

Initial Application Date: 1/24/18

Application # 18-50043154
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: Brandi & Ryenne Jackson Mailing Address: 177 English Springer Dr.
City: Angier State: NC Zip: 27501 Contact No: 919 306-8104 Email: ryenne720@gmail.com

APPLICANT: Cool Pools NC LLC Mailing Address: 2300 Old US 1 Hwy
City: Apex State: NC Zip: 27502 Contact No: 919 367-7277 Email: Cher@Coolpoolsnc.com
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Cher Levert Phone # 919 931-4524

PROPERTY LOCATION: Subdivision: Quail Glen Lot #: 10 Lot Size: 0.71

State Road # 177 State Road Name: English Springer Dr Map Book & Page: 2007, 10316

Parcel: 110002 0022 13 PIN: 0662-02-0790.000

Zoning: PA-30 Flood Zone: X Watershed: IV Deed Book & Page: 3400, 956 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/w 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/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 28 x 38) Use: inground swimming 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: Existing Manufactured Homes: _____ Other (specify): 1 proposed pool

Required Residential Property Line Setbacks:

Front	Minimum	Actual
Rear	<u>25'</u>	<u>105'</u>
Closest Side	<u>10'</u>	<u>25'</u>
Sidestreet/corner lot	_____	_____
Nearest Building on same lot	_____	_____

Comments: _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:

Front Street onto Main St. / NC-210, onto
 Harnett Central Rd, onto English Springer Dr

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

1-23-18
 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: Cool Pools NC LLC

APPLICATION #: 18-50043154

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 # (B2) 1/25/18 025874

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. _____
- 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)

1/23/18
DATE

Harnett County Central Permitting
PO Box 65 Lillington NC 27546
910 893 7525 Fax 910 893 2783 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 Buynne Jackson Date 1-23-18
Site Address 177 English Springer Dr. Angier Phone 919-306-8104
Directions to job site from Lillington Right on S. Main st. / NC-210
left on Harnett Central Rd, left English Springer Dr.

Subdivision Quail Glen Lot 10
Description of Proposed Work Inground Fiberglass Pool # of Bedrooms 4
Heated SF _____ Unheated SF _____ Finished Bonus Room? _____ Crawl Space _____ Slab _____

General Contractor Information

Cool Pools NC LLC Telephone 919 307-7277
Building Contractor's Company Name
2300 Old US 7 Hwy Email Address cher@coolpoolsnc.com
Address
59776
License # _____

Electrical Contractor Information

Description of Work Hook up Light + Pump Service Size _____ Amps T-Pole _____ Yes _____ No
Arc Electric Inc. Telephone 919-888-3500
Electrical Contractor's Company Name
P.O. Box 58355 Email Address Customercare@arcelectric.com
Address
29565-L
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 # _____

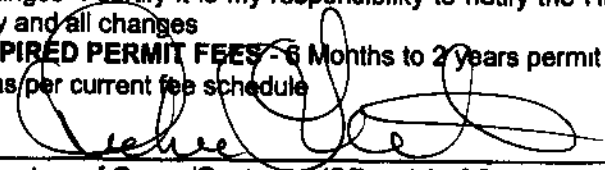
Insulation Contractor Information

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

Jan 23, 2018
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

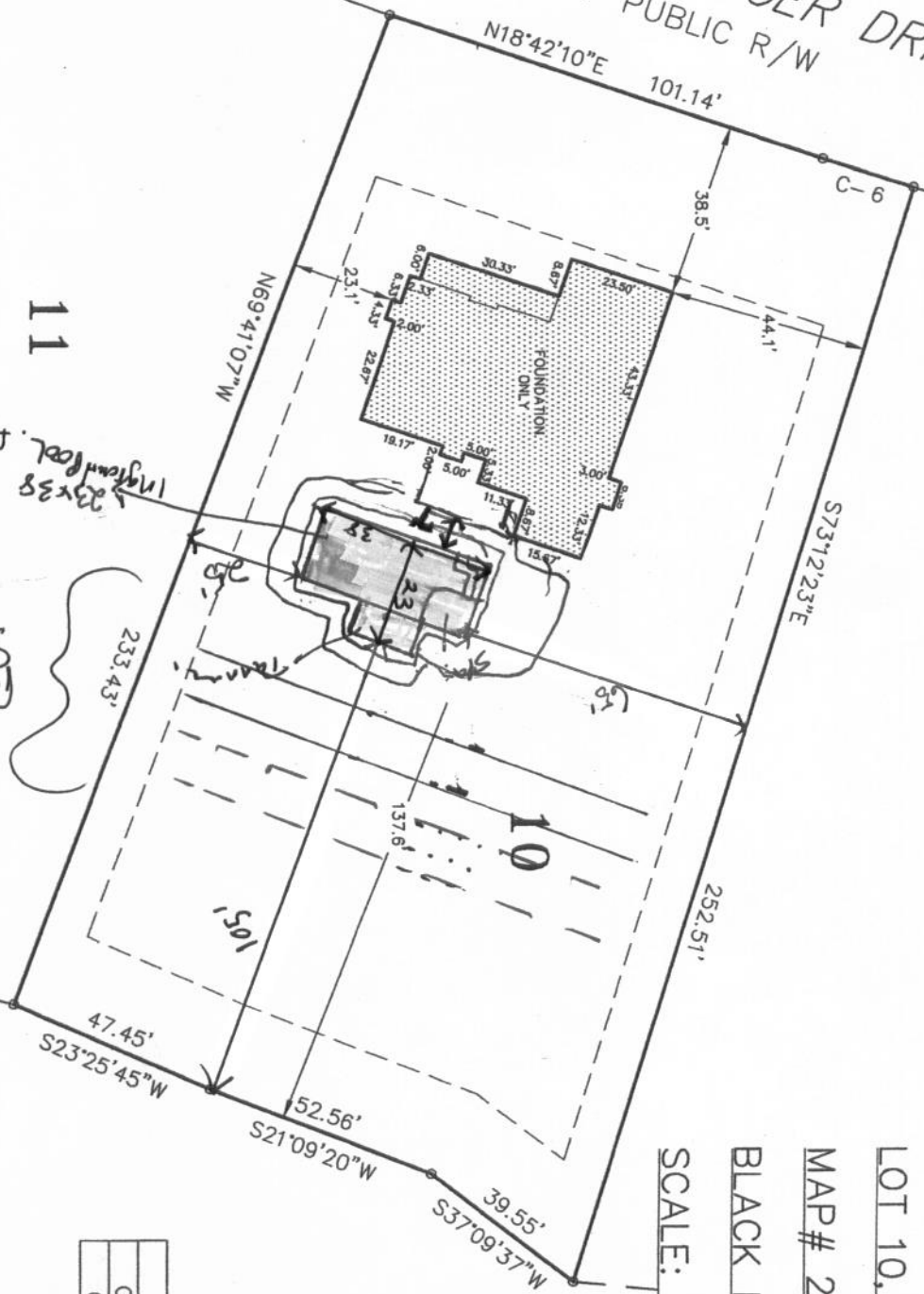
Has no more than two (2) employees and no subcontractors

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 Cool Pools NC LLC

Sign w/Title owner Date Jan 23, 2018

ENGLISH SPRINGER DRIVE
50' PUBLIC R/W



9

FOUNDATION SURVEY FOR:
B.R.C.

LOT 10, QUAIL GLEN SUBDIVISION,

MAP# 2007 PAGES 635-638

BLACK RIVER TOWNSHIP HARNETT COUNTY

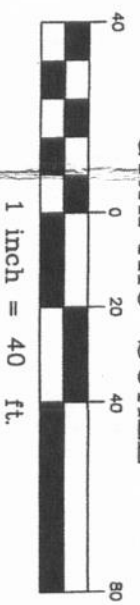
SCALE: 1" = 40'

ADDRESS:
ENGLISH SPRINGER DRIVE
ANGIER, N.C. 27501

AREA
31,042 sq. ft.
0.71 acres

- LEGEND
- EIP - EXISTING IRON PIPE
 - IPS - IRON PIPE SET
 - NIF - NO IRON FOUND
 - PK - PK NAIL
 - RRS - RAILROAD SPIKE

CURVE TABLE				
CURVE	LENGTH	RADIUS	BEARING	CHORD DIST.
C-6	21.20	636.60	N17°44'56"E	21.20



SITE PLAN APPROVAL
DISTRICT PA-30 USE inground
1/23/18
BEDROOMS 2

ASHWORTH
LAND SURVEYING

PO BOX 3881 FUGUY-VARINA, N.C. 27526 919-552-1857

I, Max E. Ashworth, Jr., certify that under my direction and supervision this map was prepared and drawn from an actual field survey. There are no encroachments shown on this map.

Witness my hand and seal this 1st day of APRIL, 2016



Max E. Ashworth, Jr.

L-3099

01/05/16