

Initial Application Date: 9-18-14

Application # 1450034617

DRB _____ CU _____

COMMERCIAL

COUNTY OF HARNETT LAND USE APPLICATION

Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 Fax: (910) 893-2793 www.harnett.org/permits

LANDOWNER: RP ONE, LLC Mailing Address: PO Box 1166

City: FUQUAY-VARINA State: NC Zip: 27526 Home #: _____ Contact #: _____

APPLICANT: GLANDON FOREST EQUITY, LLC Mailing Address: 3900 MERTON DR SUITE 210

City: RALEIGH State: NC Zip: 27609 Office #: 919-459-2601 Contact #: 919-459-2601

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: _____ Phone #: _____

PROPERTY LOCATION: Subdivision: _____ Lot #: _____ Lot Size: _____

State Road #: NC HWY 42 State Road Name: _____ Map Book&Page: 2007 10273

Parcel: 050635 0153 PIN: 0635-89-9887

Zoning: IND Flood Zone: X Watershed: MA Deed Book&Page: 01492 / 0205 Power Company*: _____

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

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: HEAD NORTH ON S. MAIN ST. AND TURN LEFT ON MCKINNEY PARKWAY. TAKE 2ND LEFT ONTO US 401 N. TURN LEFT ON CHRISTALIGHT ROAD. TURN LEFT ON OAKRIDGE DUNCAN ROAD. TURN LEFT ON NC-42 WEST. PROPERTY IS AT THE INTERSECTION OF NC-42 AND PROGRESS DR.

PROPOSED USE:

- Multi-Family Dwelling No. Units _____ No. Bedrooms/Unit _____
- Business Sq. Ft. Retail Space 9,000 Type RETAIL # Employees: _____ Hours of Operation: _____
- Daycare # Preschoolers _____ # Afterschoolers _____ # Employees _____ Hours of Operation _____
- Industry Sq. Ft. _____ Type _____ # Employees: _____ Hours of Operation: _____
- Church Seating Capacity _____ # Bathrooms _____ Kitchen _____
- Accessory/Addition/Other (Size x) Use _____

Water Supply: County Well (No. dwellings _____) **MUST** have operable water before final
Sewage Supply: New Septic Tank (Complete Checklist) Existing Septic Tank (Complete Checklist) County Sewer

Comments: Dollar General - Duncan Area

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 [Signature] DEVELOPER RP ONE, LLC

Date 9/15/14

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

A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION

Please use Blue or Black Ink ONLY



Fire Marshal Division

P.O. Box 370
Lillington, NC 27546
910-893-7580

Application for Plan Review

Application # 14-50034617

Date Received: 1-28-15 Received By: [Signature]

Name of Project: Dollar General

Physical Address of Project: _____
_____ NC _____

Plans Submitted By: Cade Inc.

Project Phone: (919) 562-2115

Contact Person/Address: Lynelle Hinkle
120 F Weathers Street
Youngsville, NC 27596

Contact Phone: (919) 562 2115 () - .

Contractor's Name/Info: Cade, Inc.

Contractor's Phone: (919) 562 2115

- Plans that are submitted will be reviewed as quickly as possible with an average time of review between 7-10 working days.
- Status checks may be conducted on plan reviews by visiting the website <http://htweb.harnett.org/Click2GovBP/Index.jsp> or by calling the Harnett County Central Permitting Office (910-893-4759), or the Harnett County Fire Marshal's Office (910-893-7580).
- Approved plans must be picked up from the Central Permitting Office and all fees paid before any required inspections can be conducted.

*Each section below must be filled out by whoever is performing the work. Must be owner or licensed contractor. Address, company name & phone must match information on state license.

Application # 1450034617
Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits
COMMERCIAL

Application for Building and Trades Permit

Owner's Name: Glandon Forest Equity Date: _____

Site Address: _____ Phone: _____

Directions to job site from Lillington: _____
NC Hwy 42 at Progress Drive

Subdivision: _____ Lot: _____

Description of Proposed Work: New Dollar General Store

Heated SF _____ Unheated SF _____

General Contractor Information: Building Cost \$ _____

Cade Inc
Building Contractor's Company Name

919-562-2115
Telephone

120 F Weathers Street
Address Youngsville, NC 27596

Ithinkte@cadeinc.com
Email Address

Annelle Hinkle
Signature of Owner/Contractor/Officer(s) of Corporation

34809
License #

Electrical Contractor Information: Electrical Cost \$ 61,150

Description of Work wire new Dollar General Service Size: 500 Amps #T-Poles 1 - 100 Amps

Mosley Electric Inc
Electrical Contractor's Company Name

252-537-7540
Telephone

426 East 12th Street
Address Roanoke Rapids NC 27870

cmoseleyelectric@hotmail.com
Email Address

Chris S. Mosley
Signature of Owner/Contractor/Officer(s) of Corporation

20267-01
License #

Mechanical Contractor Information: Mechanical Cost \$ _____

Description of Work Install HVAC units # Units 4

Fagan Heating + Cooling Inc.
Mechanical Contractor's Company Name

919-556-1734
Telephone

6425 Zebulon Road Wake Forest NC 27587
Address bobbyfagan@hotmail.com

14928
License #

William Fagan
Signature of Owner/Contractor/Officer(s) of Corporation

Plumbing Contractor Information: Plumbing Cost \$ _____

Description of Work 2 Bathrooms # Baths 2

Kenwell Plumbing, Inc
Plumbing Contractor's Company Name

252-246-0384
Telephone

407 Mt Vernon Drive Wilson NC
Address

SABAGWELLMYGLNC.COM
Email Address

Stacy A. Bogmell
Signature of Owner/Contractor/Officer(s) of Corporation

16350
License #

Insulation Contractor Information

Cade Inc. 120 F Weathers St.
Insulation Contractor's Company Name & Address Youngsville, NC 27596

919-562-2115
Telephone

***NOTE: General Contractor must fill out and sign the second page of this application**

NAME: Dellor General

APPLICATION #: 1450034617

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.


{ 2 } Accepted { 3 } Innovative { 1 } 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?

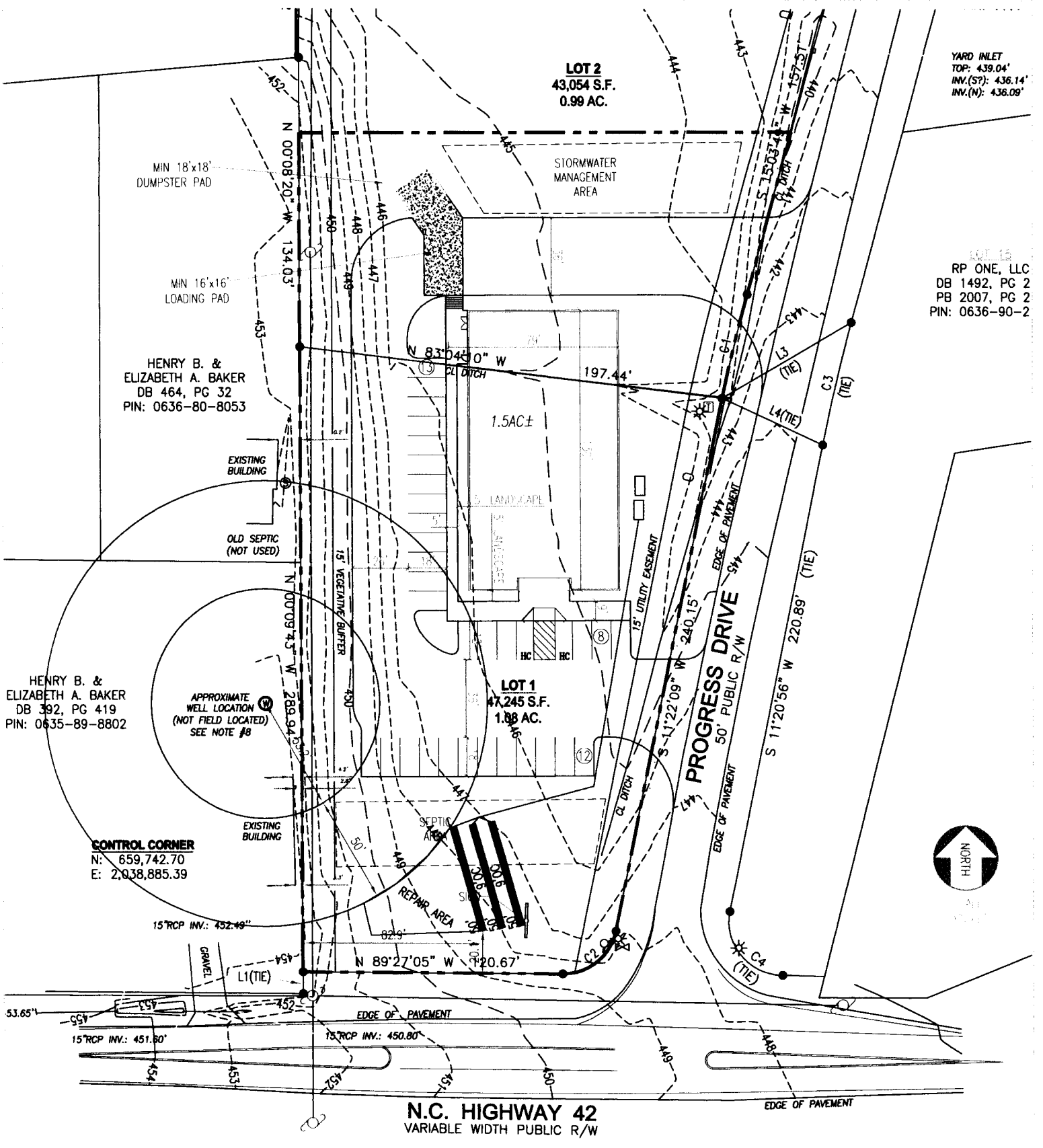
If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service.

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)

2-6-15
 DATE

HAYWOOD PITTMAN LSS
910-330-2784



YARD INLET
TOP: 439.04'
INV.(S?): 436.14'
INV.(N): 436.09'

LOT 15
RP ONE, LLC
DB 1492, PG 2
PB 2007, PG 2
PIN: 0636-90-2

MIN 18'x18'
DUMPSTER PAD

MIN 16'x16'
LOADING PAD

HENRY B. &
ELIZABETH A. BAKER
DB 464, PG 32
PIN: 0636-80-8053

HENRY B. &
ELIZABETH A. BAKER
DB 392, PG 419
PIN: 0635-89-8802

CONTROL CORNER
N: 659,742.70
E: 2,938,885.39

N.C. HIGHWAY 42
VARIABLE WIDTH PUBLIC R/W

09/09/11

Application #

1550035540

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 Charles H Wickman Date _____
Site Address 140 WICKMAN LN Phone 1919-478-4968
Directions to job site from Lillington 210 To Right 27 To Right 24-27
To WICKMAN LN ON LEFT 140 WICKMAN LN.

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

General Contractor Information

Building Contractor's Company Name _____ Telephone _____
Address _____ Email Address _____
License # Wickman

Electrical Contractor Information

Description of Work _____ Service Size _____ Amps T-Pole ___ Yes ___ No

Electrical Contractor's Company Name _____ Telephone _____
Address _____ Email Address _____
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

Charles H Wickman
Signature of Owner/Contractor/Officer(s) of Corporation

3-31-15
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 Charles H Wickman

Sign w/Title _____ Date 3-31-15

30x36
Detached Garage

Plan Box # Full

Date 3.30.15

Job Name Nickman

App # 1550035540 Valuation \$36720

Heated SQ Feet _____

Garage 1080

= 1080

Inspections for SFD/SFA

Crawl _____

Slab _____

Mono _____

Basement _____

Footing	Footing	Plum Under Slab	Footing
Foundation	Foundation	Ele. Under Slab	Foundation
Address	Address	Address	Waterproofing
Open Floor	Slab	Mono Slab	Plum Under slab
Rough In	Rough In	Rough In	Address
Insulation	Insulation	Insulation	Slab
Final	Final	Final	Open Floor
			Rough In
			Insulation
			Final

Foundation Survey _____

Envir. Health _____

Other _____

Additions / Other

Footing _____

Foundation _____

Slab _____

Mono _____

Open Floor _____

Rough In _____

Insulation _____

Final _____

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 15-50035540 Date 3/31/15
Property Address 140 WICKMAN LN
PARCEL NUMBER 09-9566- - -0062- -01-
Application type description CP GARAGE/CARPORT RESIDENTIAL DETACHED
Subdivision Name WEST HARNETT SANDS SUBD
Property Zoning PENDING

Owner	Contractor
-----	-----
WICKMAN CHARLES & HELEN	TARHEEL METAL STRUCTURES
25 WICKMAN LANE	8314 US HWY 220 BUS NE
CAMERON NC 28326	RANDLEMAN NC 27317
	(800) 931-2939

Applicant

WICKMAN CHARLES
140 WICKMAN LN
CAMERON NC 28326
(919) 478-4968

--- Structure Information 000 000 30X36 DET GARAGE
Flood Zone FLOOD ZONE X
Other struct info # BEDROOMS 4000000.00
PROPOSED USE DET GARAGE
SEPTIC - EXISTING? EXT TANK
WATER SUPPLY COUNTY

Permit RESIDENTIAL BUILDING PERMIT
Additional desc . . .
Phone Access Code . 1079557
Issue Date 3/31/15 Valuation 36720
Expiration Date . . 3/30/16

Permit LAND USE PERMIT
Additional desc . . .
Phone Access Code . 1079565
Issue Date 3/31/15 Valuation 0
Expiration Date . . 9/27/15

Special Notes and Comments
T/S: 02/23/2015 10:39 AM JBROCK ----
210 TO 27 RIGHT TO 24/27 R TO WICKMAN
LN L TO 140 WICKMAN LN
XX
PERMIT INCLUDES BLDG, ELEC, MECH, PLUMB
INSULATION AND LAND USE.

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 15-50035540

Page 2
Date 3/31/15

Special Notes and Comments

XX

Work must conform and comply with the
STATE BUILDING CODE and all other State
and local laws, ordinances & regulations

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	15-50035540	Page	3
Property Address	140 WICKMAN LN	Date	3/31/15
PARCEL NUMBER	09-9566- - -0062- -01-		
Application description . . .	CP GARAGE/CARPORT RESIDENTIAL DETACHED		
Subdivision Name	WEST HARNETT SANDS SUBD		
Property Zoning	PENDING		

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date

Permit type	RESIDENTIAL BUILDING PERMIT				
999	111	B111	R*BLDG SLAB INSP/TEMP SVC POLE	_____	___/___/___
999	131	R131	ONE TRADE FINAL	_____	___/___/___
999	125	R125	ONE TRADE ROUGH IN	_____	___/___/___
999	229	R229	TWO TRADE FINAL	_____	___/___/___
999	225	R225	TWO TRADE ROUGH IN	_____	___/___/___