	11 3 - 1 5	
Initial Application Date:	4-23-18	

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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.hamett.org/permits

A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION LANDOWNER: Stephenson Builders Tre Mailing Address: 1187 N Ralain St. State: NC Zip: 27501 Contact No: 919 730 7802 Email: drew a Stophensen brilders .com APPLICANT : Dow Stokeson Mailing Address: Same as above. City: *Please fill out applicant information if different than landowner CONTACT NAME APPLYING IN OFFICE: Drew Stephenson Phone # 919 730 7802 PROPERTY LOCATION: Subdivision: Morgan Form Subdivision: Lot #: 11 Lot Size: . 77

State Road # 233 State Road Name: Morgan Form Drive: Map Book & Page: 2017 / 222 Parcel: 080641 0 051 24 PIN: 0641 - 92 - 9509 . 000 Zoning: RA 30 Flood Zone: MIN Watershed: Care For Deed Book & Page: Power Company: dute cores PROPOSED USE: SFD: (Size 44 4 x 45) # Bedrooms: 4 # Baths 3.5 Basement(w/wo bath): Garage: Deck: Crawl Space: Slab: Slab: Slab: (Is the bonus room finished? (Yyes () 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 (_____) Does the property contain any easements whether underground or overhead (yes) no Structures (existing or proposed): Single family dwellings: 1 y < 5 Manufactured Homes: Other (specify): Comments: Please rell Drew with 7's Required Residential Property Line Setbacks: 919 730 7802. Minimum 35 Actual 70 Front

Residential Land Use Application

Rear

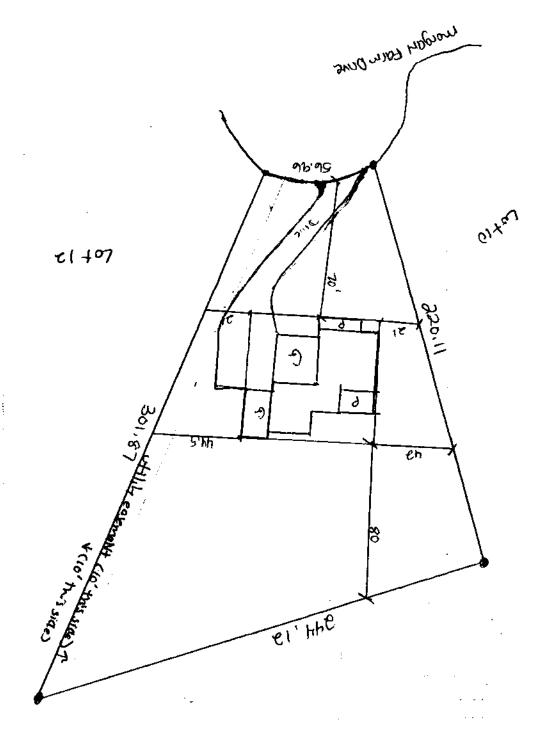
Sidestreet/comer lot Nearest Building on same lot

Page 1 of 2

SPECIFIČ DIREC	NONS TO THE PROPERTY FROM LILLINGTON:
, ,	thy 401 H. About I mik from hospital.
	thy 401 H. About I mile from hospital. take Left onto mergan form Down
If permits are gran	ted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitte foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.
Thoroby dialo dia	Signature of Owner or Owner's Agent 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



Stephenson Buildors Inc.
81-61-14 Monogon 11 tos.
81-61-14 Muchulg

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NAME: Stephenson	Builders Ir.	APPLICATION #:
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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 <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.

SEPTIC If applying for authoriza	tion to construct please indicate desired system type(s): can be ranked in order of preference	e, must choose one.
{}} Accepted	{} Innovative { Conventional {} Any	
{}} Alternative	Other 4 Bed Room (granty fed) If possibr.	
The applicant shall notic question. If the answer	fy the local health department upon submittal of this application if any of the following is "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:	apply to the property in
{_}}YES	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 (<u>✓</u>) NO	Are there any existing wells, springs, waterlines or Wastewater Systems on this pro	perty?
{_}}YES	Is any wastewater going to be generated on the site other than domestic sewage?	
{_}}YES	Is the site subject to approval by any other Public Agency?	
{ <u></u> YES {_}} NO	Are there any Easements or Right of Ways on this property?	
(∠)YES {_} NO	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 Applic	eation And Certify That The Information Provided Herein Is True, Complete And Correct.	Authorized County And
State Officials Are Gran	ted Right Of Entry To Conduct Necessary Inspections To Determine Compliance With App	plicable Laws And Rules.
I Understand That I Am	Solely Responsible For The Proper Identification And Labeling Of All Property Lines And	l Corners And Making
The Site Accessible So T	hat A Complete Site Evaluation Can Be Performed.	4-23-18
DDODEDTY AWNEL	OF ON AWNERS I WOAL DEPRESENTATIVE SIGNATURE (REQUIRED)	DATE

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

	nous 4-73-18			
	Date <u>4-23-18</u>			
	Phone 919 730 7803			
Directions to job site from Lillington Hwy 401 N. Left ordo	magan farm drive.			
2 1 mile from hospital are left				
Subdivision Morgan Form	Lot			
Description of Proposed Work New Single Family Home	# of Bedrooms 4			
Description of Proposed Work New Single Family Homes Heated SF 2881 Unheated SF 1350 Port Firmshed Bonus Room? General Contractor Information	Y <u>c S_</u> Crawl Space Y <u>c S_</u> Slab l			
Building Contractor's Company Name	919-730-7802			
	Telephone			
Address Actes NC 27501 cln	two steptensu builders, com Email Address			
<u>53604</u> License #				
Electrical Contractor Information	n Oca deservices Ala			
Description of Work How Service Size				
Austin Ocan Electrical Contractor Electrical Contractor's Company Name	<u>919.669.0063</u> Telephone			
2793 Baptist Grave Ld. Fugury 27526	aideany 330 Dychoore			
Address	Email Address			
<u>L 29839</u>				
License # Mechanical/HVAC Contractor Inform	nation			
Description of Work New Hame	919-552- 3053			
Mechanical Contractor's Company Name	Telephone			
1539 Wade Stephenson Road Holly Springs 27510				
Address	Email Address			
12655				
License #	_			
Plumbing Contractor Information				
Description of Work Candon's Plumbly and Pepair	_# Baths3. <u>\$</u>			
New Home K	919 - 557 - 1584			
Plumbing Contractor's Company Name	Telephone			
Address	Email Address			
18903				
License #				
Insulation Contractor Information Strolens Rullding Products 919 630 8365				
Insulation Contractor's Company Name & Address	Telephone			
Mishignou Counsciol a Combant James a vocalese	· 4·			

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 Affidavit for Worker's Compensation N C G S 87-14 The undersigned applicant being the Owner Officer/Agent of the Contractor or Owner General Contractor 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 Buildes Inc.

Sign w/Title _

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 838428

Filed on: 04/22/2018 Initially filed by: stephensonbuildersinc

Designated Lien Agent

Project Property

Lot 11 Morgan Farm 233 Morgan Farm Drive Lillington, NC 27546

harnett County

Chicago Title Company, LLC

Online: www.liensnc.com

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

27601

Phone: 888-690-7384

Fax: 913-489-5231

Property Type

1-2 Family Dwelling

Owner Information

Date of First Furnishing

stephan and natascha opalka 233 Morgan Farm Drive Lillington, NC 27546 United States

Email: drew@stephensonbuilders.com

Phone: 919-730-7802

06/01/2018

View Comments (0)

Technical Support Hottine: (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. HARNETT COUNTY CASH RECEIPTS

*** CUSTOMER RECEIPT ***

Uper: JBROCK Type: CP Drawer: 1
Date: 4/23/16 52 Receipt no: 330187

Year Number Amount 2018 50043849 233 NORGAN FARM DR LILLINGTON, NC 27546 BP - ENV HEALTH FEES 8750.00

NEW TANK

STEPHENSON BUILDERS

Tender detail
CK CHECK PAYMEN 1336 \$750.00
Fotal tendered \$750.00
Total payment \$750.00

Trans date: 4/23/18 Time: 9:32:41

** THANK YOU FOR YOUR PAYMENT **