

Initial Application Date: 7/2/18

18-50044404
Application # ~~07-50017815~~
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: Regency Homes Inc. Mailing Address: PO Box 25640
City: Fayetteville State: NC Zip: 28314 Contact No: _____ Email: _____

APPLICANT: Ben Stout Construction Mailing Address: 409 Chicago Drive #103 Fayetteville
City: Fayetteville State: NC Zip: 28303 Contact No: (910) 779-0019 Email: residential@benstoutconstruction.com

*Please fill out applicant information if different than landowner
CONTACT NAME APPLYING IN OFFICE: Ben Stout Phone #: (910) 779-0019

PROPERTY LOCATION: Subdivision: Persimmon Hill Lot #: 41 Lot Size: 0.45
State Road # 139 State Road Name: Old Field Loop Map Book & Page: 2307, 0908
Parcel: 039577-0028 41 PIN: 9578-81-7164-000 20061895
Zoning: RA-202 Flood Zone: MFRX Watershed: NO Deed Book & Page: 2307, 0908 Power Company*: Central Electric EMC

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

PROPOSED USE:

- SFD: (Size 42 x 38) # Bedrooms: 4 # Baths: 3 Basement(w/w bath): 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/w 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 Manufactured Homes: _____ Other (specify): _____

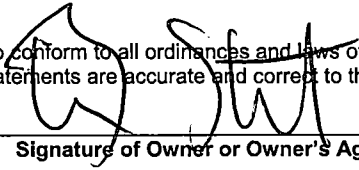
Required Residential Property Line Setbacks:

Front	Minimum	<u>35'</u>	Actual	<u>36'</u>
Rear		<u>25'</u>		<u>120'</u>
Closest Side		<u>10'</u>		<u>31'</u>
Sidestreet/corner lot		_____		_____
Nearest Building on same lot		_____		_____

*
Comments: ref 07-50017815 for septic revision
house box fits inside originally proposed home - same beds too.

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: _____

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

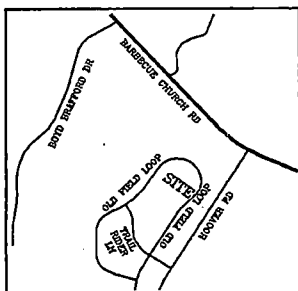
7/2/18
Date

*****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.*****

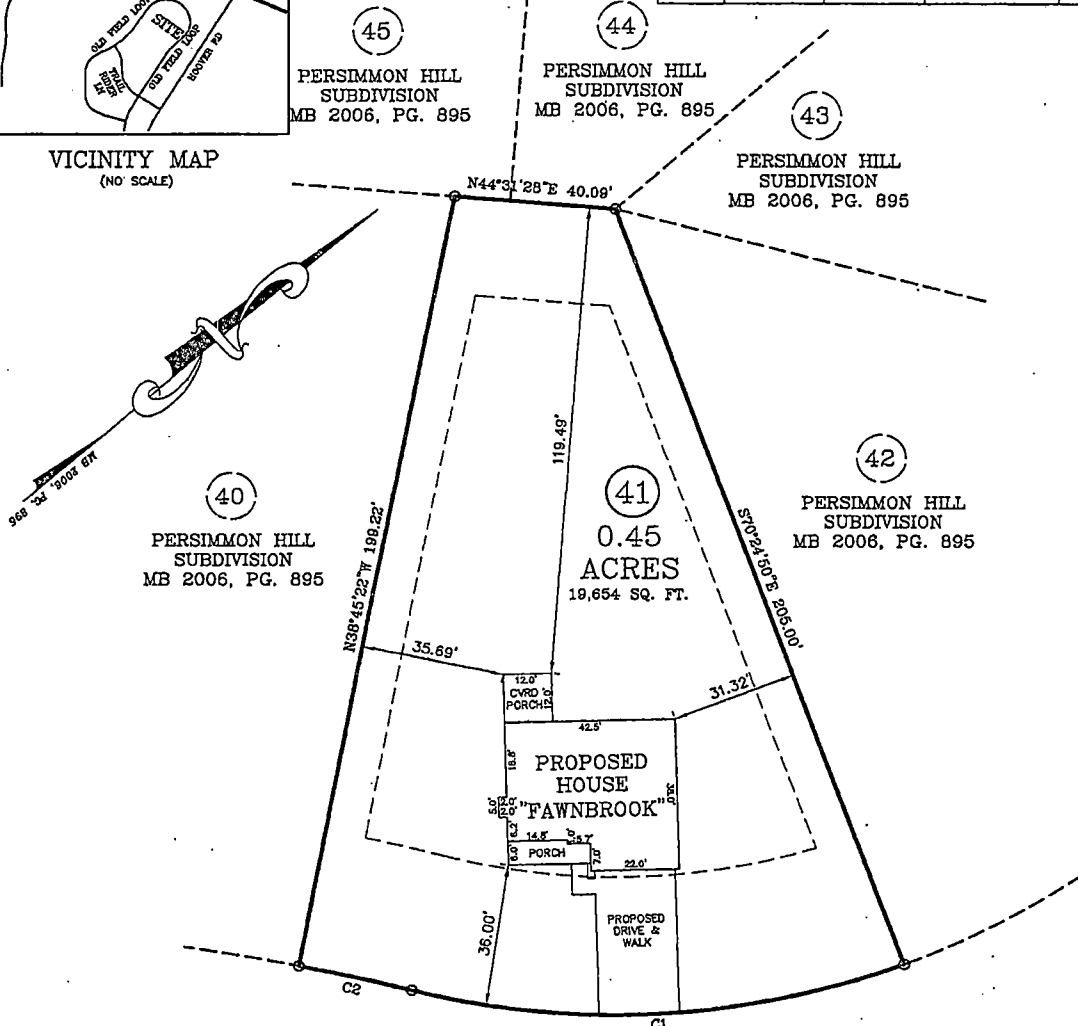
****This application expires 6 months from the initial date if permits have not been issued****

NOTE : CONTRACTOR TO VERIFY ALL BUILDING SETBACKS PRIOR TO CONSTRUCTION.

CURVE TABLE				
CURVE	LENGTH	RADIUS	BEARING	CHORD
C1	124.45'	205.00'	S36°58'42"W	122.55'
C2	28.65'	525.00'	S52°48'26"W	28.65'



VICINITY MAP
(NO SCALE)



OLD FIELD LOOP
50 FT. PUBLIC R/W

PLOT PLAN

PLOT PLAN FOR: BEN STOUT CONSTRUCTION
ADDRESS: OLD FIELD LOOP
CITY OF: NEAR PINEVIEW, NC
COUNTY OF: HARNETT

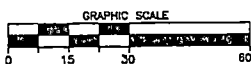
TOWNSHIP OF: BARBECUE
DATE: JUNE 26TH, 2018
SCALE: 1" = 30'
REFERENCE: LOT 41
PERSIMMON HILL
SUBDIVISION
MB 2006, PG. 895



W. LARRY KING, PLS - L-1339

Larry King & Associates, R.L.S., P.A.

P.O. Box 53787
1333 Morganton Road, Suite 201
Fayetteville, NC 28305
Phone: (910) 483-4300
Fax: (910) 483-4052
www.lkandA.com
NC Firm License C-0887



I, W. LARRY KING, CERTIFY THAT THIS MAP IS FOR THE PURPOSE OF PERMITTING ONLY. IT IS NOT A SURVEY AND NO RELIANCE MAY BE PLACED ON ITS ACCURACY. THE STRUCTURE SHOWN ON THIS PLOT PLAN IS PLACED ACCORDING TO THE INSTRUCTIONS GIVEN BY THE BUILDER. ALL DIMENSIONS AND SETBACKS SHOULD BE VERIFIED FOR COMPLIANCE WITH ZONING AND COVENANTS.

THIS MAP CAN NOT BE USED FOR RECORDATION OR ATTACHED TO A DEED TO BE RECORDED. THIS MAP IS NOT DRAWN IN ACCORDANCE WITH GS 47-30.

THE BOUNDARY AND LOT INFORMATION SHOWN ON THIS MAP IS TAKEN FROM THAT DOCUMENT DESCRIBED IN THE "REFERENCE" LINE SHOWN HEREON. THIS INFORMATION SHOULD BE CONFIRMED AS THE MOST CURRENT FOR THIS PROPERTY BEFORE ISSUANCE OF PERMITS OR COMMENCEMENT OF CONSTRUCTION. NO TITLE SEARCH WAS PERFORMED ON THIS PROPERTY BY THIS SURVEYOR.

HTE# 07-5-17816R

Harnett County Department of Public Health

Improvement Permit

26580

A building permit cannot be issued with only an Improvement Permit

ISSUED TO: REGENCY HOMES PROPERTY LOCATION: HOOPER RD
 SUBDIVISION: PERSIMMON HILLS LOT # 41
 NEW REPAIR EXPANSION
 Type of Structure: SFO (57'x44') Site Improvements required prior to Construction Authorization Issuance:
 Proposed Wastewater System Type: 25% REDUCTION SYSTEM
 Projected Daily Flow: 480 GPD
 Number of bedrooms: 4 Number of Occupants: 8 max
 Basement Yes No
 Pump Required: Yes No May be required based on final location and elevations of facilities
 Type of Water Supply: Community Public Well Distance from well 100 feet Permit valid for: Five years No expiration
 Permit conditions: _____

Authorized State Agent: [Signature] Date: 6/8/11 SEE ATTACHED SITE SKETCH
 The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This site is subject to revocation if the site plan, plat, or the intended use changes. The Improvement Permit shall not be affected by a change in ownership of the site. This permit is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.

Construction Authorization

(Required for Building Permit)

The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .1958, and .1959 are incorporated by references into this permit and shall be met. Systems shall be installed in accordance with the attached system layout.

ISSUED TO: REGENCY HOMES PROPERTY LOCATION: HOOPER RD
 SUBDIVISION: PERSIMMON HILLS LOT # 41
 Facility Type: SFO (57'x44') New Expansion Repair
 Basement? Yes No Basement Fixtures? Yes No
 Type of Wastewater System** 25% REDUCTION SYSTEM (Initial) Wastewater Flow: 480 GPD
 (See note below, if applicable) 25% REDUCTION SYSTEM (Repair)

Installation Requirements/Conditions
 Septic Tank Size 1000 gallons Exact length of each trench 300 feet Trench Spacing: 9 Feet on Center
 Pump Tank Size _____ gallons Trenches shall be installed on contour at a Soil Cover: 6-10 inches
 Maximum Trench Depth of: 18-22 inches (Maximum soil cover shall not exceed 36" above the trench bottom)
 (Trench bottoms shall be level to +/-1/4" in all directions)
 Pump Requirements: _____ ft. TDH vs. _____ GPM Aggregate Depth: _____ inches below pipe _____ inches above pipe _____ inches total
 Conditions: _____

WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM ANY PART OF SEPTIC SYSTEM OR REPAIR AREA.
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA.

**If applicable: I understand the system type specified is different from the type specified on the application. I accept the specifications of this permit.
 Owner/Legal Representative Signature: _____ Date: _____

This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Construction Authorization shall not be transferred when there is a change in ownership of the site. This Construction Authorization is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit. SEE ATTACHED SITE SKETCH

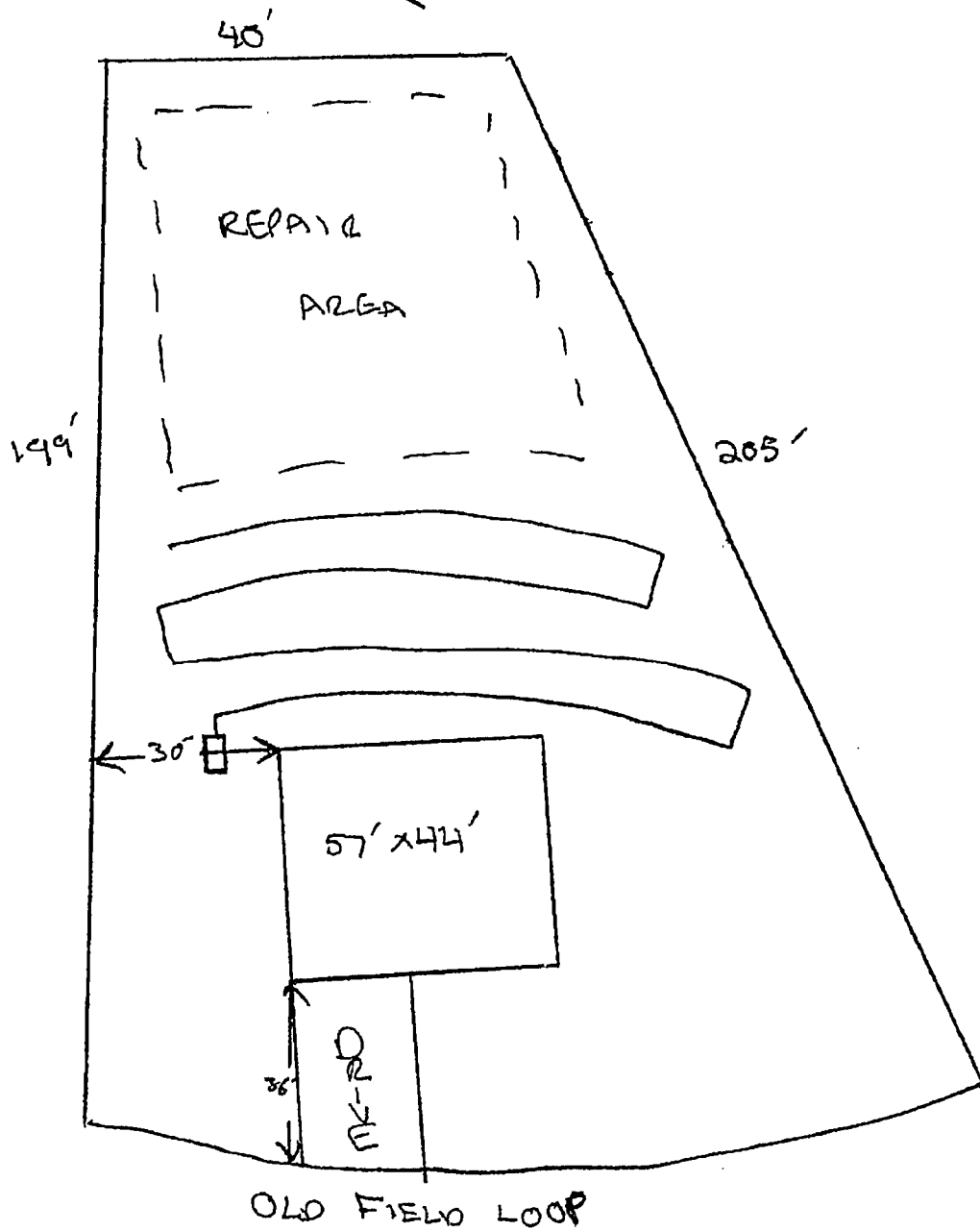
Authorized State Agent: [Signature] Date: 6/8/11
 Construction Authorization Expiration Date: 6/8/16

HTE# 07-5-17815R

Permit # 26580

Harnett County Department of Public Health Site Sketch

ISSUED TO: REGENT Homes PROPERTY LOCAYON: HOOPER RD
SUBDIVISION PERSIMMON HILLS LOT # 47
Authorized State Agent: [Signature] Date: 6/9/11



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 Ben Stout Construction Date 6/22/18
Site Address 139 Old Field Loop, Sanford, NC 27332 Phone (910) 779-0019
Directions to job site from Lillington _____

Subdivision Persimmon Hill Lot 41
Description of Proposed Work New Construction # of Bedrooms 4
Heated SF 2288 Unheated SF 721 Finished Bonus Room? Yes Crawl Space _____ Slab

General Contractor Information

Ben Stout Construction Telephone (910) 779-0019
Building Contractor's Company Name
409 Chicago Drive #103 Fayetteville NC 28303 Email Address residential@benstoutconstruction.com
Address 69633-U
License # _____

Electrical Contractor Information

Description of Work _____ Service Size _____ Amps T-Pole Yes _____ No _____
Buford Electric Telephone (910) 244-7989
Electrical Contractor's Company Name
Address _____ Email Address BufordElectric@aol.com
31424-U
License # _____

Mechanical/HVAC Contractor Information

Description of Work _____
Carolina Comfort Air Telephone (910) 339-2374
Mechanical Contractor's Company Name
703 N. Clinton Ave, Wynn, NC 28384 Email Address jc@carolinacomfortair.com
Address 29077
License # _____

Plumbing Contractor Information

Description of Work _____ # Baths _____
Way Plumbing Telephone (910) 624-7368
Plumbing Contractor's Company Name
1177 Watts Dairy Rd. St. Pauls, NC 28384 Email Address ipcinc08@aol.com
Address 16423P1
License # _____

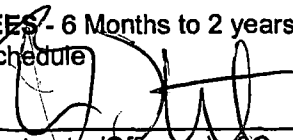
Insulation Contractor Information

Cumberland Insulation Telephone (910) 484-7118
Insulation Contractor's Company Name & Address

*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

7/2/18

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

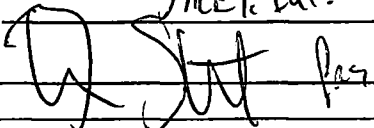
Has one (1) or more subcontractors(s) and has obtained workers compensation insurance to cover them

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

BSRES, Inc.


Sign w/Title

Date

7/2/18

Details: Appointment of Lien Agent

Entry #: 875552

Filed on: 06/26/2018

Initially filed by: VictorIastout#1

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@liensnc.com>)

Project Property

Lot 41 Persimmon Hill
139 Old Field Lp
Sanford, NC 27332
harnett 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

Benjamin Stout Real Estate Services, Inc.
PO Box 53798
Unit 103
Fayetteville, NC 28305
United States
Email: ben@benstoutconstruction.com
Phone: 910-779-0019

Date of First Furnishing

07/20/2018

[View Comments \(0\)](#)

Technical Support Hotline: (888) 690-7384