



550 gallons
2 tanks

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

Per Rodney
only charge
100⁰⁰ and
process one
form for
installation
and removal

100⁰⁰

Application for Tank Removal or Abandonment

Application # 1850043587 Date: 3/19/18

Applicant DIYOTS, INC.

Billing Address 42 INDIAN TRAIL

City SANFORD State NC Zip 27332

Phone # 919-775-8634

Location of Tank(s) 2955 BUFFALO LAKE ROAD

Removal/Abandonment Date ___/___/___

Contractor _____ Phone # _____

This application must be completed and returned to Central the issuance of the permit. Please allow (7-10) working days for inspection will be conducted to ensure compliance with applicat shall be paid before permits will be issued. The following items submitted with this application:

- 1 Copy of North Carolina Department of Environment, Health and Natural Resources GW/UST-3 Notice of Closure Intent.
- 2 Number of tanks to be removed including the capacity and
- 3 Information detailing the proposed disposition of the tank

It is the applicants responsibility to ensure that conditions are in accordance with applicable Federal, State and Local regulations.

Carol A. Hall
Applicant Signature

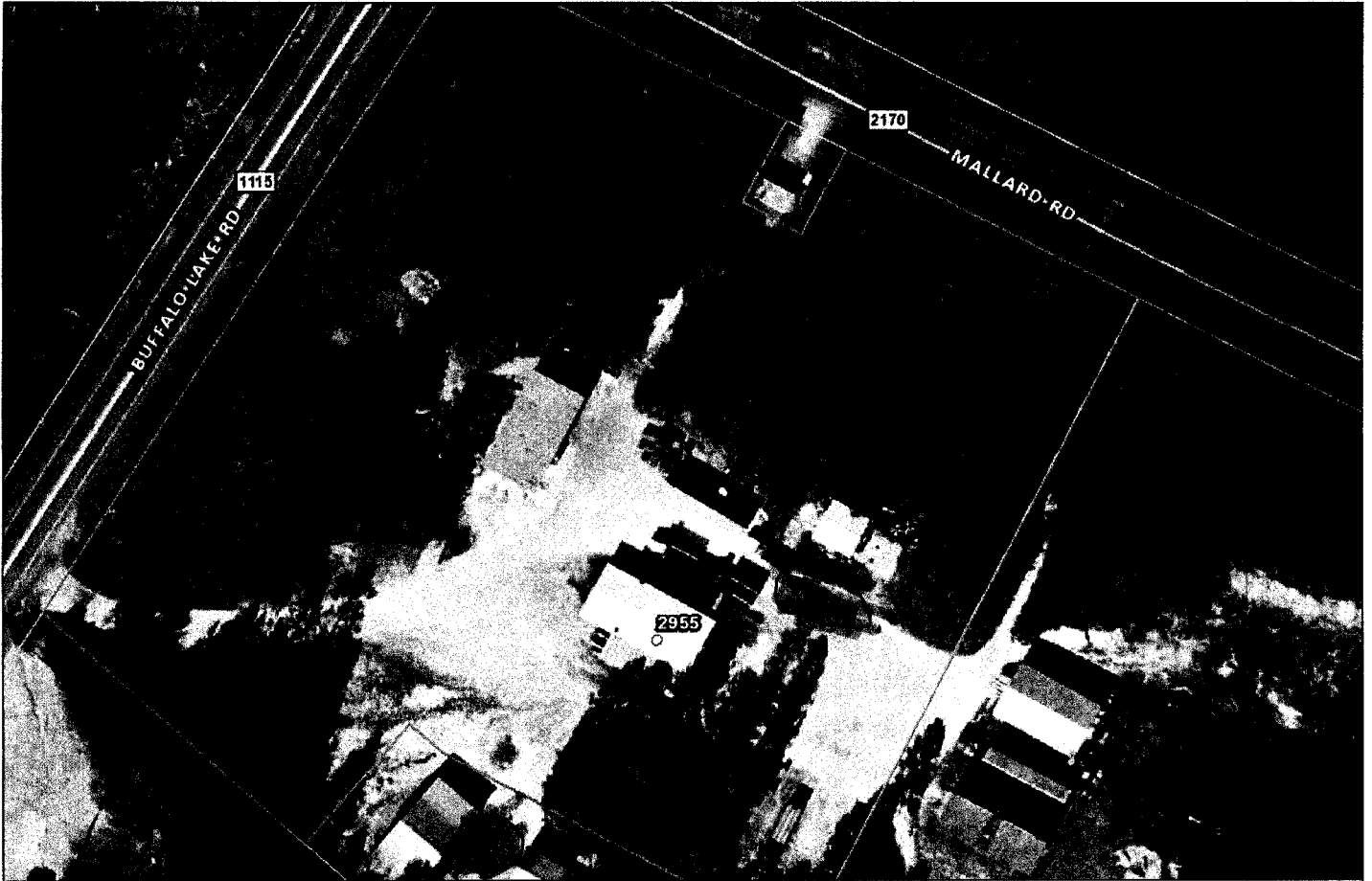
3/19/18
Date

9580.41.0938
03.9585.01.0100.10

Per FM -
they will only
pay 100⁰⁰ for
this job.

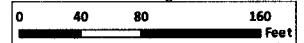
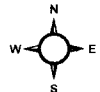
Harnett GIS

NOT FOR LEGAL USE



GIS/E-911 Addressing
March 19, 2018

- | | | | |
|-------------------------------|--------------------|--------------|---------|
| Recycle Center | City Limits | NC | Parcels |
| Landfills | Address Numbers | US | |
| Surrounding County Boundaries | Airport | Roads | |
| Federal Property | Major Roads | Mile_Markers | |
| | Interstate | Railroad | |



1 inch = 94 feet

Application # 43587

Harnett County Central Permitting
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: _____ Phone: _____

Owner (s) Mailing Address: _____

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: _____

PIN # _____ Parcel # _____

Job Cost: \$ 800 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 William Weston will provide the Electrical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 12002-u, 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.

Weston & Pace Electric Inc
Contractor's Company Name

919489-3946
Telephone

614 Westfield Sanford NC 27332
Address

Email Address

12002-u
License #

Structure Owner / Contractor Signature: [Signature] Date: March 28 2018

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**

DIVOTS, INC.

- Premium Divot Repair Mix -

Cell (919) 775-8634
Fax (919) 499-0492

42 Indian Trail
Sanford, NC 27332
Toll Free 1-877-604-0785

divots@windstream.net
www.divotssand.com

ABOVE GROUND, SELF CONTAINED,
DOUBLE WALL FUEL TANKS

GAS TANK - 674364

DIESEL TANK - 674363

VENTING CAPACITY

NOT LESS THAN 80,000 CUBIC FEET
PER HOUR (ON BOTH TANKS)

550 GALLONS TANKS - ALMOST EMPTY

HARNETT COUNTY CASH RECEIPTS

*** CUSTOMER RECEIPT ***

Oper: JBROCK Type: CP Drawer: 1
Date: 4/04/18 52 Receipt no: 307875

Year	Number	Amount
2018	50043507	
2627 BUFFALO LAKE RD		
SANFORD, NC 27330		
B5	BP - FIRE MARSHAL FEES	\$100.00

FM FEES		
2018	50043507	
2627 BUFFALO LAKE RD		
SANFORD, NC 27330		
B1	BP - PERMIT FEES	\$160.00

COMM ELE

CAROL HALL

Tender detail	
CA CASH PAYMENT	\$260.00
Total tendered	\$260.00
Total payment	\$260.00

Trans date: 4/04/18 Time: 13:41:17

** THANK YOU FOR YOUR PAYMENT **



SCANNED



Emergency Services Department

www.harnett.org

*File entered
4-5-18*

Plan Review, Inspection, and Permit Fees

Application Number : 1850043587

\$200.00	<input type="checkbox"/>	Explosive Material (90 Days)	\$	-
\$100.00	<input type="checkbox"/>	Explosive Materials (72 Hours)	\$	-
\$100.00	<input type="checkbox"/>	Fireworks Public Display	\$	-
\$50.00	<input type="checkbox"/>	Final Inspection	\$	-
\$35.00 + \$2.00 per device	<input type="checkbox"/>	Fire Alarm Testing	\$	-
\$35.00 + \$2.00 per nozzle	<input type="checkbox"/>	Fixed Fire Suppression	\$	-
\$75.00	<input type="checkbox"/>	Insecticide Fog/Fumigation	\$	-
\$100.00	<input type="checkbox"/>	Pipe Test/UST/AGST	\$	-
\$50.00	<input type="checkbox"/>	Plans up to 5000 sq ft	\$	-
\$100.00	<input type="checkbox"/>	Plans 5001 sq ft to 10,000 sq ft	\$	-
\$150.00	<input type="checkbox"/>	Plans 10,001 sq ft to 25,000 sq ft	\$	-
\$250.00	<input type="checkbox"/>	Plans 25,001 sq ft and over	\$	-
\$35.00 + 2.00 per head	<input type="checkbox"/>	Sprinkler Certification Test	\$	-
\$50.00	<input type="checkbox"/>	Standpipe Testing	\$	-
\$50.00	<input type="checkbox"/>	Special Assembly (ie. amusement buildings, carnivals, fairs)	\$	-
\$75.00	<input type="checkbox"/>	Tents/Canopies/Air Supported Structure	\$	-
\$100.00	<input checked="" type="checkbox"/>	Tank Installation (charge for each tank)	\$	100.00
\$100.00	<input type="checkbox"/>	Tank Removal (charge for each tank)	\$	-
		Total Devices/Heads	\$	-
		Total Cost	\$	100.00

Code Enforcement Official

Rodney Daniels

4/4/2018



www.harnett.org

Emergency Services Department

Fire Marshal Division



April 4, 2018

Divors, Inc.

42 Indian Trail

Sanford, NC 27332

Re: 2955 Buffalo Lake Road
Sanford, NC 27330

Application Number 18-50043587

To whom it may concern:

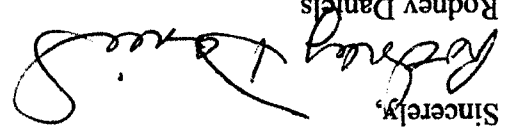
Thank you for submitting the plans for the installation of the above ground flammable liquid storage tank(s) relocation. The plans have been carefully reviewed by a qualified code enforcement official to examine for compliance with the North Carolina Fire Prevention Code and all other fire protection regulatory documents. There are some items that were found during the plan review process that need to be addressed before a permit to install the tanks can be granted. These items are outlined and described below.

After permit is issued and before final approval:

- Installation shall be in accordance with all North Carolina Fire prevention codes and NFPA 30 standards.
- A final fire inspection is required at the end of the project.
- Call (910) 893-0743 to schedule all fire inspections.

Thank you again for submitting the plans for above ground storage tank relocation. Please review the plans and adhere to any notes and alterations that were made in addition to the original drawings. These remarks are for the plans that were submitted and its original intent. These remarks do not apply if the original intent changes or what was submitted on the above date changes. If you have any questions, please do not hesitate to call this office.

Again, thank you and we look forward to working with you during the construction period!

Sincerely,

Rodney Daniels
Chief Deputy Fire Marshal

HCFM

Office of the Fire Marshal
P.O. Box 370
Lillington, N.C. 27546
(910)-893-7580

Permit Certificate

Business Name: CAROLINA LAKES GOLF COURSE MAINT BLG

Address: 2955 BUFFALO LAKE RD
SANFORD, NC 27330

Phone: OFFC 910-892-7910

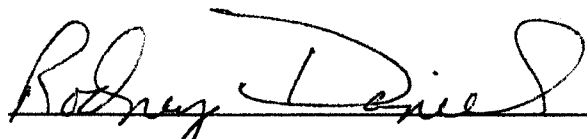
The following permit has been issued:

Permit No. 1850043587

Type: 038 Above Ground Tank Installation

Issued Date: 04/04/2018
Effective Date: 04/04/2018
Expiration Date: 10/04/2018

This permit certificate has been issued for construction / operational purposes located at the above business location. This permit has been issued and will be enforced in accordance with section 105 of the N.C. State Fire Prevention Code. Please contact our office for any further questions regarding this permit.


Inspector: Rodney Keith Daniels

4/4/18
Date

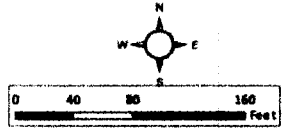
Harnett GIS

NOT FOR LEGAL USE



GIS/E-911 Addressing
March 19, 2018

- | | | | |
|-------------------------------|-----------------|--------------|---------|
| Recycle Center | City Limits | NC | Parcels |
| Landfills | Address Numbers | US | |
| Surrounding County Boundaries | Airport | Roads | |
| Federal Property | Major Roads | Mile_Markers | |
| | Interstate | Railroad | |



1 inch = 94 feet

UST-3 Notice of Intent: UST Permanent Closure or Change-in-Service

Return completed form to:
The DWM Regional Office located in the area where the facility is located. Send a copy to the Central Office in Raleigh so that the status of the tank may be changed to "PERMANENTLY CLOSED" and your tank fee account can be closed out.
SEE MAP ON THE BACK OF THIS FORM FOR THE CENTRAL AND REGIONAL OFFICE ADDRESSES.
I.D.# _____ Date Received _____
STATE USE ONLY

INSTRUCTIONS (READ THIS FIRST)

Complete and return at least thirty (30) days prior to closure or change-in-service activities. If a Professional Engineer (P.E.) or a Licensed Geologist (L.G.) provides supervision for closure or change-in-service site assessment activities and signs and seals all closure reports then at least a five (5) working days notice is acceptable.

Completed UST closure or change-in-service site assessment reports, along with a copy of the UST-2 form, should be submitted to the appropriate Division of Waste Management (DWM) Regional Office within thirty (30) days following closure activities. The UST-2 form should also be submitted to the Central Office in Raleigh so that the status of the tanks may be changed to permanently closed and your tank fee account can be closed out.

UST closure and change-in-service site assessments must be completed in accordance with the latest version of the Guidelines for Site Checks, Tank Closure and Initial Response. The guidelines can be obtained at <http://www.wastenclosure.org/web/wmv/>. Note: To close tanks in place you must obtain prior approval from the DWM Regional office located in the region where the facility is located.

You must make sure that USTs removed from your property are disposed of properly. When choosing a closure contractor, ask where the tank(s) will be taken for disposal. Usually, USTs are cleaned and cut up for scrap metal. This is dangerous work and must be performed by a qualified company. Tanks disposed of illegally in fields or other dumpsites can leak petroleum products and sludge into the environment. If your tanks are disposed of improperly, you could be held responsible for the cleanup of any environmental damage that occurs.

I. OWNERSHIP OF TANKS

Owner Name (Corporation, Individual, Public Agency, or Other Entity) FORE-Z VEE GOLF, INC	Street Address GREEN TREE ASSOCIATES, LLC	City County	Zip Code	State	Phone Number
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II. LOCATION

Facility Name or Company GREEN TREE ASSOCIATES, LLC	Facility ID # (if known)	Street Address County	City	Zip Code	State	County	City	Zip Code	Phone Number
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III. CONTACT PERSONNEL

Name:	Company Name:	Job Title:	Phone Number:
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IV. TANK REMOVAL, CLOSURE IN PLACE, CHANGE-IN-SERVICE

- Contact local fire marshal.
- Plan entire closure event.
- Conduct Site Soil Assessment.
- If removing tanks or closing in place, refer to API Publication 2015 Cleaning Petroleum Storage Tanks and 1604 Removal and Disposal of Used Underground Petroleum Storage Tanks.
- Provide a sketch locating piping, tanks and soil sampling locations.
- Submit a closure report in the format of UST-12 (including the form UST-2) within thirty (30) days following the site investigation.
- If a release from the tanks has occurred, the site assessment portion of the tank closure must be conducted under the supervision of Storage Tanks.

V. WORK TO BE PERFORMED BY

Contractor Name: _____ Contractor Company Name: _____

Address: _____ State: _____ Zip Code: _____ Phone No: _____

Primary Consultant Name: _____ Primary Consultant Company Name: _____ Consultant Phone No: _____

VI. TANKS SCHEDULED FOR CLOSURE OR CHANGE-IN-SERVICE

Tank ID No.	Size in Gallons	Last Contents	Proposed Activity		
			Closure	Abandonment in Place	Change-in-Service
674363	550		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
674364	550		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

VII. OWNER OR OWNER'S AUTHORIZED REPRESENTATIVE

* Prior written approval to abandon a tank in place must be received from a DWM Regional Office.

I understand that I can be held responsible for environmental damage resulting from the improper disposal of my USTs.

Print name and official title: _____

Signature: *Carla O. Stull*

Date Signed: *3/19/18*

SCHEDULED REMOVAL DATE _____

Notify your DWM Regional Office 48 hours before this date if scheduled removal date changes _____



Environmental Quality

North Carolina Department of Environmental Quality

Division of Waste Management

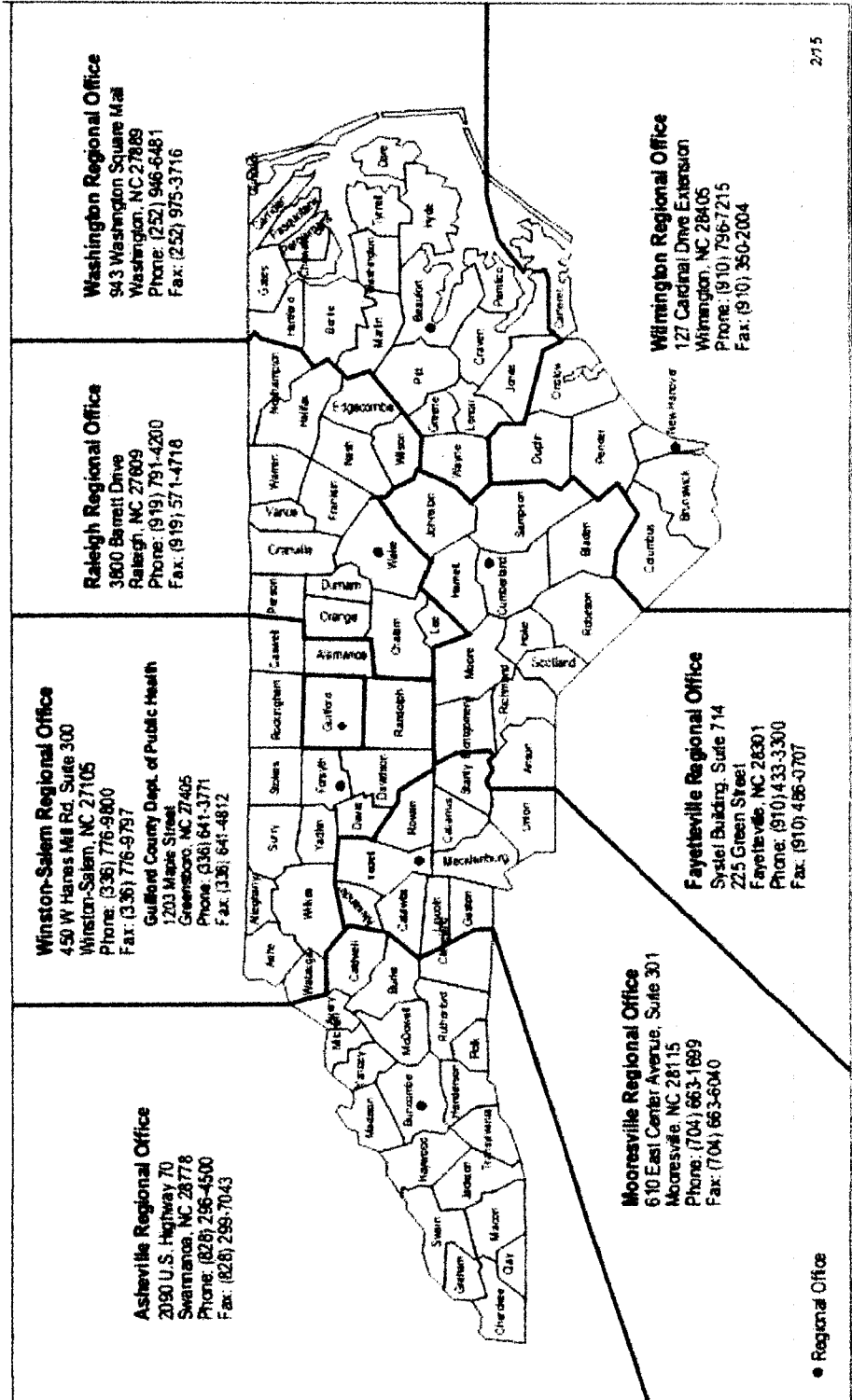
UST Section Central Office

1646 Mail Service Center

Raleigh, NC 27699-1646

(919) 707-8171 FAX (919) 715-1117

<http://www.wastenoenc.org/web/wm/>



Green Tee Associates, Inc.

Carolina Lakes Golf Course

53 Carolina Lakes Road

Sanford, NC 27332-8412

(919) 499-5421

(919) 499-1088 Fax

March 21, 2018

To Whom It May Concern:

I, Jean Hubbard, President of Green Tee Associates, Inc, hereby grant Divots, Inc. the permission to move the gas tanks currently located on their property to a new location designated on our property adjacent to the Carolina Lakes Golf Course.

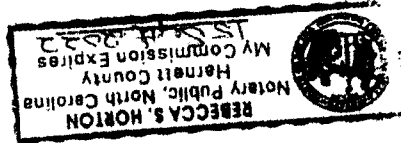
Please contact me if you require anything further.

Sincerely,

Jean A. Hubbard
Jean A. Hubbard, President
3-22-2018

Rebecca S. Horton
3/22/18

Notary & Date



DIVOTS, INC.

- Premium Divot Repair Mix -

Cell (919) 775-8634
Fax (919) 499-0492

42 Indian Trail
Sanford, NC 27332
Toll Free 1-877-604-0785

divots@windstream.net
www.divotssand.com

ABOVE GROUND, SELF CONTAINED,
DOUBLE WALL FUEL TANKS

GAS TANK - 674364

DIESEL TANK - 674363

VENTING CAPACITY

NOT LESS THAN 80,000 CUBIC FEET
PER HOUR (ON BOTH TANKS)

550 GALLONS TANKS - ALMOST EMPTY

UST-3 Notice of Intent: UST Permanent Closure or Change-in-Service

Return completed form to:

The DWM Regional Office located in the area where the facility is located. Send a copy to the Central Office in Raleigh so that the status of the tank may be changed to "PERMANENTLY CLOSED" and your tank fee account can be closed out. SEE MAP ON THE BACK OF THIS FORM FOR THE CENTRAL AND REGIONAL OFFICE ADDRESSES.

STATE USE ONLY
I.D. # _____
Date Received _____

INSTRUCTIONS (READ THIS FIRST)

Complete and return at least **thirty (30) days** prior to closure or change-in-service activities. If a Professional Engineer (P.E.) or a Licensed Geologist (L.G.) provides supervision for closure or change-in-service site assessment activities and signs and seals all closure reports then at least a **five (5) working days** notice is acceptable.

Completed UST closure or change-in-service site assessment reports, along with a copy of the UST-2 form, should be submitted to the appropriate Division of Waste Management (DWM) Regional Office within thirty (30) days following closure activities. The UST-2 form should also be submitted to the Central Office in Raleigh so that the status of the tanks may be changed to permanently closed and your tank fee account can be closed out.

UST closure and change-in-service site assessments must be completed in accordance with the latest version of the *Guidelines for Site Checks, Tank Closure and Initial Response*. The guidelines can be obtained at <http://www.wastenotnc.org/web/wm/>. Note: To close tanks in place you must obtain prior approval from the DWM Regional office located in the region where the facility is located.

You must make sure that USTs removed from your property are disposed of properly. When choosing a closure contractor, ask where the tank(s) will be taken for disposal. Usually, USTs are cleaned and cut up for scrap metal. This is dangerous work and must be performed by a qualified company. Tanks disposed of illegally in fields or other dumpsites can leak petroleum products and sludge into the environment. If your tanks are disposed of improperly, you could be held responsible for the cleanup of any environmental damage that occurs.

I. OWNERSHIP OF TANKS		II. LOCATION		
Owner Name (Corporation, Individual, Public Agency, or Other Entity) <u>FORE-EVER GOLF, INC.</u>		Facility Name or Company <u>GREEN TEE ASSOCIATES, INC.</u>		
Street Address		Facility ID # (if known)		
City	County	Street Address		
State	Zip Code	City	County	Zip Code
Phone Number		Phone Number		

III. CONTACT PERSONNEL

Name:	Company Name:	Job Title:	Phone Number:
-------	---------------	------------	---------------

IV. TANK REMOVAL, CLOSURE IN PLACE, CHANGE-IN SERVICE

- | | | |
|--|--|---|
| <ol style="list-style-type: none"> Contact local fire marshal. Plan entire closure event. Conduct Site Soil Assessment. If removing tanks or closing in place, refer to API Publication 2015 <i>Cleaning Petroleum Storage Tanks</i> and 1604 <i>Removal and Disposal of Used Underground Petroleum Storage Tanks</i>. | <ol style="list-style-type: none"> Provide a sketch locating piping, tanks and soil sampling locations. Submit a closure report in the format of UST-12 (including the form UST-2) within thirty (30) days following the site investigation. If a release from the tanks has occurred, the site assessment portion of the tank closure must be conducted under the supervision of | <ol style="list-style-type: none"> a P.E. or L.G., with all closure site assessment reports bearing the signature and seal of the P.E. or L.G. If a release has not occurred, the supervision, signature or seal of a P.E. or L.G. is not required. Keep closure records for three (3) years. |
|--|--|---|

V. WORK TO BE PERFORMED BY

Contractor Name:		Contractor Company Name:		
Address:		State:	Zip Code:	Phone No:
Primary Consultant Name:		Primary Consultant Company Name:		Consultant Phone No:

VI. TANKS SCHEDULED FOR CLOSURE OR CHANGE-IN-SERVICE

Tank ID No.	Size in Gallons	Last Contents	Proposed Activity		
			Closure		Change-In-Service New Contents Stored
			Removal	Abandonment in Place *	
<u>674364</u>	<u>550</u>		<input type="checkbox"/>	<input type="checkbox"/>	
<u>674363</u>	<u>550</u>		<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	

* Prior written approval to abandon a tank in place must be received from a DWM Regional Office.

VII. OWNER OR OWNER'S AUTHORIZED REPRESENTATIVE

I understand that I can be held responsible for environmental damage resulting from the improper disposal of my USTs.

Print name and official title:

Signature <u>Carol A. Hall</u>	Date Signed <u>3/19/18</u>	SCHEDULED REMOVAL DATE	Notify your DWM Regional Office 48 hours before this date if scheduled removal date changes
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North Carolina Department of Environmental Quality

Division of Waste Management
 UST Section Central Office
 1646 Mail Service Center
 Raleigh, NC 27699-1646
 (919) 707-8171 FAX (919) 715-1117
<http://www.wastenotnc.org/web/wm/>

