

Initial Application Date: 2.1.18

Application # 1850043216

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: James Rowland Mailing Address: 6568 Dought Rowland Rd.  
City: Willow Springs State: N.C. Zip: 27592 Contact No: 919-557-3403 Email: jrowland901.com

APPLICANT: Marty Tart/Tart Custom Homes Mailing Address: 359 Truth Rd.  
City: New Hill State: NC Zip: 27562 Contact No: 919-669-1818 Email: tartmashpvc.com

CONTACT NAME APPLYING IN OFFICE: Marty Tart Phone # 919-669-1818

PROPERTY LOCATION: Subdivision: Taylor Pointe Lot #: 16 Lot Size: .461  
State Road # \_\_\_\_\_ State Road Name: True Love Rd. Map Book & Page: 200575  
Parcel: 05-0635-003-16 PIN: 0635-27-3825.000  
Zoning: RA20A Flood Zone: N Watershed: No Deed Book & Page: 34160165 Power Company\*: Duke

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

**PROPOSED USE:**

- SFD: (Size 54'4" x 36'6" # Bedrooms: 3 # Baths: 2.5 Basement(w/wo bath): X Garage: 2 car Deck: N Crawl Space: Y Slab: N Monolithic Slab: N  
(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: 1 Manufactured Homes: \_\_\_\_\_ Other (specify): \_\_\_\_\_

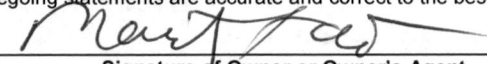
**Required Residential Property Line Setbacks:**

	Minimum	Actual
Front	<u>38'</u>	<u>60'</u>
Rear	<u>25'</u>	<u>87'</u>
Closest Side	<u>10'</u>	<u>11'</u>
Sidestreet/corner lot	<u>N/A</u>	
Nearest Building on same lot	<u>N/A</u>	

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: U.S. 401 South. Left on  
Christian Lt. Left on Lakesbury  
Left on Wade Stephenson ~~Left on~~  
Right on True Love

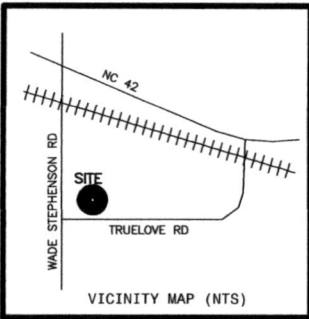
If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted. I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information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

  
Signature of Owner or Owner's Agent

1-30-18  
Date

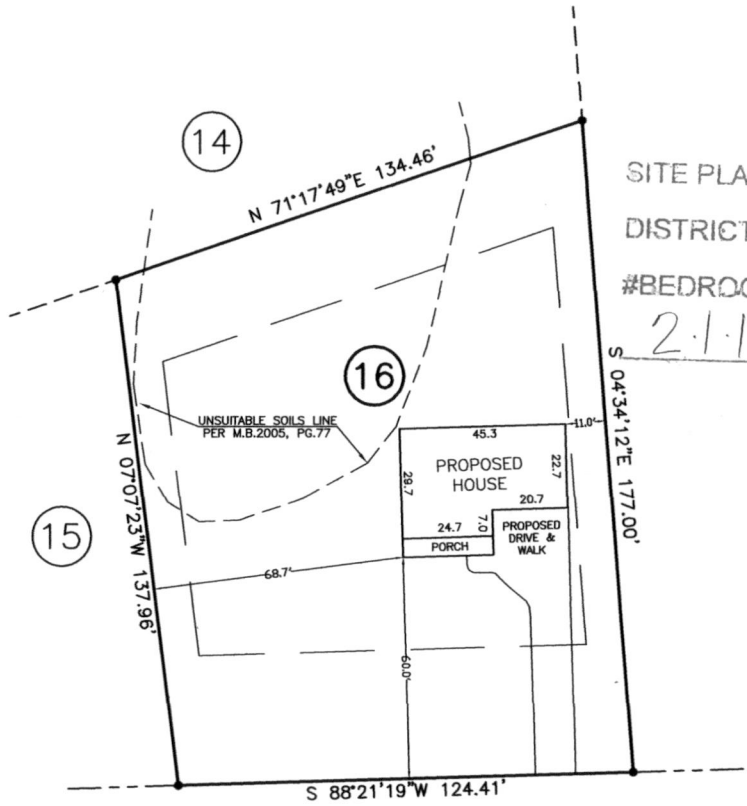
\*\*\*It is the owner/applicants responsibility to provide the county with any applicable information about the subject property, including but not limited to: boundary information, house location, underground or overhead easements, etc. The county or its employees are not responsible for any incorrect or missing information that is contained within these applications.\*\*\*

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



- LEGEND
- NTS NOT TO SCALE
  - EIP EXISTING IRON PIPE
  - PP POWER POLE
  - W/M WATER METER
  - TB TELEPHONE BOX
  - IPS IRON PIPE SET
  - CP&L TRANSFORMER
  - CATV CABLE TV BOX
  - L. POLE LIGHT POLE
  - OHPL OVERHEAD POWER LINE
  - F.E.S. FLARED END SECTION (PIPE)
  - RCP REINFORCED CONC. PIPE
  - B.O.C. BACK OF CURB
  - F.H. FIRE HYDRANT
  - C/O SEWER CLEAN OUT
  - EIS EXISTING IRON STAKE
  - M.H. MANHOLE
  - ECM EXISTING CONCRETE MONUMENT
  - P.K. PARKER KALON NAIL

(REF: M.B.2005, PG.75)  
 PLAT NORTH  
 N

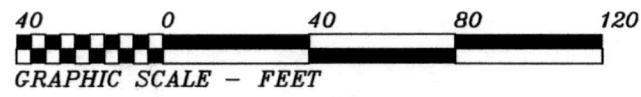


SITE PLAN APPROVAL  
 DISTRICT RA20M USE SFD  
 #BEDROOMS 3  
2-1-18 cydunsm  
 ZONING ADMINISTRATOR

**TRUELOVE ROAD**  
 (60' PUBLIC R/W)

NOTE: SHOWN IS LOT 16 OF  
 TAYLOR POINTE S/D  
 REF: M.B.2005 PG.75

AREA = 0.461 ACRES  
 830 TRUELOVE ROAD



THIS IS TO CERTIFY THAT THIS MAP WAS PREPARED FROM AN ACTUAL SURVEY OF THE PREMISES, MADE UNDER MY SUPERVISION, AND THAT THERE ARE NOT ANY ENCROACHMENTS, EXCEPT AS NOTED TO THE BEST OF MY KNOWLEDGE. THAT THE RATIO OF PRECISION AS CALCULATED BY LATITUDES AND DEPARTURES IS 1:10,000. THIS MAP WAS PREPARED FOR TITLE COMPANY USE AND IS NOT INTENDED FOR RECORDATION OR CONVEYANCES WITHOUT WRITTEN AUTHORIZATION OF THE SURVEYOR AND OTHER APPROPRIATE OFFICIALS.

PROFESSIONAL LAND SURVEYOR  
 L-3247

PRELIMINARY PLAT  
 NOT FOR RECORDATION

PRELIMINARY PLOT PLAN FOR:  
**TART CUSTOM HOMES**

BUCKHORN TWSP., HARNETT CO., N.C.  
 SCALE 1" = 40' JANUARY 4, 2018

MAULDIN - WATKINS SURVEYING, P.A.  
 P.O. BOX 444 / 1301 W. BROAD ST.  
 FUQUAY VARINA, NORTH CAROLINA 27526  
 (919) 552-9326

NAME: Just Custom Homes

APPLICATION #: 1850043216

**\*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 # 026019

2.1.18

**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.**

Matt [Signature]  
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

1-30-18  
DATE

Application # 43214

Harnett County Central Permitting  
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: Marty Tart / James Rowland Date: 1-30-18  
Site Address: 830 True Love Rd. HS Phone: 919-669-1818  
Directions to job site from Lillington: U.S. 401 South 7540  
left on Christian Rd + left on Lakesburg  
left on Wade Stephenson Right on True Love  
Subdivision: Taylor Pointe Lot: 16  
Description of Proposed Work: New Residential # of Bedrooms: 3  
Heated SF: \_\_\_\_\_ Unheated SF: \_\_\_\_\_ Finished Bonus Room? \_\_\_\_\_ Crawl Space: \_\_\_\_\_ Slab: \_\_\_\_\_

**General Contractor Information**

Tart Custom Homes 919-669-1818  
Building Contractor's Company Name Telephone  
359 Truth Rd. New Hill NC tartma@hpc.com  
Address 27562 Email Address  
58978  
License #

**Electrical Contractor Information**

Description of Work New Res Service Size: \_\_\_\_\_ Amps T-Pole: Yes No  
Dawson's Electric 919-201-3841  
Electrical Contractor's Company Name Telephone  
609 Cohen Rd. FU. NC. 27526 trusdawson@gmail.com  
Address 25948 L Email Address  
License #

**Mechanical/HVAC Contractor Information**

Description of Work New Res  
J. C.'s Heat & Air 919-369-2657  
Mechanical Contractor's Company Name Telephone  
1539 Wade Stephenson Rd. FU. HS. 27546 jchvac@gmail.com  
Address H3-12685 Email Address  
License #

**Plumbing Contractor Information**

Description of Work New Res # Baths 2 1/2  
Camden Plumbing 919-669-1818  
Plumbing Contractor's Company Name Telephone  
52 Buttonwood Ct FU NC. 27526 Camdensplumbing R.  
Address 18903 Email Address @90L.com  
License #

**Insulation Contractor Information**

Insulation Inc. 919-772-9000  
Insulation Contractor's Company Name & Address Telephone

\*NOTE: General Contractor / owner 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.

Mary Tao  
Signature of Owner/Contractor/Officer(s) of Corporation

1-30-18  
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: Tart Custom Homes Inc.

Sign w/Title: Mary Tao / Owner Date: 1-30-18

**DO NOT REMOVE!**

**Details: Appointment of Lien Agent**

Entry #: 805636

Filed on: 02/22/2018

Initially filed by: martytart

**Designated Lien Agent**

Investors Title Insurance Company

Online: [www.liensnc.com](http://www.liensnc.com) (<http://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](mailto:support@liensnc.com) (<mailto:support@liensnc.com>)

**Project Property**

Lot 16 Taylor Pointe  
830 Truelove Rd.  
Holly Springs, NC 27540  
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**

James Rowland  
6568 Dwight Rowland Rd  
Willow Springs, NC 27592  
United States  
Email: [tartm@hpw.com](mailto:tartm@hpw.com)  
Phone: 919-669-1818

**Date of First Furnishing**

03/22/2018

View Comments (0)

Technical Support Hotline: (888) 690-7384