Initial Application Date:

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Central Permitting

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: Adam & Lisa Young Mailing Address: 80 Fieldwiew CT
City: Litting - Angin State: M Zip: 27586 Contact No: 919 561 7402 Email:
APPLICANT*: STE General Contract Mailing Address: Pro. Box 2364
City: Dvn State: Zip: 28335 Contact No: 910 5919707 Email:
CONTACT NAME APPLYING IN OFFICE: 5 han Andrew Varbrovan Phone # 910 5919727
PROPERTY LOCATION: Subdivision: 2131 She, FF Johnson Rd Lot #: Z Lot Size: 5.966
State Road # 1516 State Road Name: <u>\$ hv:FF</u>
Zoning: 7430 Flood Zone: No Watershed: No Deed Book & Page: 3 578 / 912 Power Company*: Duke
*New structures with Progress Energy as service provider need to supply premise number from Progress Energy.
PROPOSED USE: SFD: (Size 75 x 54) # Bedrooms; 3 # Baths: 3 Basement(w/wo bath): Garage: Deck: Crawl Space: Slab: Slab: (Is the bonus room finished? () yes () no w/ a closet? () yes () no (if yes add in with # bedrooms)
Mod: (Sizex) # 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:SWDWTW (Sizex) # Bedrooms: Garage:(site built?) Deck:(site built?)
□ Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit:
□ Home Occupation: # Rooms: #Employees:
Addition/Accessory/Other: (Sizex) Use: Closets in addition? () yes ()
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 (V) no
Structures (existing or proposed): Single family dwellings: Manufactured Homes: Mh
Required Residential Property Line Setbacks: Comments:
Front Minimum 3 5 Actual 180
Rear 23 896
Closest Side 10 45
Sidestreet/corner lot 2-D
Nearest Building ///

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nits are granted I	agree to con	form to all	ordinances a	ind laws of the St	tate of North C	arolina reg	ulating suc	h work and	the spe	ifications of	plans sub
by state that foreg	joing statem	ents are ac	curate and c	orrect to the best	of my knowle	dge. Perm	it subject to	o revocation	if false	nformation i	s provide
		λ					2 114	1-12			
	Sig	nature of	Owner or O	wner's Agent		_	Da	te			

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

Application #

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: Adam a Lisa Young	Date: <u>2 - 19 - 18</u>
	Phone:
Directions to job site from Lillington: 27 boads coats to	un beft on
Si Johnson Rd, go good 3 miles	hom sik on
the Jeff	
Subdivision: $\mathcal{N}\mathcal{A}$	Lot: <u>2</u>
Description of Proposed Work: New Mosse	# of Bedrooms: <u>3</u>
Heated SF: 203 6 Unheated SF: //94 Finished Bonus Room? _/ General Contractor Information	Vo Crawl Space: Yvs Slab:
STE General Contractors LLC	<u>9/0 89/- 5465</u> Telephone
Building Contractor's Company Name	Telephone
P.O. Box 2364 Dunn NO 28355	
Address 782410	Email Address
License #	
Electrical Contractor Information	1
Description of Work <u>New Plane</u> Service Size:	
S.M. Pop Electrical Contractor's Company Name	9/6 896 3655 Telephone
409 Chatham ST San EV N.	releptione
Address	Email Address
21326 L	
License #	ation.
License # Mechanical/HVAC Contractor Inform	<u>ation</u>
Description of Work Mechanical/HVAC Contractor Inform Mechanical/HVAC Contractor Inform	
Description of Work Om C / A: Mechanical/HVAC Contractor Inform Om C / A: Mechanical Contractor's Company Name	9/0 213 3221
Description of Work Om C / A: Mechanical/HVAC Contractor Inform Om C / A: Mechanical Contractor's Company Name	9/0 213 3221
Description of Work Om C / A: Mechanical/HVAC Contractor Inform Om C / A: Mechanical Contractor's Company Name	9/0 213 3221
Description of Work Mechanical/HVAC Contractor Inform Description of Work Corp 1 an Con Ext A: Con Ext Mechanical Contractor's Company Name Mechanical Contractor's Company Name Mechanical Contractor's Company Name Mechanical Contractor Avi Dun NC 2833 Address Address	9/0 213 3221
Description of Work Corp 1 and Com Gold A: Company Name Contractor's Company Name Contractor Information Contractor Contr	9/0 &13 32&1 Telephone Femail Address
Description of Work Om Golina Mechanical/HVAC Contractor Inform Description of Work Om Golina Mechanical/HVAC Contractor Inform And Dunn Address License # Plumbing Contractor Information	9/0 al3 32al Telephone YEmail Address
Description of Work Mechanical/HVAC Contractor Inform Description of Work Mechanical/HVAC Contractor Inform Description of Work Mechanical/HVAC Contractor Inform Mechanical Contractor Inform	9/0 &13 32&1 Telephone Email Address # Baths
Description of Work Mechanical/HVAC Contractor Inform Description of Work Mechanical/HVAC Contractor Inform Description of Work Mechanical/HVAC Contractor Inform Mechanical Contractor Inform	9/0 &13 32&1 Telephone Email Address # Baths
Description of Work Mechanical/HVAC Contractor Inform Description of Work Corp 1 and Company	9/0 213 3221 Telephone 9 Email Address 1 # Baths 9/9-550-4833 Telephone
Description of Work Mechanical/HVAC Contractor Inform Description of Work Mechanical/HVAC Contractor Inform Description of Work Mechanical/HVAC Contractor Inform Mechanical Contractor Inform	9/0 213 3221 Telephone 9 Email Address 1 # Baths 9/9-550-4833 Telephone
Description of Work Mechanical/HVAC Contractor Inform Description of Work Corp 1 and Company	9/0 213 3221 Telephone 9 Email Address 1 # Baths 9/9-550-4833 Telephone
Description of Work Mechanical/HVAC Contractor Inform Description of Work Corp 1 and Company	Plo 213 3221 Telephone Email Address 1 # Baths Place - 4833 Telephone Email Address
Description of Work Mechanical/HVAC Contractor Inform Description of Work Corp 1 and Company	Plo 213 3221 Telephone Email Address 1 # Baths Place - 4833 Telephone Email Address

*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 bysigning 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.

2 ml	2-14-18	
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 C	Contractor or Owner
Do hereby confirm under penalties of perjury that the person(s), firm(s) or corporate forth in the permit:	oration(s) performing the work
Has three (3) or more employees and has obtained workers' compensat	ion insurance to cover them.
${\text{them.}}$ Has one (1) or more subcontractors(s) and has obtained workers' competition.	ensation insurance to cover
Has one (1) or more subcontractors(s) who has their own policy of works covering themselves.	ers' compensation insurance
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 Department issuing the permit may require certificates of coverage of worker's to issuance of the permit and at any time during the permitted work from any percarrying out the work.	compensation insurance prior
Company or Name: STE Gime! (on tractors LL6	
Sign w/Title: Some forther	Date: 2 ^ 19-18

NAME: ADam Young / STE G.C.

APPLICATION #: 18-50043316

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 # 120134

Environmental Health New Septic System Code 800

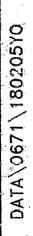
- All property irons must be made visible. Place "pink property flags" on each corner iron of lot. All property lines must be clearly flagged approximately every 50 feet between corners.
- Place "orange house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks, 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 <u>undergrowth</u> 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. <u>Please note</u> 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.

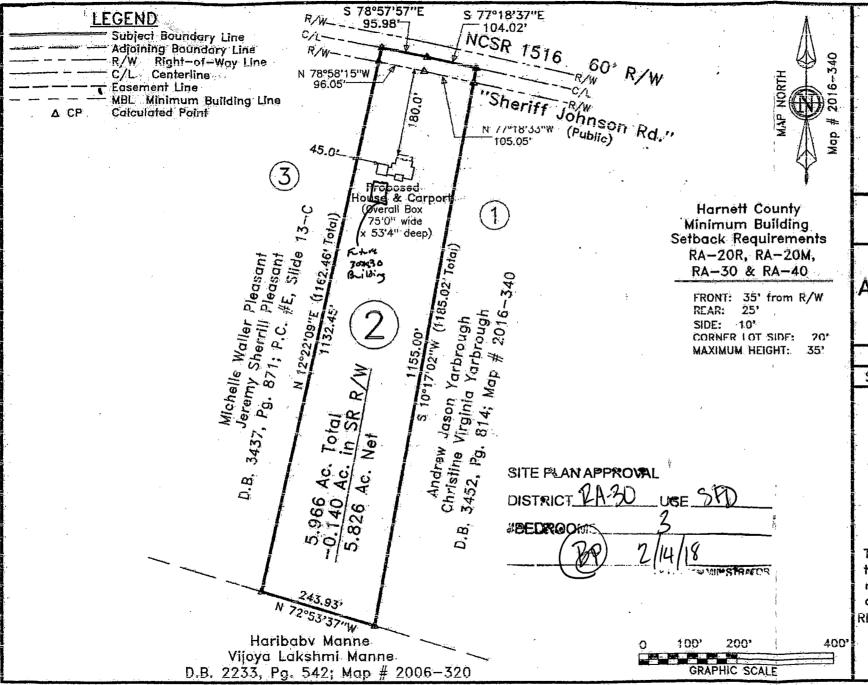
Environmental Health Existing Tank Inspections Code 800

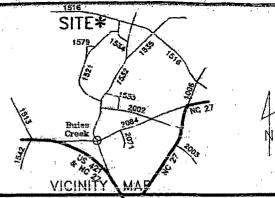
- Follow above instructions for placing flags and card on property.
- Prepare for inspection by removing soil over **outlet end** of tank as diagram indicates, and lift lid straight up (*if possible*) and then **put lid back in place**. (Unless inspection is for a septic tank in a mobile home park)
- 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 authorizatio	n to construct please indicate desired system type(s): can be ranked in order of preferen	ce, must choose one.
{ <u>∨</u> } Acc	epted	{}} Innovative {}} Conventional {}} Any	
{}} Alte	rnative	{}} Other	
		the local health department upon submittal of this application if any of the following "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:	g apply to the property in
{}}YES	(<u>v</u>) NO	Does the site contain any Jurisdictional Wetlands?	
{}}YES	{_NO	Do you plan to have an <u>irrigation system</u> now or in the future?	
{_}}YES	NO 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 pro-	operty?
{}}YES	{ <u>v</u> } NO	Is any wastewater going to be generated on the site other than domestic sewage?	
{}}YES	{\Z} NØ	Is the site subject to approval by any other Public Agency?	
{}}YES	{_1 NO	Are there any Easements or Right of Ways on this property?	
{_}}YES	{ <u>√</u> } 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	е.
I Have Rea	d This Applicati	on And Certify That The Information Provided Herein Is True, Complete And Correct	. Authorized County And
State Offici	als Are Granted	Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Ap	plicable Laws And Rules.
I Understa	nd That I Am So	olely Responsible For The Proper Identification And Labeling Of All Property Lines An	d Corners And Making
The Site A	ccessible So That	t A Complete Site Evaluation Can Be Performed.	•
	2 · ·	<u></u>	2-14-18
PROPER	TY OWNERS	OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)	DATE









"2151 Sheriff Johnson Rd." Tract 2, Map # 2016-340 Deed Book 3578, Page 412

Mapped For:

Adam K. & Lisa B. Young

Care of: Shane McLeod STE General Contractors

Neill's Creek Twp. Scale: 1" = 200" Harnett Co.

Date: 2/12/2018

Mapped By:

STREAMLINE LAND SURVEYING, INC.

870 NC 55 W, Coats, N.C. 27521 910-897-7715 NC FIRM C-1898

~PRELIMINARY PLOT PLAN~

Not an actual survey—
 This plan represents proposed improvements to a lot of record. This plan is subject to review and approval by County Planning and Inspections Dept.

REVISED: 1/31/18: Add Carport

NOT FOR RECORDATION

HARNETT COUNTY CASH RECEIPTS *** CUSTOMER RECEIPT *** Oper: BPETRICH Type: CP Drawer: 1 Date: 2/14/18 51 Receipt no: 253451 Year Number Amount 2018 50043316 2151 SHERIFF JOHNSON RD LILLINGTON, NC 27546 B4 BP - ENV HEALTH FEES

\$750.00

Tender detail
CK CHECK PAYMEN 1181 \$750.00
Total tendered \$750.00
Total payment \$750.00
Trans date: 2/14/18 Time: 16:25:01

NEW TANK