

Seate

Initial Application Date: 8/7/15

Application # 1550036832

CU# SCANNED

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: Bonita + John Richie Giovanni Mailing Address: 1440 Neighbors Rd  
City: Dunn State: NC Zip: \_\_\_\_\_ Contact No: 910-658-8120 Email: J.Pierce and Company D Gravel

APPLICANT: Jason Pierce Mailing Address: 104 Mary Michael Ln  
City: Benson State: NC Zip: 27504 Contact No: 919-534-6264 Email: \_\_\_\_\_

\*Please fill out applicant information if different than landowner

Call

CONTACT NAME APPLYING IN OFFICE: \_\_\_\_\_ Phone # \_\_\_\_\_

PROPERTY LOCATION: Subdivision: \_\_\_\_\_ Lot #: \_\_\_\_\_ Lot Size: .94  
State Road # 144 State Road Name: Neighbors Rd Map Book & Page: 2013, 18  
Parcel: 021528 0068 01 PIN: 1528-38-7842.000  
Zoning: RA-30 Flood Zone: - Watershed: - Deed Book & Page: 3149, 424 Power Company\*: \_\_\_\_\_

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

**PROPOSED USE:**

- SFD: (Size \_\_\_\_\_ x \_\_\_\_\_) # Bedrooms: \_\_\_\_\_ # Baths: \_\_\_\_\_ 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: (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 18 x 32 Use: In-ground pool 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: \_\_\_\_\_ Manufactured Homes: \_\_\_\_\_ Other (specify): Swimming Pool

**Required Residential Property Line Setbacks:**

	Minimum	Actual
Front	<u>35</u>	
Rear	<u>25</u>	<u>30</u>
Closest Side	<u>10</u>	<u>10</u>
Sidestreet/corner lot		
Nearest Building on same lot		

Comments: NEW Septic Permit  
will have to be done to  
accomadate pool  
\* Would like to meet on site \*

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:

Installing a pool - 210 to Hwy 50 to Hodges Rd - take left on Hodges Chapel then a right on neighbors Rd

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.

*Bonita Fisher*

Signature of Owner or Owner's Agent

8-7-15

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\*\*

Site Plan

Sanita

NAME: Sanita Richards

APPLICATION #: 36832

\*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 # 011447

- 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. Pool Drain
- 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 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.

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

8-11-14  
DATE

07 Neighbors Rd

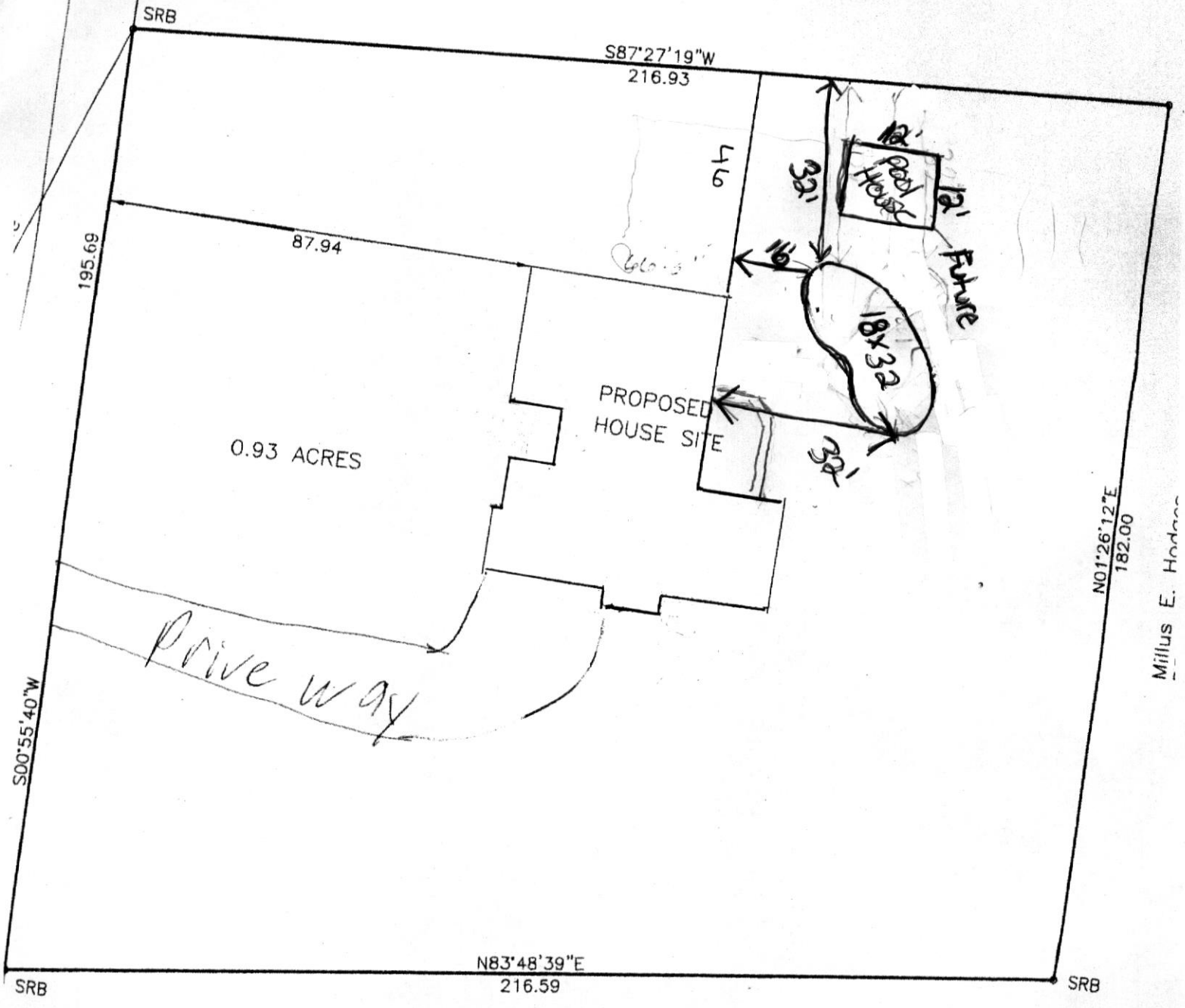
OS = T

NORTH FROM DEED

SITE PLAN APPROVAL  
DISTRICT RA-30 USE Pool

#BEDROOMS \_\_\_\_\_  
8-7-15 LB

Date \_\_\_\_\_  
Zoning Administrator  
Millus E. Hodges  
DB 412 PG 433



Millus E. Hodges

Millus E. Hodges  
DB 412 PG 433

BROKEN LINES NOT SURVEYED  
PIN # 1528-38-7468.000  
DEED REFERENCE

09/09/11

Application #

36832

Harnett County Central Permitting  
PO Box 65 Lillington NC 27548  
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 Bonita + John Richie Date 9/22/15  
Site Address 1440 Neighbors Rd Phone 919-534-6264  
Directions to job site from Lillington 200. 401/m. Street 127 ft R Old Coats Rd 2 miles  
R Hodges Chapel Rd. 13.7 R Neighbors Rd

Subdivision — Lot —  
Description of Proposed Work Pool Install # of Bedrooms —  
Heated SF — Unheated SF — Finished Bonus Room? — Crawl Space — Slab —

**General Contractor Information**

J. Pierce and Company Telephone 919-534-6264  
Building Contractor's Company Name 104 Mary Mitchell Ln Email Address J.pierceandcompany@gmail  
Address

License # —

**Electrical Contractor Information**

Description of Work SKYE Electric Service Size — Amps T-Pole — Yes  No   
Telephone 919-625-7054  
Electrical Contractor's Company Name 104 Mary Michael Ln Email Address —  
Address 19750  
License # —

**Mechanical/HVAC Contractor Information**

Description of Work —  
Mechanical Contractor's Company Name — Telephone —  
Address — Email Address —  
License # —

**Plumbing Contractor Information**

Description of Work — # Baths —  
Plumbing Contractor's Company Name — Telephone —  
Address — Email Address —  
License # —

**Insulation Contractor Information**

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

\_\_\_\_\_  
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 \_\_\_\_\_

Sign w/Title \_\_\_\_\_ Date \_\_\_\_\_

HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

LILLINGTON, NC 27546

For Inspections Call: (910) 893-7525 Fax: (910) 893-2793

Bldg Insp scheduled before 2pm available next business day.

Application Number . . . . .	15-50036832	Page	2
Property Address . . . . .	1446 NEIGHBORS RD	Date	9/22/15
PARCEL NUMBER . . . . .	02-1528- - -0068- -01-		
Application description . . . .	CP SWIMMING POOL		
Subdivision Name . . . . .			
Property Zoning . . . . .	RES/AGRI DIST - RA-30		

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
			Permit type . . . . . LAND USE PERMIT		
999	818	Z818	PZ*ZONING INSPECTION		___/___/___
			Permit type . . . . . NOTIFICATION PERMIT		
999	800	H800	ENVIR. HLTH. CONFIRMATION	JM AP	9/21/15
999	804	F804	FIRE MARSHAL PLAN REVIEW		___/___/___
999	806	P806	PLANNING REVIEW		___/___/___
999	802	B802	BLDG PLAN REVIEW		___/___/___
999	826	H826	ENVIR HLTH/SANI PLAN REVIEW		___/___/___
			Permit type . . . . . RESIDENTIAL ELECTRICAL PERMIT		
10	215	E215	R*ELEC. UND. POOL		___/___/___
20		H824	ENVIR. OPERATIONS PERMIT		___/___/___
30	131	R131	ONE TRADE FINAL		___/___/___
999	205	E205	R*ELEC UNDER SLAB		___/___/___

HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

LILLINGTON, NC 27546

For Inspections Call: (910) 893-7525 Fax: (910) 893-2793

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PARCEL NUMBER . . . . .	02-1528- - -0068- -01-		
Application type description	CP SWIMMING POOL		
Subdivision Name . . . . .			
Property Zoning . . . . .	RES/AGRI DIST - RA-30		

Owner

Contractor

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RITCHIE BONITA H  
 1382 NEIGHBORS RD  
 DUNN NC 28334

OWNER

Applicant

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PIERCE JASON  
 104 MERCY MICHAEL LN  
 BENSON NC 27504  
 (919) 534-6264

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Structure Information	000 000	18X32 IN-GROUND POOL	
Flood Zone . . . . .	FLOOD ZONE X		
Other struct info . . . . .	PROPOSED USE	POOL	
	SEPTIC - EXISTING?	NEW TANK	

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Permit . . . . .	LAND USE PERMIT		
Additional desc . . . . .			
Phone Access Code . . . . .	1109677		
Issue Date . . . . .	9/22/15	Valuation . . . . .	0
Expiration Date . . . . .	3/20/16		

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Permit . . . . .	NOTIFICATION PERMIT		
Additional desc . . . . .			
Phone Access Code . . . . .	1103035		
Issue Date . . . . .	8/11/15	Valuation . . . . .	0

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Permit . . . . .	RESIDENTIAL ELECTRICAL PERMIT		
Additional desc . . . . .	INGROUND POOL		
Phone Access Code . . . . .	1109669		
Issue Date . . . . .	9/22/15	Valuation . . . . .	0
Expiration Date . . . . .	9/21/16		

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Special Notes and Comments  
 T/S: 08/07/2015 03:44 PM LBENNETT --  
 210 TO HWY 50 TO HODGES RD - TAKE A  
 LEFT ON HODGES CHAPEL RD THEN A RIGHT  
 ON NEIGHBORS RD

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