

Initial Application Date: 4-3-18

Application # 1850043701

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: SOUTHERN LIVING INVESTMENT PROPERTIES LLC Mailing Address: 1187 N. RALEIGH ST.

City: ANGIER State: NC Zip: 27501 Contact No: 919-427-8654 Email: STEPHENSONBUILDERSINC@EMBAER.COM

APPLICANT: STEPHENSON BUILDERS INC. Mailing Address: 1187 N. RALEIGH ST.

City: ANGIER State: NC Zip: 27501 Contact No: 919-427-8654 Email: STEPHENSONBUILDERSINC@EMBAER.COM
*Please fill out applicant information if different than landowner 919-930-7802 COM

CONTACT NAME APPLYING IN OFFICE: PAUL STEPHENSON Phone # 919-427-8654

PROPERTY LOCATION: Subdivision: MORGAN FARM Lot #: 23 Lot Size: 0.606 AC.

State Road # HWY 401 State Road Name: N.C. HWY 401 Map Book & Page: 2015 383

Parcel: 08 06041 00S1 36 PIN: 0651-03-6172-000

Zoning: RA-30 Flood Zone: NO Watershed: IV Deed Book & Page: 2017 223 Power Company: DUKE-ENERGY

*New structures with Progress Energy as service provider need to supply premise number 96861803 from Progress Energy.

PROPOSED USE:

SFD: (Size 57'4" x 51.8') # Bedrooms: 3 # Baths: 2 1/2 Basement (w/wo bath) NO Garage: Deck: Crawl Space: Slab: Slab: Monolithic
(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 PROPOSED Manufactured Homes: _____ Other (specify): _____

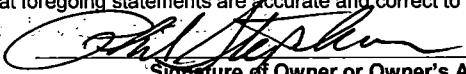
Required Residential Property Line Setbacks:

Front	Minimum	<u>35'</u>	Actual	<u>52'</u>
Rear		<u>25'</u>		<u>115'</u>
Closest Side		<u>10'</u>		<u>20'</u>
Sidestreet/corner lot		<u>20'</u>		<u>0.0'</u>
Nearest Building on same lot		<u>10'</u>		<u>0.0'</u>

Comments: _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: HWY 401 NORTH TOWARDS
FURAY GO 1 MILE PAST COURT HOUSE.
MORGAN FARM SUBDIVISION ON LEFT. TURN IN MORGAN FARM DR.
THEN RIGHT ON SIMPLY COUNTRY LAKE. LOT ON LEFT

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

4-3-18
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

NAME: STEPHENSON BUILDERS INC.

APPLICATION #: _____

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.
- 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. FOUNDATION DRAINS (NOT ON TANK SIDE)
 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? 20' UTILITY ON FRONT
 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.

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

4-3-18
DATE

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 STEPHENSON BUILDERS INC. Date 4-3-18
Site Address 29 SIMPLY COUNTRY LANE (LILLINGTON) Phone 919-427-8654
Directions to job site from Lillington Hwy 401 NORTH. GO 1 MILE PAST COURT HOUSE
MORGAN FARM SUBDIVISION ON LEFT. LEFT ON MORGAN FARM DR.
THEN RIGHT ON SIMPLY COUNTRY LANE LOT 23 ON LT.
Subdivision MORGAN FARM Lot 23
Description of Proposed Work NEW RESIDENTIAL # of Bedrooms 3
Heated SF 2492 Unheated SF 1094 Finished Bonus Room? YES Crawl Space X Slab

General Contractor Information

STEPHENSON BUILDERS INC. 919-427-8654
Building Contractor's Company Name Telephone
1187 N. RALEIGH ST. (ANGIER, NC. 27501) STEPHENSONBUILDERSINC@EMBA.VERMAIL.COM
Address Email Address
53604
License #

Electrical Contractor Information

Description of Work NEW RESIDENTIAL Service Size 200 Amps T-Pole X Yes No
DEAN ELECTRIC LLC. 919-669-0063
Electrical Contractor's Company Name Telephone
2793 BAPTIST GROVE RD. (F.V. NC. 27526)
Address Email Address
29839-L
License #

Mechanical/HVAC Contractor Information

Description of Work NEW RESIDENTIAL
JCS HVAC 919-552-6258
Mechanical Contractor's Company Name Telephone
1539 WADE STEPHENSON RD. (HOLLY SPRINGS, N.C. 27540)
Address Email Address
12655
License #

Plumbing Contractor Information

Description of Work NEW RESIDENTIAL # Baths 2 1/2
CAMDEN PLUMBING & REPAIR INC. 919-669-4650
Plumbing Contractor's Company Name Telephone
BOX 1359 (FURRY, VIRGINIA, N.C. 27526)
Address Email Address
P 18903
License #


Insulation Contractor Information

STEPHENS BUILDING PRODUCTS LLC. (RALEIGH N.C.) 919-937-8543
Insulation Contractor's Company Name & Address Telephone

*NOTE General Contractor 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



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

4-3-18

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 STEPHENSON BUILDERS INC.

Sign w/Title  V-PRESIDENT Date 4-3-18

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 827354

Filed on: 04/02/2018

**Initially filed by:
stephensonbuildersinc**

Designated Lien Agent

Chicago Title Company, LLC

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@liensnc.com>)

Project Property

lot 23 morgan farm
29 simply country lane
Lillington, NC 27546
NC 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

stephenson builders inc
1187 North Raleigh Street
Angier, NC 27501
United States
Email: drew@stephensonbuilders.com
Phone: 919-730-7802

Date of First Furnishing

05/01/2018

View Comments (0)

Technical Support Hotline: (888) 690-7384