

BLOM 1908-0008
WCOM 1908-0007
PCOM 1908-0002

Initial Application Date: 8-23-19

Application # _____
DRB # _____ CU # _____

COUNTY OF HARNETT LAND USE APPLICATION

Central Permitting (Physical) 108 E. Front Street, Lillington, NC 27546 (Mailing) PO Box 65 Lillington NC 27546 Phone: (910) 893-7525 ext # 2 Fax: (910) 893-2793 www.harnett.org/permits

LANDOWNER: Rickie Day Mailing Address: 264 Cottle Lake DR

City: Coats State: NC Zip: 27521 Contact # 910-890-4331 Email: R.

APPLICANT: Rickie Day Mailing Address: 264 Cottle Lake DR

City: Coats State: NC Zip: 27521 Contact # 910-890-4331 Email: Rdaydgs@aol

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: _____ Phone # _____

Address: _____ PIN: 0597-70-0097

Zoning: ERWIN Watershed: _____ Flood: _____ Deed Book Page: 2920 0967

PROPOSED USE:

Multi-Family Dwelling No. Units: _____ No. Bedrooms/Unit: _____

Business Sq. Ft. Retail Space: _____ Type: _____ # 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 36x40) Use: Horse barn (PARN)

Water Supply: County Existing Well New Well (# of dwellings using well _____) *Must have operable water before final (Need to Complete New Well Application at the same time as New Tank)

Sewage Supply: New Septic Tank Expansion Relocation Existing Septic Tank County Sewer (Complete Environmental Health Checklist on other side of application if Septic)

Comments: _____

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.

Rickie Day
Signature of Owner or Owner's Agent

8-23-19
Date

This application expires 6 months from the initial date if permits have not been issued
RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION

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



APPLICATION CONTINUES ON BACK

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

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)

Environmental Health New Septic System

- **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.**

Environmental Health Existing Tank Inspections

- 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**

MORE INFORMATION MAY BE REQUIRED TO COMPLETE ANY INSPECTION

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 {X} NO Does the site contain any Jurisdictional Wetlands?
 { } YES {X} NO Do you plan to have an irrigation system now or in the future?
 { } YES {X} NO Does or will the building contain any drains? Please explain. _____
 {X} YES { } NO Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
 { } YES {X} NO Is any wastewater going to be generated on the site other than domestic sewage?
 { } YES {X} NO Is the site subject to approval by any other Public Agency?
 { } YES {X} NO Are there any Easements or Right of Ways on this property?
 { } YES {X} 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!



Zoning Application & Permit

Planning & Inspections Department

Permit #

Rev Sep 2014

Each application should be submitted with an attached plot/site plan with the proposed use/structure showing lot shape, existing and proposed buildings, parking and loading areas, access drives and front, rear, and side yard dimensions.

Name of Applicant	Rickie Day	Property Owner	<input type="checkbox"/>
Home Address	Po Box 181	Home Address	<input type="checkbox"/>
City, State, Zip	Erwin, NC 28337	City, State, Zip	<input type="checkbox"/>
Telephone		Telephone	<input type="checkbox"/>
Email		Email	<input type="checkbox"/>

Address of Proposed Property	No E-911 ADU(PS)		
Parcel Identification Number(s) (PIN)	0597-70-0077.00	Estimated Project Cost	
What is the applicant requesting to build / what is the proposed use of the subject property? Be specific.	Farm Building		
Description of any proposed improvements to the building or property.			
What was the Previous Use of the subject property?	Vacant		
Does the Property Access DOT road?	NO		
Number of dwelling/structures on the property already	1	Property/Parcel size	44.65
Floodplain SFHA	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Watershed	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
		Wetlands	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
MUST circle one that applies to property	Existing/Proposed Septic System Or Existing/Proposed County/City Sewer		

Owner/Applicant Must Read and Sign

The undersigned property owner, or duly authorized agent/representative thereof certifies that this application and the forgoing answers, statements, and other information herewith submitted are in all respects true and correct to the best of their knowledge and belief. The undersigning party understands that any incorrect information submitted may result in the revocation of this application. Upon issuance of this permit, the undersigning party agrees to conform to all applicable town ordinances, zoning regulations, and the laws of the State of North Carolina regulating such work and to the specifications of plans herein submitted. The undersigning party authorizes the Town of Erwin to review this request and conduct a site inspection to ensure compliance to this application as approved.

Print Name	Rickie Day	Signature of Owner or Representative		Date	
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For Office Use

Zoning District	R10	Existing Nonconforming Uses or Features	
Front Yard Setback		Other Permits Required	Conditional Use <input type="checkbox"/> Building <input type="checkbox"/> Fire Marshal <input type="checkbox"/> Other <input type="checkbox"/>
Side Yard Setback		Requires Town Zoning Inspection(s)	Foundation <input type="checkbox"/> Prior to C. of O. <input type="checkbox"/>
Rear Yard Setback		Zoning Permit Status	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied
Comments		Fee Paid:	Date Paid:
			Staff Initials:

Signature of Town Representative:	Jim Bond	Date Approved/Denied:	8/19/19
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Farm Use Building, does not need building permits but will need trade permits. Obtain approval from Harnett County for septic tank
 A bona fide farm exemption



Town of Erwin
Zoning Application & Permit
 Planning & Inspections Department

Permit #

Rev Sep 2014

Each application should be submitted with an attached plot/site plan with the proposed use/structure showing lot shape, existing and proposed buildings, parking and loading areas, access drives and front, rear, and side yard dimensions.

Name of Applicant	Central Air	Property Owner	Rickie Day
Home Address	PO Box 175	Home Address	183 Moore St.
City, State, Zip	Four Oaks, NC 27524	City, State, Zip	Erwin NC 28339
Telephone	919 963 0001	Telephone	910-890-4331
Email	emma@centralairnc.com		

Address of Proposed Property		183 Moore St.	
Parcel Identification Number(s) (PIN)	6597-70-2639	Estimated Project Cost	
What is the applicant requesting to build / what is the proposed use of the subject property? Be specific.		HVAC Change out	
Description of any proposed improvements to the building or property		change out 2 1/2 T split system Heat Pump	
What was the Previous Use of the subject property?			
Does the Property Access DOT road?		NO	
Number of dwelling/structures on the property already		2	
Property/Parcel size			
Floodplain SFHA	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Watershed	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Wetlands		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
MUST circle one that applies to property			
Existing/Proposed Septic System		Or	
Existing/Proposed County/City Sewer			

Owner/Applicant Must Read and Sign

The undersigned property owner, or duly authorized agent/representative thereof certifies that this application and the forgoing answers, statements, and other information herewith submitted are in all respects true and correct to the best of their knowledge and belief. The undersigning party understands that any incorrect information submitted may result in the revocation of this application. Upon issuance of this permit, the undersigning party agrees to conform to all applicable town ordinances, zoning regulations, and the laws of the State of North Carolina regulating such work and to the specifications of plans herein submitted. The undersigning party authorizes the Town of Erwin to review this request and conduct a site inspection to ensure compliance to this application as approved.

Emma Smith	Gina Smith	8/12/19
Print Name	Signature of Owner or Representative	Date

For Office Use

Zoning District	RD-CO	Existing Nonconforming Uses or Features	
Front Yard Setback		Other Permits Required	Conditional Use <input type="checkbox"/> Building <input type="checkbox"/> Fire Marshal <input checked="" type="checkbox"/> Other <input type="checkbox"/>
Side Yard Setback		Requires Town Zoning Inspection(s) <input type="checkbox"/> Foundation <input type="checkbox"/> Prior to C. of O. <input type="checkbox"/>	
Rear Yard Setback		Zoning Permit Status	Approved <input checked="" type="checkbox"/> Denied <input type="checkbox"/>
		Fee Paid: <input type="checkbox"/>	Date Paid: <input type="checkbox"/> Staff Initials: <input type="checkbox"/>

Comments	HVAC Change out - no improvements to building
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Signature of Town Representative: Dawn Bonds	Date Approved/Denied: 8/12/19
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* Submitted application originally.



Town of Erwin
Zoning Application & Permit
 Planning & Inspections Department

Permit #

Rev Sep2014

Each application should be submitted with an attached plot/site plan with the proposed use/structure showing lot shape, existing and proposed buildings, parking and loading areas, access drives and front, rear, and side yard dimensions.

Name of Applicant	Central Air	Property Owner	Rickie Day
Home Address	PO Box 175	Home Address	183 Moore St.
City, State, Zip	Four Oaks, NC 27524	City, State, Zip	Erwin NC 28339
Telephone	919 963 0001	Telephone	910-890-4331
Email	emma@centralairnc.com	Email	

Address of Proposed Property	183 Moore St.		
Parcel Identification Number(s) (PIN)	0597-70-2097.00	Estimated Project Cost	
What is the applicant requesting to build / what is the proposed use of the subject property? Be specific.	HVAC change out, New Fan Building		
Description of any proposed improvements to the building or property	change out 2 1/2 T split system heat pump		
What was the Previous Use of the subject property?	vacant		
Does the Property Access DOT road?	no		
Number of dwelling/structures on the property already	2	Property/Parcel size	44.65
Floodplain SFHA	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Watershed	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Wetlands	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
MUST circle one that applies to property	Existing/Proposed <u>Septic System</u> Or Existing/Proposed County/City Sewer		

need permit

Owner/Applicant Must Read and Sign

The undersigned property owner, or duly authorized agent/representative thereof certifies that this application and the forgoing answers, statements, and other information herewith submitted are in all respects true and correct to the best of their knowledge and belief. The undersigning party understands that any incorrect information submitted may result in the revocation of this application. Upon issuance of this permit, the undersigning party agrees to conform to all applicable town ordinances, zoning regulations, and the laws of the State of North Carolina regulating such work and to the specifications of plans herein submitted. The undersigning party authorizes the Town of Erwin to review this request and conduct a site inspection to ensure compliance to this application as approved.

Print Name	Emma Smith	Signature of Owner or Representative	Gina Smith	Date	8/12/19
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IS EIT
 Full
 9/11/19

For Office Use

Zoning District	R-10
Front Yard Setback	
Side Yard Setback	
Rear Yard Setback	

Existing Nonconforming Uses or Features	
Other Permits Required	Conditional Use <input type="checkbox"/> Building <input type="checkbox"/> Fire Marshal <input checked="" type="checkbox"/> Other <input type="checkbox"/>
Requires Town Zoning Inspection(s)	Foundation <input type="checkbox"/> Prior to C. of O. <input type="checkbox"/>
Zoning Permit Status	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied
Fee Paid: <input checked="" type="checkbox"/> \$	Date Paid: _____ Staff Initials: _____

Comments: HVAC Change out - no improvements to building


Signature of Town Representative:	Drew Bond	Date Approved/Denied:	8/12/19
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Building on parcel w/ HC Tax PIN 0597-70-0097.00
 Tax Deferred
 Permits for electrical, and mechanical and plumbing are needed





Harnett GIS





NOT FOR LEGAL USE



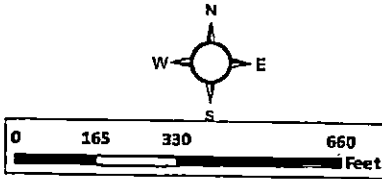

Harnett COUNTY
 NORTH CAROLINA
GIS/E-911 Addressing
 August 19, 2019

-  Recycle Center
-  Landfills
-  Surrounding County Boundaries
-  Federal Property

-  City Limits
-  Harnett County Boundary
-  Address Numbers
-  Airport

- Major Roads**
-  Interstate
-  NC
-  US
-  Roads

-  Mile_Markers
-  Railroad



1 inch = 376 feet

LANDOWNER: Rickin DA
MAILING ADDRESS: 264 Cott. Lake Dr
CITY: Cota STATE: NC ZIP: 27522 PHONE: 910 890 4331

APPLICATION DATE: 8/19/19 APPLICATION # BCOM1908-0008

APPLICANT: _____
MAILING ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____ PHONE: _____

PROPERTY LOCATION: SR# 174.6 SR NAME: Old Post place
PARCEL # 00.0597.0150.02 PIN # 0597.70.0097
ACREAGE: 44.05 FARM NUMBER: _____

VERIFICATION OF LAND USE PROGRAM BY TAX OFFICE: _____
SIGNATURE / CENTRAL PERMITTING TECHNICIAN: [Signature] DATE: 8.19.19

I (we) have read and understand the requirements to qualify for a farm exemption. I (we) hereby claim such exemption because I (we) operate a bona fide farm which has a valid farm serial number and is currently enrolled in Harnett County's Land Use Program. Within the Land Use Program I (we) participate in:
Agriculture (✓); Horticulture (); Forestry ()
NOTE: Check each category that applies.

AFFIRMATION: I (we) the undersigned declare under penalties of law that the information contained in this application has been examined by me (us) and to the best of my (our) knowledge and belief is (are) true and correct. Additionally, I (we) fully understand that falsification of information supplied by me (us) herein shall cause any permit issued relying on such information, to be automatically revoked and all work shall immediately cease.

Signature(s) of Owner(s): [Signature] Date: 8/19/19
Date: _____

FOR OFFICE USE ONLY
APPROVED BY: [Signature] DATE: 8.19.19 PERMIT# _____
DENIED BY: _____ DATE: _____
REASON FOR DENIAL: _____

VERIFICATION OF FARM EXEMPTION
COUNTY OF HARNETT LAND USE APPLICATION
Central Permitting, 102 E. Front Street, Lillington, NC 27546
Phone (910) 893-4759 Fax (910) 893-2793

INTRODUCTION

It is the spirit and intent of these regulations that only bona fide farms benefit from any exemptions granted hereby. Three requirements must be met in order to qualify. First, the land must meet the definition of a bona-fide farm if the site is within an area under the jurisdiction of the Harnett County Zoning Ordinance. Second, the Harnett County Farm Services Office, United States Department of Agriculture, must issue a valid farm serial number. Third, the land in question must be enrolled in the "Land Use Program" offered by the Harnett County Tax Department which allows for reduced taxes based on meeting the requirements of N.C.G.S. 105.277.3(a) (1) or (2); N.C.G.S. 105.277.2 (b) and N.C.G.S. 105.282.1 (a). Three categories, agriculture, horticulture and forestry, are allowed. Those categories are described below. To qualify, the land in question must meet one of those categories.

AGRICULTURE

Agriculture land consisting of one or more tracts, one of which consist of at least ten (10) acres that are in actual production and that for the three years preceding January 1 of the year for which benefit is claimed, have produced an average gross income of at least \$1,000.

HORTICULTURE

Horticulture land consisting of one (1) or more tracts, one (1) of which consists of at least five (5) acres that are in actual production and that for the three (3) years preceding January 1 of the year for which benefit is claimed have produced an average gross income of at least \$1,000.

FORESTRY

Forestry land consists of one or more tracts, one of which consists of at least twenty (20) acres that is in actual production and is under a sound management program. For purposes of this category, a sound management program means a program of production designed to obtain the greatest net return from the land consistent with its conservation and long-term improvement.

ADDITIONAL QUALIFICATION CRITERIA

Rent received shall not be considered as income for purposes of this exemption. Gross income must be from the sale of agricultural products produced from the land and any payments received from a governmental soil conservation or land retirement program. Any use of farm property for non-farm purposes is subject to all applicable ordinances of Harnett County.



Harnett
COUNTY
 NORTH CAROLINA

Development Services Department

www.harnett.org

PO Box 65
 108 E. Front St.
 Lillington, NC 27546

Ph: 910-893-7525
 Fax: 910-814-8278

BUILDING PERMIT EXEMPTION FOR AGRICULTURAL USE

Agricultural Building: A structure designed and constructed to house farm implements, hay, grain, poultry, livestock or other horticultural products. This structure shall not be a place of human habitation or a place of employment where agricultural products are processed, treated or packaged, nor shall it be a place used by the public. Definition: 2018 NC Building Code- Farm Building includes any building that is not open to the general public and is used primarily for a bona fide farm purpose. A bona fide farm purpose includes the production or storage of agricultural products or commodities including crops, fruits, vegetables, ornamental or flowering plants, dairy, timber, livestock, poultry and all other forms of agricultural products. Farm Buildings do not include such buildings used for purposes of education and research. Commentary: 2012 NC Administrative Code and Policies Property Information:

Parcel Number and Address: 06.0597.0150.02

Landowner Name: Rochelle Day

Landowner Mailing Address: 264 Cattle Lanes Dr Coats NC

Address for proposed building: _____

Is there a residence on this property? YES NO

Is a well or septic system existing or permitted for the parcel? YES NO

If yes, a permit from Environmental Health will be required.

Structure Information:

What will be stored in the building? Horses

What is the size of the building? 36 x 40

Is the building on a permanent foundation? YES NO

Is this pole type construction? YES NO

Will this building have electric, plumbing or heating/air installed? YES NO

Will the building be open to or used by the public? YES NO

If yes, in what capacity? _____

Will this building have a bathroom? YES NO

PLEASE READ THE FOLLOWING AND SIGN BELOW

I hereby declare that the proposed building described in this application, is in whole an "Agriculture Building" and will be used for no other purpose. I hereby acknowledge that any change in use of the building that does not meet the definition of "Agriculture Building" shall remove the agricultural exemption, thereby requiring me, the current landowner, or my successors, to obtain an engineer's letter on the existing structure to accompany a building permit application and fees. I understand that I will need to obtain permits for inspection of any electrical, plumbing or heating and air for this building even if it is exempt from building permit. I understand that the proposed building cannot contain sleeping quarters or bedrooms. I understand that the proposed building cannot be used for commercial use or a business. The public cannot obtain a sale, a good or service from this



Harnett
C O U N T Y
 NORTH CAROLINA

Development Services Department

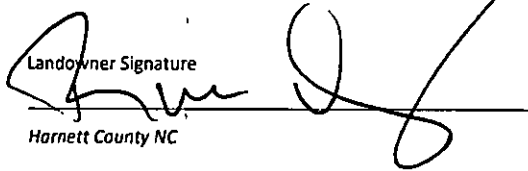
www.harnett.org

PO Box 65
 108 E. Front St.
 Lillington, NC 27546

Ph: 910-893-7525
 Fax: 910-814-8278

property related in any way to this building. There will not be a business sign posted on site. I acknowledge that I will not use this building for residential storage for residential items for example but not limited to: boats, vehicles, campers, residential lawnmowers, non-farm related tools of trade or hobbies.

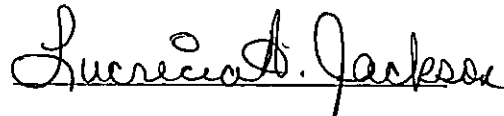
Printed Owner Name Rickie L. Day

Landowner Signature 
 Harnett County NC

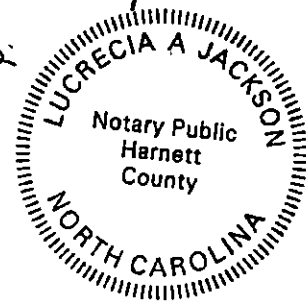
I, Lucrecia A. Jackson, a Notary Public for said county and state, certify that

Rickie L. Day appeared before me this day and acknowledge the due execution of the foregoing instrument.

Witness my hand and notary seal, this 16th day of August, 2019.



My Commission Expires: 10-25-2022





Property Description:

44.74ACS OF 55.10 E MILLSOUT OF TOWN

Harnett County GIS

PID: 060597 0150 2

PIN: 0597-70-0097.000

REID: 0050915

Subdivision:

Taxable Acreage: 44.740 AC ac

Caclulated Acreage: 44.65 ac

Account Number: 1203092000

Owners: DAY RICKIE L & DAY CHARLOTTE M

Owner Address : P O BOX 181 ERWIN, NC 28339-0000

Property Address: S 12TH ST NC

City, State, Zip: , NC,

Building Count: 0

Township Code: 06

Fire Tax District: Duke

Parcel Building Value: \$0

Parcel Outbuilding Value : \$0

Parcel Land Value : \$228030

Parcel Special Land Value : \$36610

Total Value : \$228030

Parcel Deferred Value : \$191420

Total Assessed Value : \$36610

Neighborhood: 00601

Actual Year Built:

TotalAcutalAreaHeated: Sq/Ft

Sale Month and Year: 11 / 2011

Sale Price: \$0

Deed Book & Page: 2930-0967

Deed Date: 2011/11/28

Plat Book & Page: -

Instrument Type: WD

Vacant or Improved:

QualifiedCode: E

Transfer or Split: T

Within 1mi of Agriculture District: Yes

Prior Building Value: \$0

Prior Outbuilding Value : \$0

Prior Land Value : \$244210

Prior Special Land Value : \$38550

Prior Deferred Value : \$205660

Prior Assessed Value : \$244210



Harnett County Central Permitting

Permit 1908-0002

PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 910-893-2793 - www.harnett.org/permits

**Certification of Work Performed By Owner/Contractor
(Individual Trade Application)**

Owner (s) of Structure: *Rickie Day* Phone: *910 890 4331*

Owner (s) Mailing Address: *264 Cottle Lake DR*

Land Owner Name (s): *Reli Day* Phone: _____

Construction or Site Address: _____

PIN # *0597-70-0097* Parcel # _____

Job Cost: _____ Description of Work to be done *Single Sig Toilet For
Furber*

Mechanical: New Unit With Ductwork New Unit Without Ductwork Gas Piping Other

Electrical*: 200 Amp <200 Amp Service Change Service Reconnect Other
* For Progress Energy customers we need the premise number

Plumbing: Water/Sewer Tap Number of Baths *1/2* Water Heater *WH*

Specific Directions to Job from Lillington: *back*

Subdivision: _____ Lot #: _____

I _____ will provide the _____ labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is _____, which entitles me to perform such work on the above structure legally. All work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations.

Reli Day owner
Contractor's Company Name
264 Cottle Lake DR
Address

910 890 4331
Telephone
RDay at mail mpa.com
Email Address

License # _____

Structure Owner / Contractor Signature: *[Signature]* Date: *8/15/19*

By signing this application you affirm that you have obtained permission from the above listed license holder to purchase permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or sell the listed property for 12 months after completion of the listed work.

***Company name, address, & phone must match information on license**

Harnett County Central Permitting

003711908.0007

PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 910-893-2793 - www.harnett.org/permits

**Certification of Work Performed By Owner/Contractor
(Individual Trade Application)**

Owner (s) of Structure: Rickie Day Phone: 910 890 4331

Owner (s) Mailing Address: 264 Cottle Lake DR Coals NC

Land Owner Name (s): Rickie Day Phone: _____

Construction or Site Address: _____

PIN # 0597-70-0087 Parcel # _____

Job Cost: _____ Description of Work to be done _____

Mechanical: New Unit With Ductwork ___ New Unit Without Ductwork ___ Gas Piping ___ Other ___

Electrical*: 200 Amp <200 Amp ___ Service Change ___ Service Reconnect ___ Other ___
* For Progress Energy customers we need the premise number

Plumbing: Water/Sewer Tap ___ Number of Baths ___ Water Heater ___

Specific Directions to Job from Lillington:

Subdivision: _____ Lot #: _____

I _____ will provide the _____ labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is _____, which entitles me to perform such work on the above structure legally. All work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations.

Rickie Day
Contractor's Company Name

910 890 4331
Telephone

264 Cottle Lake DR
Address

RDAYDAS@aol.com
Email Address

License # _____

Structure Owner / Contractor Signature: [Signature] Date: 8/5/19

By signing this application you affirm that you have obtained permission from the above listed license holder to purchase permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or sell the listed property for 12 months after completion of the listed work.

***Company name, address, & phone must match information on license**



BL0M1908.0006

Ricky Day - 890-4331

① Farm Affidavit -

② Proof of Farm Exemption from General Statute -

③ Zoning Permit from town of Erwin, even if farm exempt, so they are aware of the building

④ Elec. : Mech Permit.

⑤ NO Plumbing Permit unless site plan : EH permit is done.



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