Initial Application Date:	Ì	la_	18

Application #	18-50043062
	C1 14

#### **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.hamett.org/permits

"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION" City: Roseville State: CA Zip: 9566 Contact No: Email: ignature Home Builders Mailing Address: 1209 N. Main St. Lillington NC State: NC Zip: 27544 Contact No: 910-892 9299 Email: Cshemed. Shepgmil. Com CONTACT NAME APPLYING IN OFFICE: Chys Shenod Phone # 910 - 985-1136 
 PROPERTY LOCATION: Subdivision:
 Lot #: 2
 Lot Size: 14.034

 State Road # 1238
 State Road Name: Spring Hill Clacretin Refr
 Map Book & Page: 30171455

 PIN: 0620 -10-5739, 000

 Zonling: [A-30 Flood Zone: X Watershed: NO Deed Book & Page: 3550 | 17-19 | Power Company\*: Dake Greeny
 \*New structures with Progress Energy as service provider need to supply premise number PROPOSÉD USE: SFD: (Size 31 x 64') # Bedrooms: 4# Baths: 2. Basement(w/wo bath): Garage: V Deck: Crawl Space: 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 Bulft 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 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: Manufactured Homes: Other (specify): Required Residential Property Line Setbacks: Comments: Front Rear Sidestreet/corner lot Nearest Building

on same lot

								wards_	
Maners	From	Lillingto.	1. Turn	Left.	onto	Spring	H:11	Chr.C.	Rel.
House	will	be or	1 1884	Αρτοχ.	1.5 m	des.		Chw.C	
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			·····		<del></del>	<del></del>			
								he specifications o If false information	
		Signature o	f Owner or Owne	er's Agent		Di	ite		

\*\*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:		APPLICATION #: 18-50U3062	
	1	*This application to be filled out when applying for a septic system inspection.*	
Com		epartment Application for Improvement Permit and/or Authorization to Constru	ct
		N THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMEN	
PERMIT (	OR AUTHORIZA	TION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expira	ation
depending	upon documentat	tion submitted. (Complete site plan = 60 months; Complete plat = without expiration) $\frac{1}{9}$ $\frac{1}{9}$ 025 or option 1	41
√ Env	910-893-7323 ( Jeography) Ho	option 1 CONFIRMATION TO CONFI	- [ 1
		rons must be made visible. Place "pink property flags" on each corner iron of lot. All pro	nerty
		clearly flagged approximately every 50 feet between corners.	,pcity
•	Place "orange l	house corner flags" at each corner of the proposed structure. Also flag driveways, garages, de	ecks,
		wimming pools, etc. Place flags per site plan developed at/for Central Permitting.	
		Environmental Health card in location that is easily viewed from road to assist in locating proper	
		nickly wooded, Environmental Health requires that you clean out the <u>undergrowth</u> to allow the e performed. Inspectors should be able to walk freely around site. <b>Do not grade property</b> .	e son
		addressed within 10 business days after confirmation. \$25.00 return trip fee may be incl	urred
		incover outlet lid, mark house corners and property lines, etc. once lot confirmed ready.	
		proposed site call the voice permitting system at 910-893-7525 option 1 to schedule and use	
		cting notification permit if multiple permits exist) for Environmental Health inspection. Please	note
		umber given at end of recording for proof of request. or IVR to verify results. Once approved, proceed to Central Permitting for permits.	
		paith Existing Tank Inspections Code 800	
		nstructions for placing flags and card on property.	
• 1	Prepare for ins possible) and th	spection by removing soil over <b>outlet end</b> of tank as diagram indicates, and tift tid straight then <b>put lid back in place</b> . (Unless inspection is for a septic tank in a mobile home park)	up (ii
		ELIDS OFF OF SEPTIC TANK	
• ;	Affer uncoverin f multiple pern	ng <b>outlet end</b> call the voice permitting system at 910-893-7525 option 1 & select notification p mits, then use code <b>800</b> for Environmental Health inspection. <u>Please note confirmation nu</u>	)ermit Imber
		recording for proof of request.	BUDDI
		or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.	
<b>SEPTIC</b>			
If applying	ig for authorization	on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.	i <b>.</b>
{} Ac	cepted	{}} Innovative { Conventional} Any	
{} Al:	ternative	{}} Other	
The appli	cant shall notify	the local health department upon submittal of this application if any of the following apply to the prope	erty in
question.	If the answer is	"yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:	,
{)YES		Does the site contain any Jurisdictional Wetlands?	
{})YES	1-136	Do you plan to have an irrigation system now or in the future?	
{}}YES	(TV) NO	Does or will the building contain any drains? Please explain.	
{}}YES	11/10	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?	
{ <u>\</u> Y58	[_] NO	Is the site subject to approval by any other Public Agency?	
YES	{_}} NØ	Are there any Easements or Right of Ways on this property?	
{})YES	I <u>∽</u> NO	Does the site contain any existing water, cable, phone or underground electric lines?	

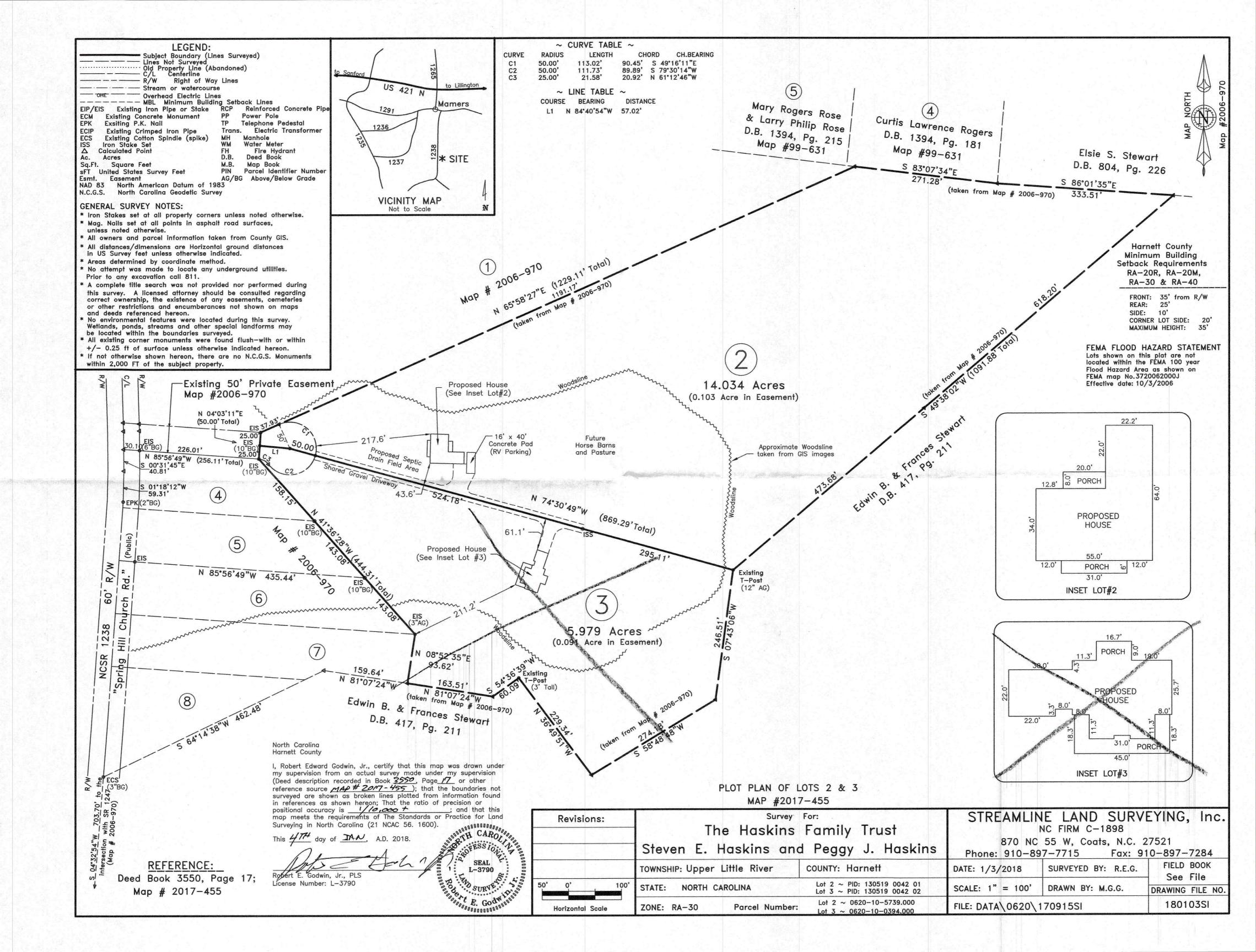
I Have Read This Application And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And State Officials Are Granted Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules.

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.

If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service.

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

DATE



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Harnett County Central Permitting
PO Box 65 Lillington NC 27546
910 893 7525 Fax 910 893 2793 www harnett org/permits

Application # 1850043062

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

Owners Name Signature Itome Builders	Date 1/12/18
ite Address Spring Hill Church 12d La	7+2 Phone 910-892-9299
rections to job site from Lillington	
Subdivision	Lot
Description of Proposed Work New Const.	# of Bedrooms
Heated SF 1888 Unheated SF 1308 Finished Bonus Room?	No Crawl Space Slab / stem
General Contractor Informat	ion
Signature Home Builders	910-892-9299
Building Contractor s Company Name	Telephone
1209 N. Main St.	cshemod . shop grail.om
Address	Email Address
<u>4943/</u>	
.icense # Flectrical Contractor Informs	tion /
Description of Work Slectnical Contractor Informs Service Size	e <u>200</u> Amps T-Pole YesNo
Buford Electric	910-723-1937
Electrical Contractor & Company Name	Telephone
948 Pan. Dr. Hope MillS NC 28348	
Address	Email Address
31424	
License #  Mechanical/HVAC Contractor Info	nemation
Medianical Transfer And	Singuon
Description of Work <u>Pustom Heating</u> + Air	910-892-8927
Mechanical Contractor's Company Name	Telephone
Mechanical Contractor's Company Name	lalepitorie
Custom Heating + Air	Email Address
12195	<u> </u>
License #	
Plumbing Contractor Informs	ation
Description of Work Plumbing	# Baths
L.R. Clover Plumbin	414-820-0026
Plumbing Contractor's Company Name	Telephone
P.D. Box 764 Benson NC 17504	
Address	Email Address
7158	
License # Insulation Contractor Information	ation
Cumberland Insulation	9117-484-7118
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 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 Officer/Agent of the Contractor or Owner General Contractor \_\_\_\_ 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

Project Manager Date 1-12-18

À.,

carrying out the work

Company or Name \_

Sign w/Title \_

### DO NOT REMOVE!

# Details: Appointment of Lien Agent

Entry #: 792525

Filed on: 02/01/2018

Initially filed by: larrydaughtry02152

#### Designated Lien Agent

Investors Title Insurance Company

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

27601

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

#### Owner Information

Signature Home Builders, Inc. 1209 N Main St Lillington, NC 27546 United States

Email: csherrod shb@gmail.com

Phone: 910-985-1136

#### Project Property

Lot#2 14.034ACS HASKINS FAMILY TRUST MAP#2017-455 DEED BOOK 3550 PAGE 0017 4468 Spring Hill Church Rd Lillington, NC 27546

Harnett County

#### Property Type

1-2 Family Dwelling

#### Date of First Furnishing

02/01/2018

View Comments (0)

Technical Support Hotline: (888) 690-7384

#### 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