Initial Application Date: 5/14/18

Signature of Owner or Owner's Agent

Application #	1850044002	

	COUNTY OF HARNETT LAND	USE APPLICATION	
Central Permitting	102 E. Front Street, Lillington, NC 27546	Phone: (910) 893-4759	Fax: (910) 893-2793

LANDOWNER: Keith Bullock B.	sildes & In	Mailing Addres	s: 72 Overla	pokct.
City: Angico				
APPLICANT: SAME		Mailing Addres	s:	
City:				
PROPERTY LOCATION: SR #: 1433				
Audress.				
Parcel: 050 633 6208 6	8	PIN: 0(03	3-210-943	7.000
Zoning: 24-30 Subdivision: Avslo	y Road Mi	nDV	Lot #:	2 Lot Size: . 66
Flood Plain: Panel:	Watershed: WS	S-LV Deed Book/	Page: 2598/950	Plat Book/Page: 2/18/127
DIRECTIONS TO THE PROPERTY FROM LILL	INCTON:			
Hwy. 401 N Left	on Christ	tion Light	Rd Left a	1 CoKesbury Rd
Right on Asky Rd.	- Lots on	Reilit.		
7				
PROPOSED USE:			-	1
Sg. Family Dwelling (Size 60 x 60)#	of Bedrooms 3 #	Baths 2 Basem	ent (w/wo bath) M	Garage induded Deck includes
☐ Multi-Family Dwelling No. Units	No. Bedro	ooms/Unit	, ,	2001
☐ Manufactured Home (Sizex) #				
☐ Number of persons per household				
☐ Business Sq. Ft. Retail Space		Туре		
☐ Industry Sq. Ft				
□ Church Seating Capacity	Kitchen	Philipping and the second seco		
☐ Home Occupation (Sizex)	# Rooms	Use		
Additional Information:				
☐ Accessory Building (Sizex)	Use			
Addition to Existing Building (Sizex				
Other				
Additional Information:				
Water Supply: (X) County (_) Well (New York)				alth Site Visit Date:
Sewage Supply: (X) New Septic Tank () Ex		() County Sewer	(_) Other	
Erosion & Sedimentation Control Plan Required?				
Property owner of this tract of land own land that			nundred feet (500') of trac	ct listed above? YES NO
Structures on this tract of land: Single family dw	ellings Mar	nufactured homes	Other (specify)	
Required Residential Property Line Setbacks	:	Minimum	Actual	
	Front	35	25,	
	Rear	25	019	
	Side		100	
	Corner	20		
	Nearest Building	10		
f permits are granted I agree to conform to all	ordinances and the I	aws of the State of I	North Carolina regulating	such work and the specifications or
plans submitted. I hereby swear that the foregoin				
13111			5-14-1	
A/200			2-17'1	

\*\*This application expires 6 months from the initial date if no permits have been issued\*\*

Date

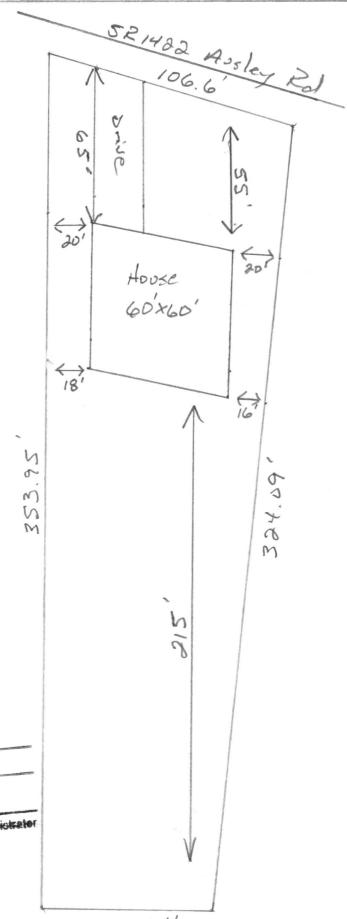
NAME: Keith Bullock Builders	NAME:	Keith	Bullock	Buldes
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APPLICATION #: 44002	
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\*This application to be filled out when applying for a sentic system inspection \*

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 AT TEDED. THEN THE IMPROVEMENT	
PERVIT OR AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without symination	n
depending upon documentation submitted. (complete site plan = 60 months; complete plat = without expiration)  910-893-7525 option 1  CONFIRMATION # 62769 - U	
Environmental Health New Septic System Code 800	7/
All property irons must be made visible. Place "pink property flags" on each corner iron of lot. All property flags on each corner iron of lot.	1/1
lines must be clearly hagged approximately every 50 feet between corners.	
<ul> <li>Place "orange house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decl</li> </ul>	KS,
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> <li>If property is thickly wooded, Environmental Health requires that you clean out the <u>undergrowth</u> to allow the s</li> </ul>	
evaluation to be performed. Inspectors should be able to walk freely around site. <u>Do not grade property.</u>	Oil
<ul> <li>All lots to be addressed within 10 business days after confirmation, \$25.00 return trip fee may be incurred.</li> </ul>	ed
Tot 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 con</li> </ul>	de
800 (after selecting notification permit if multiple permits exist) for Environmental Health inspection. Please no confirmation number given at end of recording for proof of request.	te
Use Click2Gov or IVR to verify results. Once approved, proceed to Central Permitting for permits.	
<u>Environmental Health Existing Tank Inspections</u> Code 800	
<ul> <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 close back down. (Unless inspection is for a septic tank in a mobile home park)  • After uncovering outlet end call the voice permitting system at 910-893-7525 option 1 & select notification permit	
multiple permits, then use code 800 for Environmental Health inspection. Please note confirmation number	IT Or
given at end of recording for proof of request.	21
<ul> <li>Use Click2Gov or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.</li> </ul>	
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	
The applicant shall notify the local health department upon submittal of this application if any of the following apply to the property in the local health department upon submittal of this application if any of the following apply to the property in the local health department upon submittal of this application if any of the following apply to the property in the local health department upon submittal of this application if any of the following apply to the property in the local health department upon submittal of this application if any of the following apply to the property in the local health department upon submittal of this application in the local health department upon submittal of this application in the local health department upon submittal of this application in the local health department upon submittal of this application in the local health department upon submittal of this application in the local health department upon submittal of this application in the local health department upon submittal of the local health department upon submittal upon su	in
question. If the answer is "yes", applicant must attach supporting documentation.	11
{}}YES {}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 {	
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	ı
State Officials Are Granted Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules.	
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.	
2 W/	
5-14-18	2
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)	

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SITE PLAN APPROVAL

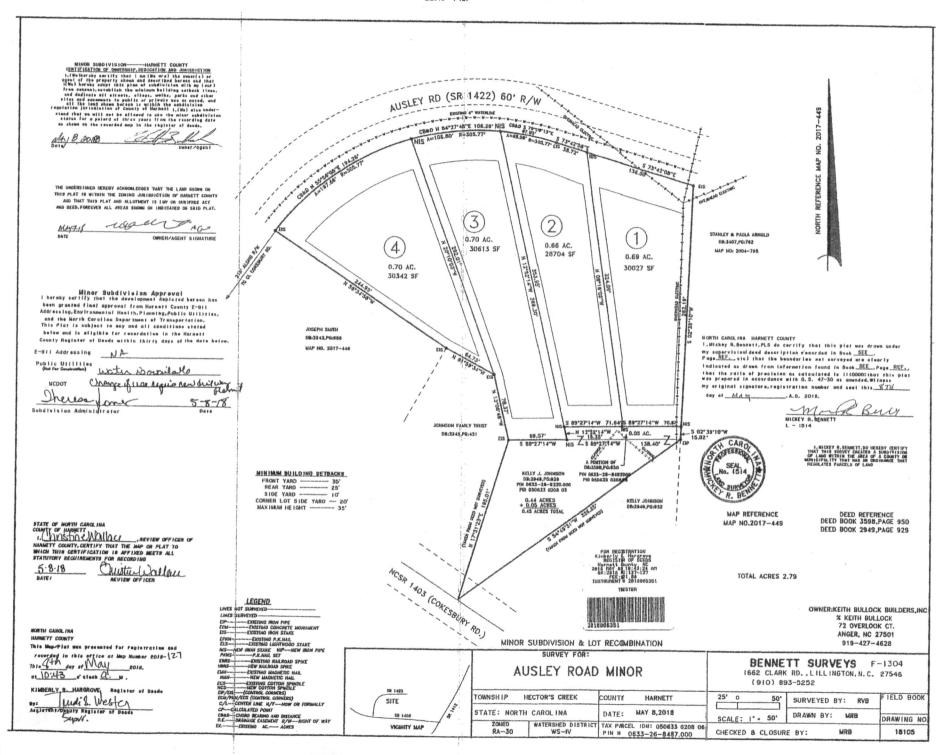
DISTRICT RASO

#BEDROOMS 3

5/14/18

Zoning Administrator

71.64



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

Oper: LLUCAS Type: CP Drawer: 1 Date: 5/14/18 53 Receipt no: 355220

Year Number Amount 2018 50044002 91750 TECH 3 LILLINGTON, NC 27546 B4 BP - ENV HEALTH FEES \$750.00

**NEW SEPTIC** 

KEITH BULLOCK BUILDERS

Tender detail
CK CHECK PAYMEN 11876 \$750.00
Total tendered \$750.00
Total payment \$750.00

Trans date: 5/14/18 Time: 11:41:47

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

App# 1850044001

## Harnett County Central Permitting PO Box 65 Lillington, NC 27546 Telephone Number 910-893-4759

Application for Building and Trade Permit Owner's Name: Kc. Hu HOLK Builders Inc 72 Overlook of Anger NL 37501 Address: Phone: Directions to job site: an utRd Subdivision: Lot: Construction Type: (Please Check) Building Use: (Please Check) \*New \*Residential Renovation Modular Addition Commercial Moved House Multi-Family Other Description of Proposed Work: Total Project Cost: \_\_ /20,000 **Building Permit Information** Heated SF 1445 Crawl Space (K) Building Construction Cost \$ 120,000 Unheated SF 460 Stab (K)
Keith Zullock Builders Acres Disturbed Stories Building Contractor's Company Name Telephone 72 overlook Ct Address License # Signature of Officer(s) of Corporation **Electrical Permit Information** Description of Work New Electrical Cost \$ TS Pole: Yes (X) No () Underground (X) Overheard () Permanent Service: Underground Overhead () Service Size: **Amps** Dean Statera, LLC 919-669-006 Electrical Contractor's Company Name Telephone 2793 Baptist Grove Rd. Fu Address License # Austin Dean by Al Signature of Officer(s) of Corporation Mechanical Permit Information Description of Work Type System Number of Units Mechanical Cost \$ Carolina Cantor Mechanical Contractor's Company Name Telephone 5712 US Hay 70 BUS 429022 Address License # IP more by son Signature of Officer(s) of Corporation Plumbing Permit Information Description of Work Number of Baths Plumbing Cost \$ L.R. Gloves Humbing 919-894 - 5892 Plumbing Contractor's Company Name Telephone PO BOX 764 BENKON, NC 07958 Address, License # LE Clover by Let Signature of Officer(s) of Corporation **Insulation Permit Information** Residential (i) Other () Not Required () Insulating Inc 9/9-772-9000

Dano 1 of 2

Address

Insulation Contractor's Company Name

42/04

Telephone

## Sprinkler System Information

<del></del>	
Sprinkler Contractor's Company Name	Telephone
Contact Person	<b>,</b>
Address	License #
Signature of Officer(s) of Corporation Fire	Alarm System Information
Fire Alarm Contractor's Company Name	Telephone
Contact Person	
Address	License #
Signature of Officer(s) of Corporation	Driveway Access
NC Department of Transportation Drivew	ay Access/Permit? Yes No 🗶
correct and that the construction will a Plumbing and Mechanical codes, and information on the above contractors is including listed contractors, site plan, but the contractors is including listed contractors.	to make necessary application, that the application is conform to the regulations in the Building, Electrical, the Harnett County Zoning Ordinance. I state the scorrect as known to me and if any changes occur building and trade plans, Environmental Health permit artify it is my responsibility to notify the Harnett County changes.
Sulle Single State 1055	6/6/18
Signature of Owner/Contractor/Officer(s)	of Corporation Date [

## Affidavit for Worker's Compensation N.C.G.S. 87-14

The undersigne	ed applicant for Building Permit #being the:
	_ Contractor Owner
	Officer/Agent of the Contractor or Owner
Do hereby co performing the	nfirm under penalties of perjury that the person(s), firm(s) or corporation(s) work set forth in the permit:
-	Has/have three (3) or more employees and has/have obtained workers' compensation insurance to cover them.
	Has/have one (1) or more subcontractors(s) and has/have obtained workers' compensation insurance to cover them.
	Has/have one (1) or more subcontractors(s) who has/have their own policy of workers' compensation insurance covering themselves.
	_ Has/have not more than two (2) employees and no subcontractors.
Permitting Dep compensation in	on the project for which this permit is sought it is understood that the Central artment issuing the permit may require certificates of coverage of worker's assurance prior to issuance of the permit and at any time during the permitted work and firm or corporation carrying out the work.
Firm Name:	Eith Bullock Builders Inc.
By/Title: >-c=	ident
Date:	2/10/18