initial Application Date:	01-26-18

Residential Land Use Application

Application #	1850043	175
	CU#	

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

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: Milton Enterprises Inc. Mailing Address: 3183 US 421 N State: NC Zip: 27546 Contact No: 910.814.1012 Email: andrew@miltonbuilthomes.com City: Lillington APPLICANT\*: Milton Built Homes, LLC Mailing Address: 3183 US 421 W City: Lillington State: NC Zip: 37546 Contact No: 910.890.0555 Email: and rew@milton builthomes. com \*Please fill out applicant information if different than landowner CONTACT NAME APPLYING IN OFFICE: Andrew W. Milton Phone # 910, 890.0555 PROPERTY LOCATION: Subdivision of # Milton Enturoises Inc Mapt 2017-369

Lot Size: , 92 ac State Road Name: Christian Light Road Map Book & Page: 2017/369 Parcel: 080642 0030 04 PIN: 0642-72-6320.000 Zoning: RA-30 Flood Zone: Min Watershed: WS-IV Deed Book & Page: 3519 /0382 Power Company\*: Duke Energy Progress \*New structures with Progress Energy as service provider need to supply premise number <u>59345987</u> from Progress Energy. PROPOSED USE: SFD: (Size 71 x 68) # Bedrooms: 4 # Baths: 3 Basement(w/wo bath): No Garage: V Deck: V Crawl Space: V Slab: (Is the bonus room finished? ( $\checkmark$ ) 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 ( \sqrt{no} no Does the property contain any easements whether underground or overhead ( $\underline{\hspace{0.2cm}}$ ) yes  $\underline{\hspace{0.2cm}}$  no Structures (existing or proposed): Single family dwellings:\_\_\_\_\_ Manufactured Homes:\_\_\_\_\_ Other (specify): Comments: Required Residential Property Line Setbacks: Minimum 35 Rear Closest Side · Sidestreet/corner lot\_ Nearest Building on same lot

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Take 401 N towards Fuguay-Left on Christian	
Light. Lot will be approximately 3/4 mile down on the right.	
<u> </u>	
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 su I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provide	mitted. 1.
Ander W. Mitter Signature of Owner's Agent Date	

<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.\*\*\*

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

\*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 # 52593 910-893-7525 option 1 ☑ 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. If applying for authorization to construct please indicate desired system type(s): can be ranked in order of preference, must choose one. {1} Conventional {\_\_}} Accepted {2-} Any {\_\_}} Innovative {\_\_}} 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: Does the site contain any Jurisdictional Wetlands? {\_\_}}YES Do you plan to have an irrigation system now or in the future? {\_\_}}YES 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? { **√** } NO {\_\_}}YES Is any wastewater going to be generated on the site other than domestic sewage? {**√**} NO { }YES Is the site subject to approval by any other Public Agency? {**√**} NO { }YES Are there any Easements or Right of Ways on this property? {**√**} NO {\_\_}}YES

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.

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 Understand That I Am Solely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making

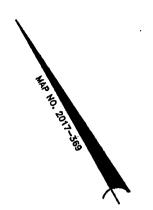
The Site Accessible So That A Complete Site Evaluation Can Be Performed.

touch W. Mill PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

DATE

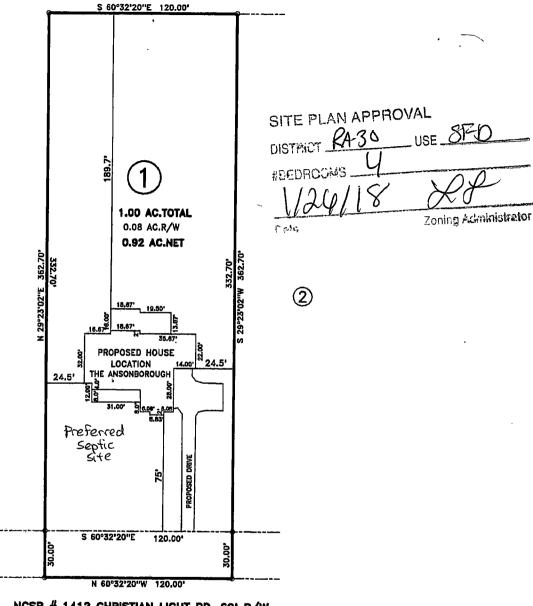
{√} NO

{\_\_}}YES



MAP REFERENCE: MAP NO. 2017-369

FRONT YARD 25'
REAR YARD 25'
SIDE YARD 10'
CORNER LOT SIDE YARD 20'
MAXIMUM HEIGHT 35'



## NCSR # 1412 CHRISTIAN LIGHT RD. 60' R/W

* 1412 5	PROPOSED PLOT PLAN MILTON ENTERPRISES			RD., LILLINGTON, N.C. 2	1304 27546
5 =	TOWNSHIP HECTOR'S CREEK	COUNTY HARNETT	15' 0 30'	SURVEYED BY:	FIELD BOOK
7	STATE: NORTH CAROLINA	DATE: JANUARY 09,2018	SCALE: 1" = 60"	DRAWN BY: RVB	DRAWING NO
AND ALTHOUGH	ZONE WATERSHED DISTRICT RA-30	TAX PARCEL IDM: PIN 2	CHECKED & CLOSURE	· <del></del>	18018

Each section below to be filled out by whomever performing work Must be owner or licensed contractor Address company name & phone must match

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

## **Application for Residential Building and Trades Permit**

Owners Name Milton Enterprises, Inc	Date <u>01-26-18</u>
Site Address Lot # 1 Milton Enterprises (Christian Light Rd.) Phor	ne <u>910.890.0555</u>
Directions to job site from Lillington Take 401 N towards Fuguary. Left or	n Christian Light.
Lot will be approximately 3/4 mile down on the right.	
SubdivisionLot	1
Description of Proposed Work New Construction SFD # of	Bedrooms
Heated SF 3066 Unheated SF 1, 282 Finished Bonus Room? yes Crawl Sp	oace <u></u> Slab
General Contractor Information	
Milton Ruilt Homes, LLC 910-890.0  Building Contractor's Company Name Telephone	2555
	Itonbuilthomes com
Address Address and Few Emil Address Email Address	
72052	
License # Electrical Contractor Information	
Description of Work New Construction SFD Service Size 400 Amps 7	Γ-Pole <u>√</u> YesNo
Dawson's Electric, Inc. 919. 201.3	_
Electrical Contractor's Company Name Telephone	
3754 Cokesbury Rd., Fuguay-Varina, NC 27526	
Address Email Addres	S
<u> 35948 - L</u> License #	
Mechanical/HVAC Contractor Information	
Description of Work New Construction SFD	
Cape Fear AIC + Heating Co. 910. 483 Mechanical Contractor's Company Name Telephone	,8790
1139 Robeson St., Fayetteville, NC 28305  Address  Email Address	<u> </u>
07332	
License #	
Plumbing Contractor Information	ı
Description of Work New Construction SFD # Baths 3	12
Camden's Plumbing + Repair, Inc. 919, 669.	4650
Plumbing Contractor's Company Name  Telephone	
P.O. Box 1359, Fugury-Varina, NC 27526  Address Email Address	
18903	
License #	
Insulation Contractor Information	שכנות
Friends Insulation 2001 Blount Creek Estate, Clayton, NC 919,291. Insulation Contractor's Company Name & Address 27520 Telephone	<u>∝-120</u>

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 01-26-18 Date Signature of Owner/Contractor/Officer(s) of Corporation 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 Milton Built Homes, LLC

Sign w/Title And V. Mitt, Project Manager Date 01-26-18

### DO NOT REMOVE!

# Details: Appointment of Lien Agent

Entry #: 778842

Filed on: 01/04/2018 Initially filed by: MiltonBuiltHomes

### Designated Lien Agent

First American Title Insurance Company

Online: www.liensnc.com then favore become control

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

27601

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

Email: support@liensnc.com to make support@liensnc.com

Property Type

MAP#2017-369

**Project Property** 

Fuquay-Varina, NC 27526 Harnett County

LOT#1 MILTON ENTERPRISES INC

1-2 Family Dwelling

#### Owner Information

Date of First Furnishing

Milton Enterprises, Inc. 3183 US 421 N Lillington, NC 27546 United States

Email: andrew@miltonbuilthomes.com

Phone: 910-814-1012

01/04/2018

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.

# HARMETT COUNTY CASH RECEIPTS \*\*\* CUSTOMER RECEIPT \*\*\* Oper: LLUCAS Type: CP Drawer: 1 Dates 1/26/18 53 Receipt no: 229003 Year Number Amount 2018 50043175

BP - ENV HEALTH FEES

\$750.00

\$750.00

\$750.00 \$750.00

NEW SEPTIC

LILLINGTON, NC 27546

B4

HILTON BUILT HUNES

Total payment

Tender detail CK CHECK PAYNEN 125 Total tendered

Trans date: 1/25/18 Time: 13:12:18

\*\* THANK YOU FOR YOUR PAYMENT \*\*