

Initial Application Date: 8/16/17

Application # 1750042064

CU# Storage

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: John K. Holder Mailing Address: 2186 Spring Hill Church Rd  
City: Lillington State: NC Zip: 27546 Contact No: \_\_\_\_\_ Email: \_\_\_\_\_

APPLICANT: Raul Angel Galarza Mailing Address: SS Tive Ln  
City: Cameron State: NC Zip: 28326 Contact No: \_\_\_\_\_ Email: \_\_\_\_\_

\*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: \_\_\_\_\_ Phone # 910 709 9507

PROPERTY LOCATION: Subdivision: Gery Fox Lot #: 1 Lot Size: 1.00AC  
State Road # SS State Road Name: Tire Lane Map Book & Page: 99, 450  
Parcel: 09 9575 D170 PIN: 9505-D7-68602-000  
Zoning: RA20P Flood Zone: X Watershed: NA Deed Book & Page: Cont. agreement 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 16x16 12x16) Use: Storage Covered Porch addition 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: 1 ext Dump Other (specify): proposed Storage covered porch addition

**Required Residential Property Line Setbacks:**

Front	Minimum	<u>35</u>	Actual	<u>60</u>
Rear		<u>25</u>		<u>78</u>
Closest Side		<u>10</u>		<u>82</u>
Sidestreet/corner lot		<u>20</u>		<u>82</u>
Nearest Building on same lot		<u>-</u>		<u>17</u>

Comments: already started  
Ref # 1750042065

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: NC 24-27 to 55. Time  
lane

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.

Raul Angel Galarrza  
Signature of Owner or Owner's Agent

08-16-2017  
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 APPROVAL

DISTRICT RA20R USE \_\_\_\_\_

#BEDROOMS \_\_\_\_\_

Date 8/16/17

Zoning Administrator

16x16 Storage

12x16 Covered Porch addition

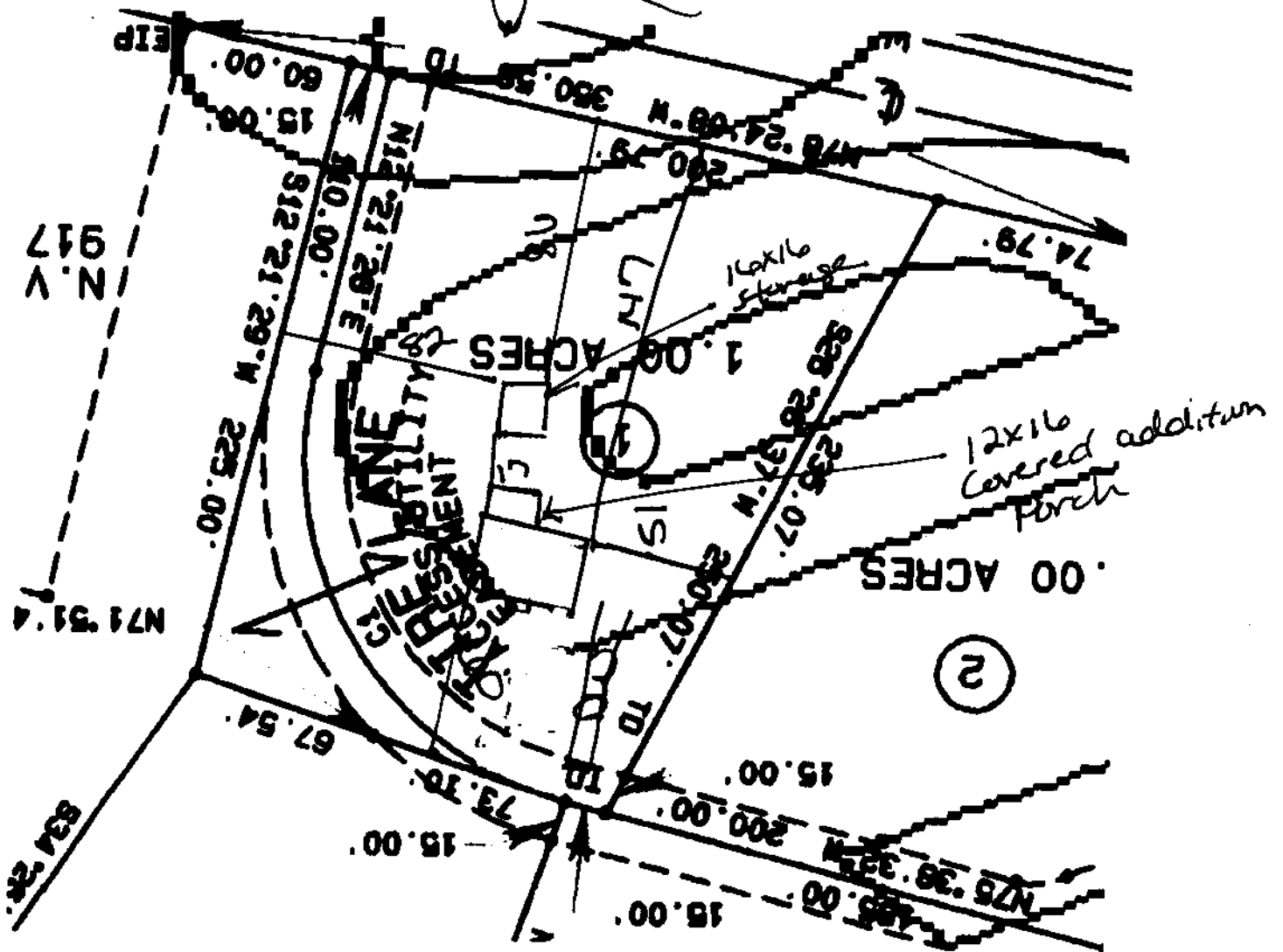
~~SITE PLAN APPROVAL~~

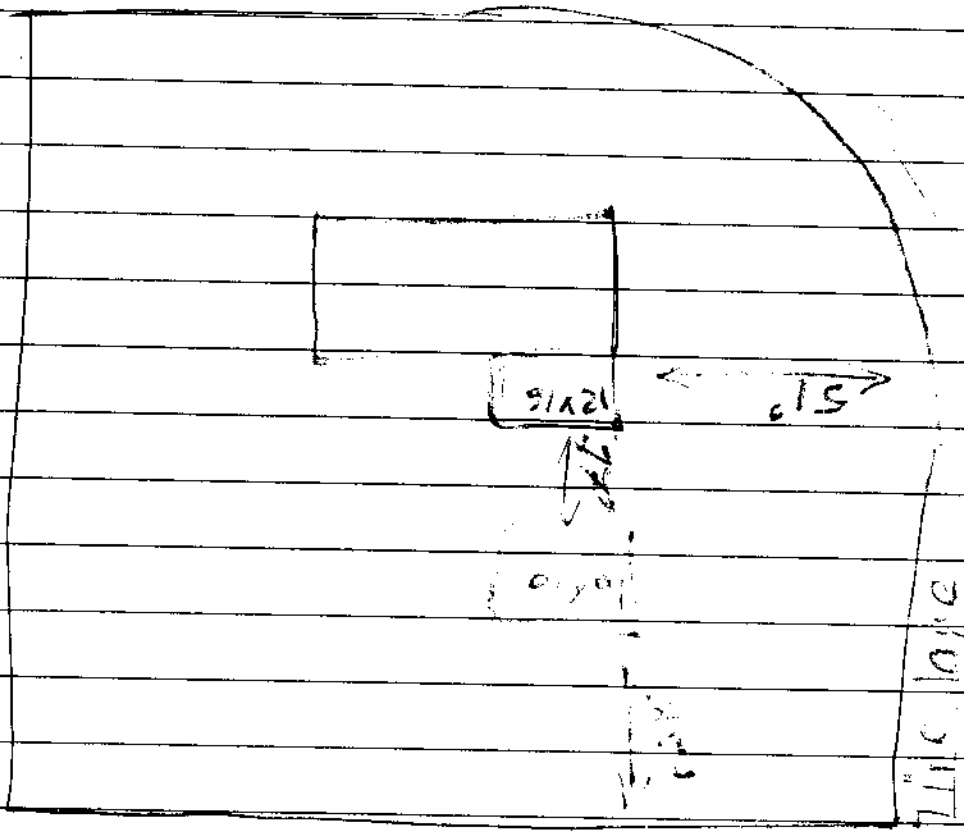
~~DISTRICT RA20R USE Residential~~

~~#BEDROOMS 3~~

~~Date 11/8/16~~

~~Zoning Administrator~~





HW / 24

NAME: \_\_\_\_\_

APPLICATION #: \_\_\_\_\_

**\*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 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 Cats 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.

Raul Angel Galarza  
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

08-16-2017  
DATE

Harnett County Central Permitting  
PO Box 65 Lillington NC 27546  
910 893 7825 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 \_\_\_\_\_ Date \_\_\_\_\_  
Site Address 55 Tine Ln Phone \_\_\_\_\_  
Directions to job site from Lillington \_\_\_\_\_

Subdivision \_\_\_\_\_ Lot 1  
Description of Proposed Work Storage / covered porch # of Bedrooms \_\_\_\_\_  
Heated SF \_\_\_\_\_ Unheated SF \_\_\_\_\_ Finished Bonus Room? \_\_\_\_\_ Crawl Space \_\_\_\_\_ Slab \_\_\_\_\_

**General Contractor Information**

Building Contractor's Company Name \_\_\_\_\_ Telephone \_\_\_\_\_  
Address \_\_\_\_\_ Email Address \_\_\_\_\_  
Owner  
License # \_\_\_\_\_

*Storage  
Porch*

**Electrical Contractor Information**

Description of Work \_\_\_\_\_ Service Size \_\_\_\_\_ Amps T-Pole  Yes  No  
Electrical Contractor's Company Name \_\_\_\_\_ Telephone \_\_\_\_\_  
Address \_\_\_\_\_ Email Address \_\_\_\_\_  
Owner  
License # \_\_\_\_\_

*Storage*

**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**

Owner  
Insulation Contractor's Company Name & Address \_\_\_\_\_ Telephone \_\_\_\_\_

*Storage*

\*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 Hamett 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 Hamett 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

Raul Angel Galarza  
Signature of Owner/Contractor/Officer(s) of Corporation

08-16-2017  
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 Raul Angel Galarza

Date 08-16-2017

**NORTH CAROLINA**

**HARNETT COUNTY**

**CONTRACT AND AGREEMENT**

**THIS CONTRACT AND AGREEMENT, Made and entered into this 19 day of June, 2017, by and Between John Kevin Holder party of the first part, hereinafter sometimes referred to as seller, and Raul Angel Galarza & Wife Gabriela Hernandez Galindo, 55 Tire Ln. Cameron, NC 28326, phone # 910-709-9507, parties of the second part, sometimes hereinafter referred to as buyers.**

**BEING all of Lot No. 1 as shown upon a plat entitled, "Survey of: Gray Fox Subdivision, dated September 1, 1999, prepared by Dowell G. Eakes, PLS, and recorded at Map No. 99-450, Harnett County Registry. Reference to said plat is hereby made for a greater certainty of description.**

**This contract and agreement is subject to the following conditions:**

- 1. The purchase price which the Buyer agree to pay for the above described property is in the sum of \$65000.00, with a down payment of \$6,500.00 which money shall be paid in the following manner:
  - (A) The sum of \$489.00 on or before the 5<sup>th</sup>. of each month and every month thereafter until the entire indebtedness is paid in full. There will be a \$5.00 dollar late fee per day for any payments received after the 5<sup>th</sup>. of each month. All unpaid balances shall bear interest at the rate of eight (8) percent per annum. Any extension or period of grace on the part of the sellers shall not be construed as a waiver of any rights herein expressed. It is agreed that the buyers may prepay any part of the debt without additional interest or prepayment penalty at any time.****
- 2. Taxes, Insurance, and assessments to be paid by Buyers of property beginning upon execution of this contract and agreement.**
- 3. The Seller hereby agrees that when the full purchase price has been paid as herein provided that it will at that time deliver or cause to be delivered to the Buyers a good and sufficient warranty deed duly signed and acknowledged, which shall warrant title to the hereinabove property to be free and clear from any and all encumbrances except taxes and assessments accrued in the year of execution and delivery of a deed.**
- 4. The Buyers agree to pay the said purchase price of said property as herein provided, and it is expressly agreed that the time of payment is of the essence of this contract, and that in the event of default of any of said installments provided herein, or breach of any of the terms and conditions herein stipulated, it shall be lawful for the Seller, if it sees fit, to declare this contract void, and cancel same, and to reenter upon the said premises ant any time after such default and take possession of said property,**



and all rights of Buyers to shall thereupon cease and terminate, and all sums paid by Buyers to Seller and all improvements on the property shall constitute liquidated damages for the breach of this contract, and/or fair rental value of said property.

IN WITNESS WHEREOF, the parties hereto have executed this contract and agreement, the day and year first above written.

By: John Kevin Holder (SEAL)  
John Kevin Holder

ATTEST: Lynnie R. Terry

Raul Angel Galarza (SEAL)  
Raul Angel Galarza

Gabriela Hernandez Galindo (SEAL)  
Gabriela Hernandez Galindo

Lynnie R. Terry  
Notary Public  
Harnett County, NC  
My Commission Expires 3/20/2020