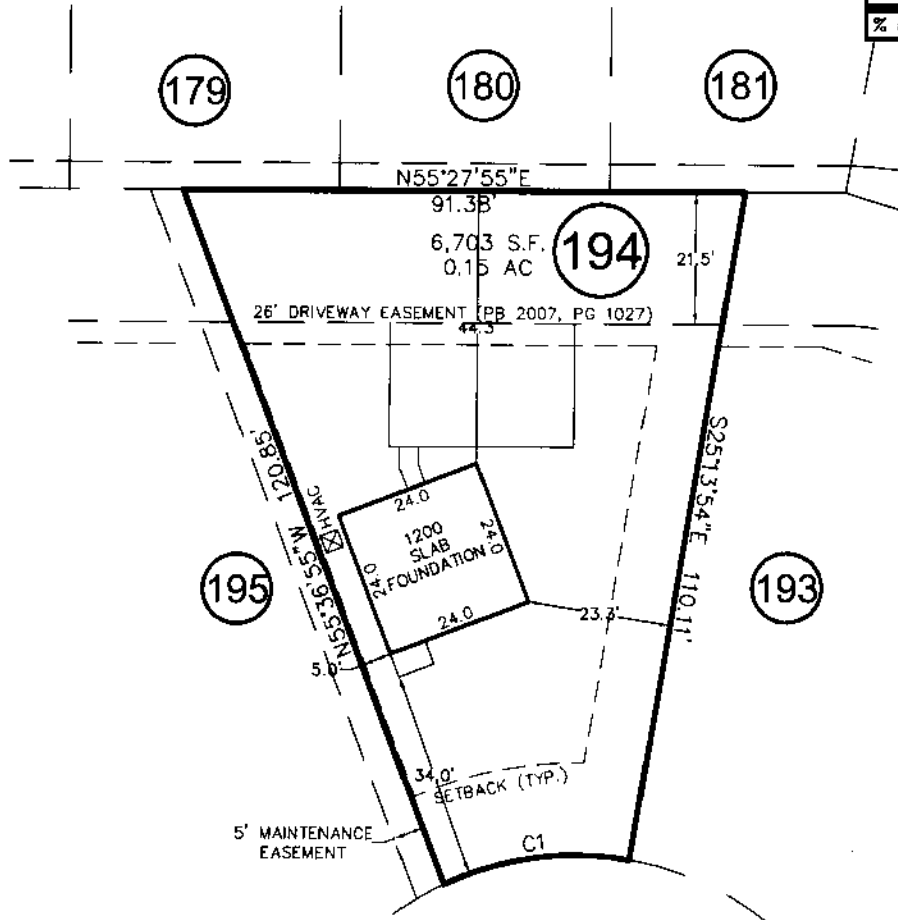
THIS PLOT PLAN AS PREPARED BY RESIDENTIAL LAND SERVICES, IS CORRECT AND IS HEREBY APPROVED FOR STAKING ON THE DATE SHOWN BELOW.

WADE JOURNEY HOMES REPRESENTATIVE _____ DATE _____

SETBACKS:

- FRONT - 15' w/PARKING IN REAR
- FRONT - 55' w/PARKING IN FRONT
- REAR - 25'
- NEAR SIDE - 0.5' MIN 5' MAX
- OPEN SIDE - 10'
- WINDOW/DOOR - 6'

IMPERVIOUS SURFACE AREA	
DESCRIPTION	AREA
HOUSE w/ PORCH	600 S.F.
PATIO/HVAC/MISC.	9 S.F.
DRIVEWAY & WALKS	621 S.F.
ALLEY PAVEMENT	1,840 S.F.
TOTAL (PROPOSED)=	3,070 S.F.
LOT AREA =	6,703 S.F.
% IMPERVIOUS AREA	= 45.8%



SITE PLAN APPROVAL

DISTRICT R480 USE SFD

#BEDROOMS 3

Date 10/15/17

Zoning Administrator _____

ALEAH COURT

50' PUBLIC R/W

Harnett County Central Permitting
PO Box 65 Lillington NC 27548
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 Wade Journey Homes Date 9/25/17
Site Address 88 Allan Ct. Phone 919.995.5654
Directions to job site from Lillington Head W. on E. Front St. towards 1st St.
Take US 421 S. to US 16 Campbell Ave in Nellis Creek
Continue on US 16 Campbell to Anna St.
Subdivision Meadows At Bulls Creek Lot 194
Description of Proposed Work SFR # of Bedrooms 3
Heated SF 1200 Unheated SF _____ Finished Bonus Room? _____ Crawl Space _____ Slab

General Contractor Information

WJH LLC Building Contractor's Company Name Telephone 336.282.3406
3300 Battleground Ave Ste 230 Greensboro Address Email Address travitz@wadejourneyhomes.com
49262 License # 27410

Electrical Contractor Information

Description of Work Electrical Install Service Size 200 Amps T-Pole Yes No
W-3 Telephone 919.550.7341
Electrical Contractor's Company Name Clayton Email Address ewig@w3electric.com
Address 16287 License # _____

Mechanical/HVAC Contractor Information

Description of Work Heating & Air
Comfort Air Telephone 336.794.9730
Mechanical Contractor's Company Name Email Address Kavanaugh@atlook.com
Address PO Box 527 Clemmons NC 2702 License # 4218

Plumbing Contractor Information

Description of Work Plumbing Install # Baths _____
Thornton Plumbing Telephone 919.550.4833
Plumbing Contractor's Company Name Email Address Thorntonplumbing@lumborgmail.com
Address 3160 A Vinson Rd. Clayton 27520 License # 22152

Insulation Contractor Information

Builders Insulation Telephone 919.788.9806
Insulation Contractor's Company Name & Address

*NOTE General Contractor must fill out and sign the second page of this application

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

Tau Raby
Signature of Owner/Contractor/Officer(s) of Corporation

9/25/17
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 Wade Journey Homes

Sign w/Title Tau Raby Permit Coordinator Date 9/25/17

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 717306

Filed on: 09/07/2017

Initially filed by: wjh2013

Designated Lien Agent

Investors Title Insurance Company

Online: www.liensnc.com

Address: 19 W. Hargett St., Suite 507 Raleigh, NC
27601

Phone: 888-690-7384

Fax: 913-489-5231

Email: support@liensnc.com

Project Property

MBC 194
88 Aleah Ct
Lillington, NC 27546
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

WJH, LLC
3300 Battleground Ave Suite 230
Greensboro, NC 27410
United States
Email: trabit@wadejurneyhomes.com
Phone: 191-999-5565

[View Comments \(0\)](#)

Technical Support Hotline: (888) 690-7384