Initial Application Date: 2/13/18	Application # 1850043297
COUNTY OF HARNETT RESIDE	CU# NTIAL 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: Adam Rich Maili	ng Address: 7562 Decatur Drive, Fayetteville
City: FOLYETTEVILLE State: NC. Zip: 257. Dentact	10:910-916-5519 Email: Overwatch 57@ yahoo, com
APPLICANT*: Hoam Kich Mailing Address: 1	562 Decator Drive, Fayetteville
City: Fayetteville State: AC Zip 2837 Contact I *Please fill out applicant information if different than landowner	No: 910-916-5579 Email: Overwortch 57 Cyaloo. com
CONTACT NAME APPLYING IN OFFICE: Charles FAGAN (R	ed Door Homes) Phone # 910-580-2505
PROPERTY LOCATION: Subdivision: Commiss Rose	L. Lillington NC Lot#: Lot Size: 12.49
State Road # State Road Name: CUMMINGS	Road Lillington Map Book & Page:
Parcel: 306110013 - PIN:	0(011-9) 14 15.000
Zoning: RA-3(Plood Zone: N) A Watershed: WS-IV Deed Book & Pa	ge: <u>03 )06/ 0288</u> Power Company*:
*New structures with Progress Energy as service provider need to supply premis-	number from Progress Energy.
PROPOSED USE:  SFD: (Size 55 x 52) # Bedrooms: 4 # Baths: 2 Basement(w/wo bath)  (Is the bonus room finished? () yes () no w/	th): Garage: Deck: Crawl Space: Slab: Monolithic Slab: Crawl Space: Slab: Slab: Slab: Slab: Crawl Space: Slab:
☐ Mod: (Sizex) # Bedrooms # Baths Basement (w/wo bath)  (Is the second floor finished? () yes () no A	th) Garage: Site Built Deck: On Frame Off Frame .ny other site built additions? () yes () no
☐ Manufactured Home:SWDWTW (Sizex) # Bed	rooms: 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
Water Supply: County Existing Well New Well (# of dwelling the limit of the limi	gs using well) *Must have operable water before final
Sewage Supply: New Septic Tank (Complete Checklist) Existing Se	
Does owner of this tract of land, own land that contains a manufactured home with	
Does the property contain any easements whether underground or overhead ()	•
Structures (existing or proposed): Single family dwellings: Manu	factured Homes: Other (specify):
Required Residential Property Line Setbacks: Comments:	
Front Minimum Actual \ \( \( \) \( \)	

Page 1 of 2

APPLICATION CONTINUES ON BACK

Rear

Closest Side

Sidestreet/corner lot\_ Nearest Building on same lot

Residential Land Use Application

03/11

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: From Lillington turn left onto west
Front Street then turn right anto Roven Rock Rol for 6 miles. Then
turn left onto Brown Road for I mile turn right onto Cummings
Road 1.8 miles the destination is on the Right
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.
Cliville From # 02-83-18
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\*\*

NAME: APPLICATION #: 43297		
•		
*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 #		
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.		
<ul> <li>Place "orange house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks,</li> </ul>		
out buildings, swimming pools, etc. Place flags per site plan developed at/for Central Permitting.		
<ul> <li>Place orange Environmental Health card in location that is easily viewed from road to assist in locating property.</li> </ul>		
<ul> <li>If property is thickly wooded, Environmental Health requires that you clean out the <u>undergrowth</u> to allow the soil</li> </ul>		
evaluation to be performed. Inspectors should be able to walk freely around site. Do not grade property.		
<ul> <li>All lots to be addressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred</li> </ul>		
for failure to uncover outlet lid, mark house corners and property lines, etc. once lot confirmed ready.		
<ul> <li>After preparing proposed site call the voice permitting system at 910-893-7525 option 1 to schedule and use code</li> </ul>		
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.		
<ul> <li>Use Click2Gov or IVR to verify results. Once approved, proceed to Central Permitting for permits.</li> <li>Environmental Health Existing Tank Inspections Code 800</li> </ul>		
<ul> <li>Environmental Health Existing Tank Inspections</li> <li>Follow above instructions for placing flags and card on property.</li> </ul>		
<ul> <li>Prepare for inspection by removing soil over outlet end of tank as diagram indicates, and lift lid straight up (if</li> </ul>		
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		
<ul> <li>After uncovering outlet end call the voice permitting system at 910-893-7525 option 1 &amp; select notification permit</li> </ul>		
if multiple permits, then use code 800 for Environmental Health inspection. Please note confirmation number		
given at end of recording for proof of request.		
<ul> <li>Use Click2Gov or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.</li> </ul>		
SEPTIC III		
If applying for authorization to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.		
{} Accepted {} Innovative {\sqrt{_}} 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 Does or will the building contain any drains? Please explain. {\_\_\_}}YES Are there any existing wells, springs, waterlines or Wastewater Systems on this property? Is any wastewater going to be generated on the site other than domestic sewage? {\_}}YES {\_\_}}YES Is the site subject to approval by any other Public Agency? {\_}}YES Are there any Easements or Right of Ways on this property? YYES {\_}} 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. Chock for D PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

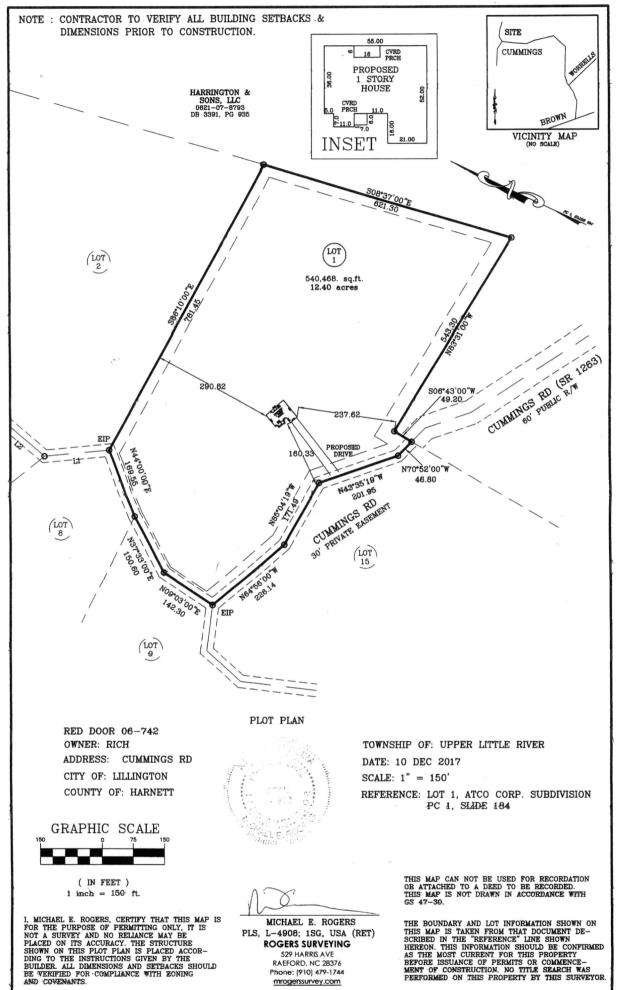
# **Harnett County Department of Public Health**

# **Well Construction Permit Application**

If the information in the application for a Well Construction Permit is *falsified*, *changed*, *or the site is altered*, then the Well Construction Permit shall become *invalid*.

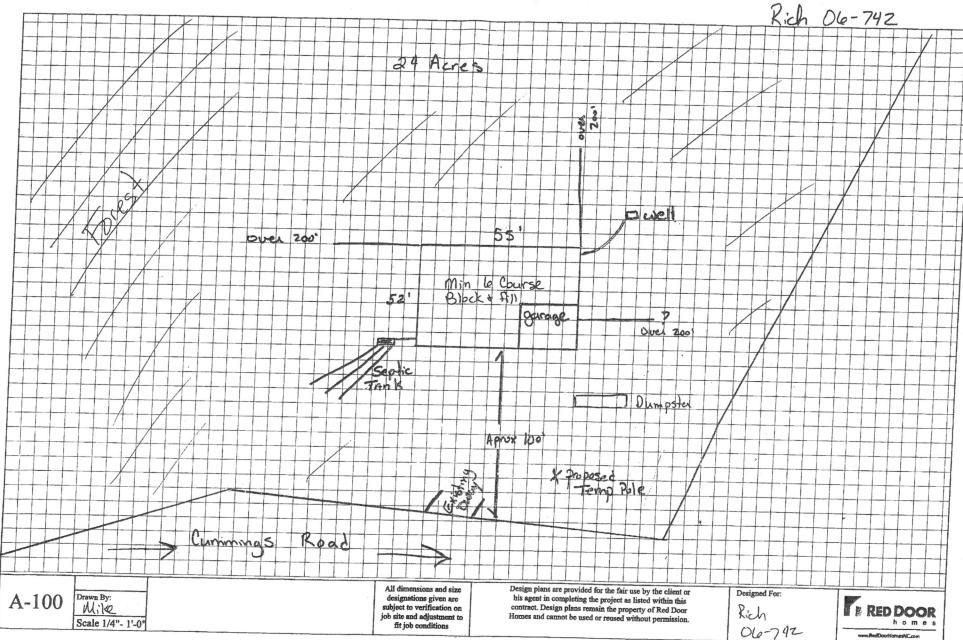
**APPLICANT INFORMATION** 

Adam Rich (910) 914-5579		
Applicant/Owner Phone Number		
75702 Decatur Dr. Favetteville 28376		
Street Address, City, State, Zip Code		
The Applicant must submit a Site Plan. The Site Plan is a map/drawing of the property and must show:  1. existing and/or proposed property lines and easements with dimensions;  2. the location of the facility and appurtenance;  3. the location for the proposed well;  4. the location of existing or proposed sewer lines and/or sewage disposal systems within 100 feet or the proposed well;  5. the location of any existing wells within 100 feet of the property; surface water bodies;  6. above ground and/or underground storage tanks;  7. and any other known sources of contamination within 100 feet of the proposed well site.		
The Applicant shall notify the Harnett County Health Director through or by way of the Harnett County Division of Environmental Health if any of the following occur prior to well construction:  1. there is a relocation of the proposed facility;  2. there is a change in the intended use of the facility;  3. there is a need for installing the waste water system in an area other than indicated on the well permit; or  4. there are landscape changed that affect site drainage.  Contact information: Environmental Health Division - 910-893-7547		
PROPERTY INFORMATION		
Proposed use of well Single-Family		
Street Address Subdivision/Lot #		
Parcel #13/5/01/10/2013 PIN # 0/01/1-98-7/073.000		
Directions to the Site		
<u> </u>		
I have thoroughly read and completed this Application and certify that the information provided herein is true, complete and correct to the best of my knowledge and is give in good faith. Representatives of the Harnett County Health Department and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable rules.  I understand that I am solely responsible for the proper identification and labeling of all property lines, underground utility lines, and making the site accessible so that a will can be properly constructed according to the permit.  Property Owner's of Owner's Legal Representative Signature Required  Date		
Property Owner's of Owner's Legal Representative Signature Required  Date		



mrogerssurvey.com





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

<u>Application for Residential Building and Trades Permit</u>

Owner's Name Adam Rich	Date <u>()2-03-</u>  8	
Site Address 1826 Cummings Road	Phone 910-916-5519	
Directions to job site from Lillington Tow Jeft in west	Front Street they fund	
Right anto Raves Rd for 6 miles Then	turn left on Brown Rd	
For I mile, Turn Right an Commings Rosert	1,8 Miles site is on Right	
Subdivision	Lot	
Description of Proposed Work Single Family Dwelling	# of Bedrooms	
Heated SF 1877 Unheated SF 558 Finished Bonus Room?	UO_ Crawl Space Slab	
General Contractor Information		
Ked Door Homes of Fayettevilu	910-672-8900	
Building Contractor's Company Name	Telephone	
4002 tagetteville Road		
Address	Email Address	
69945		
License #  Electrical Contractor Information	n	
Description of Work Rough In & Fined New Service Size	Amps T-PoleYesNo	
Sandy Ridge Flectric	910-323-2458	
Electrical Contractor's Company Name	Telephone	
454 Whitehead Road		
Address	Email Address	
100064		
License #		
Mechanical/HVAC Contractor Inform		
Description of Work Rough IN & New Home Start up		
Carolina Confort Air	910-550-7711	
Mechanical Contractor s Company Name	Telephone	
5212 US HWY 70 BUS W Clayton, NC	-	
Address	Email Address	
29097 H3-1		
License # Plumbing Contractor Informatio	n	
Description of Work Kough In & New Home Trim Out	# Baths	
Plumbing Contractor's Company Name	910-424-10712 Telephone	
Fidinishing Contractor's Company Hame	relephone	
3242 Mid Pine Dr., Fayetteville, NC.	Email Address	
07756 PI		
License #		
Insulation Contractor Information		
Cumberland Insulation	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 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

02-03-2018		
Signature of Owner/Contractor/Officer(s) of Corporation 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 Reddoor Homes of Fayetteville		
Sign w/Title Jon Slight Production Manager Date		

# DO NOT REMOVE!

# Details: Appointment of Lien Agent

Entry #: 747697

Filed on: 11/01/2017

Initially filed by: Reddoorhomes4002

# Designated Lien Agent

Investors Title Insurance Company

Online: 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@hensuc.com/

### **Project Property**

06-742 Rich Pin: 0611-99-7202-000 Deed

BK/PG: 3106/0288 1826 Cummings Road Lillington, NC 27546 Harnett County

## Property Type

1-2 Family Dwelling

#### Owner Information

Adam Rich 7562 Decatur Drive Fayetteville, NC 28303 United States

Email: overwatch57@yahoo.com

Phone: 910-916-5519

## Date of First Furnishing

11/15/2017

#### 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.

# HARNETI COUNTY CASH RECEIPTS \*\*\* CUSTOMER RECEIPT \*\*\*

Oper: LLUCAS Type: CP Brawer: 1 Date: 2/13/18 53 Receipt no: 250803

Year Number Amount 2018 50643297 91758 TECH 3 LILLINGTON, NC 27546 B4 BP - ENV HEALTH FEES \$756.00

NEW SEPTIC

RED DOUR HOMES

Tender detail
CK CHECK PAYMEN 14497 \$750.00
Total tendered \$750.00
Total payment \$750.00

Trans date: 2/13/18 Time: 10:26:20

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

# HARNETT COUNTY CASH RECEIPTS \*\*\* CUSTOMER RECEIPT \*\*\* Uper: LLUCAS Type: CP Drawer: 1 Date: 2/13/18 53 Receipt no: 256804

Year Number Amount 2018 50043297 91750 TECH 3 LILLINGION, NC 27546 B4 8P - ENV HEALTH FEES \$250.00

NEW WELL

RED DOOR HOMES

Tender detail
CK CHECK PAYMEN 14498 \$250.00
Total tendered \$250.00
Total payment \$250.00

Trans date: 2/13/18 Time: 10:26:46

\*\* THRMK YOU FOR YOUR PRYMENT \*\*