



Initial Application Date: _____

Application # _____

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: Regency Homes Inc Mailing Address: P.O. Box 25640
City: Fayetteville State: NC Zip: 28334 Contact No: Email:

APPLICANT: Ben Stutz Construction Mailing Address: 409 Chicago Dr. Unit 103
City: Fayetteville State: NC Zip: 28306 Contact No: 9104655248 Email: residential@benstutzconstruction.com

CONTACT NAME APPLYING IN OFFICE: Carly Sharpless Phone # 9104655248
ADDRESS: 166 Old Field Loop Sanford 27333 PIN: 9578-81-9196.000

DEED OR OTP: _____

PROPOSED USE:

- SFD: (Size 46 x 37) # Bedrooms: 4 # Baths: 3 Basement(w/wo bath): Garage: X Deck: Crawl Space: Slab: Monolithic Slab: X
Mod: (Size x) # Bedrooms # Baths Basement (w/wo bath) Garage: Site Built Deck: On Frame Off Frame
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 x) Use: Closets in addition? () yes () no

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

Does owner of this tract of land, own land that contains a manufactured home within five hundred feet (500') of tract listed above? () yes (X) no
Does the property contain any easements whether underground or overhead (X) yes () no
Structures (existing or proposed): Single family dwellings: 1 Manufactured Homes: Other (specify):

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

Date 08/03/18

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

strong roots • new growth

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**:

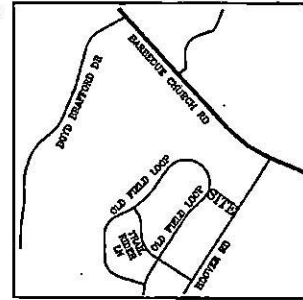
- YES NO Does the site contain any Jurisdictional Wetlands?
- YES NO Do you plan to have an irrigation system now or in the future?
- YES NO Does or will the building contain any drains? Please explain. _____
- YES NO Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
- 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.

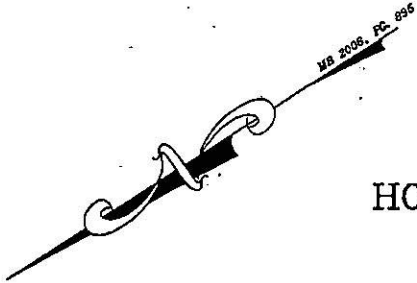
I Have Read This Application And Certify That The Information Provided Herein Is True, Complete And Correct, Authorized County And State Officials Are Granted Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules. I Understand That I Am Solely Responsible 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.

CURVE TABLE				
CURVE	LENGTH	RADIUS	BEARING	CHORD
C1	81.34'	255.00'	N11°18'54"E	81.00'

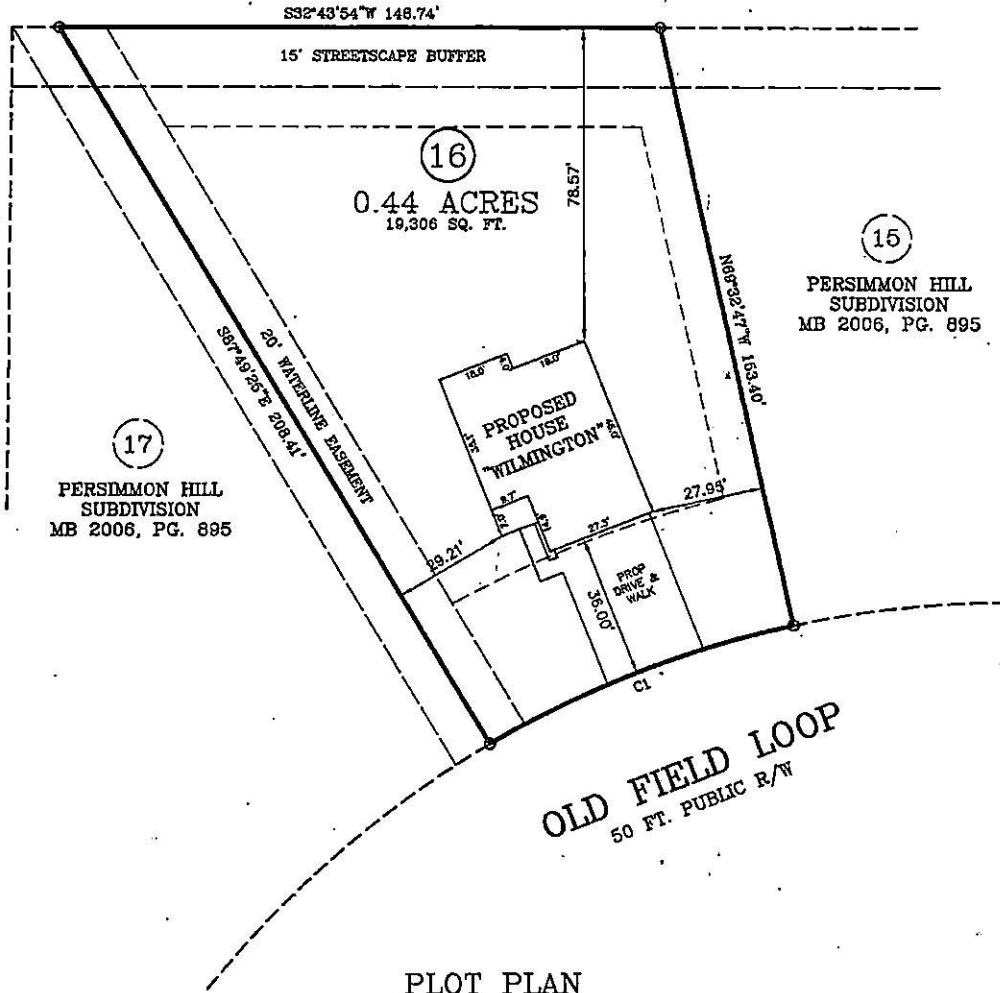
NOTE : CONTRACTOR TO VERIFY ALL BUILDING SETBACKS PRIOR TO CONSTRUCTION.



VICINITY MAP
(NO SCALE)



HOOVER ROAD
SR-1210



PLOT PLAN

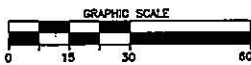
PLOT PLAN FOR: BEN STOUT CONSTRUCTION
ADDRESS: OLD FIELD LOOP
CITY OF: NEAR PINEVIEW, NC
COUNTY OF: HARNETT

TOWNSHIP OF: BARBECUE

DATE: JULY 31ST, 2018

SCALE: 1" = 30'

REFERENCE: LOT 16
PERSIMMON HILL
SUBDIVISION
MB 2006, PG. 895



I, W. LARRY KING, CERTIFY THAT THIS MAP IS FOR THE PURPOSE OF PERMITTING ONLY. IT IS NOT A SURVEY AND NO RELIANCE MAY BE PLACED ON ITS ACCURACY. THE STRUCTURE SHOWN ON THIS PLOT PLAN IS PLACED ACCORDING TO THE INSTRUCTIONS GIVEN BY THE BUILDER. ALL DIMENSIONS AND SETBACKS SHOULD BE VERIFIED FOR COMPLIANCE WITH ZONING AND COVENANTS.

W. Larry King
W. LARRY KING, PLS - L-1339

Larry King & Associates, R.L.S., P.A.
P.O. Box 53787
1333 Morganton Road, Suite 201
Fayetteville, NC 28305
Phone: (910)483-4300
Fax: (910)483-4052
www.lkandA.com
NC Firm License C-0887

THIS MAP CAN NOT BE USED FOR RECORDATION OR ATTACHED TO A DEED TO BE RECORDED. THIS MAP IS NOT DRAWN IN ACCORDANCE WITH GS 47-30.

THE BOUNDARY AND LOT INFORMATION SHOWN ON THIS MAP IS TAKEN FROM THAT DOCUMENT DESCRIBED IN THE "REFERENCE" LINE SHOWN HEREON. THIS INFORMATION SHOULD BE CONFIRMED AS THE MOST CURRENT FOR THIS PROPERTY BEFORE ISSUANCE OF PERMITS OR COMMENCEMENT OF CONSTRUCTION. NO TITLE SEARCH WAS PERFORMED ON THIS PROPERTY BY THIS SURVEYOR.

Tax Parcel

PIN - 9578-81-9196.000
PID - 039577 0028 16

Owner
REGENCY HOMES INC

Mailing Address - po box 25640 FAYETTEVILLE, NC 28314-5010

Account Number - 1400001984

Address

166 OLD FIELD LOOP SANFORD, NC 27332

Address Type - Vacant

Address Use -

Development - PERSIMMON HILL

Township - *view reference Layer - Boundaries > Townships*

Property

Description - LT#16 PERSIMMON HILL 0.44MAP#2006-895

Government Owned Property -

Deed Date - 2006/11/20

Deed Book and Page - 2307 : 0908

LINK TO DEED *

Plat Book and Page - 2006 : 0895

LINK TO SURVEY *

*(*Deed and Survey are subject to availability)*

Taxable Acreage - 1.000 LT

Calculated Acreage - 0.42

Zoning - RA-20R - 0.42 acres (100.0%)

Zoning Jurisdiction - Harnett County

Conservation Easement - No

Wetlands- No

Flood Zone - Minimal Flood Risk

NC WaterSupply "Watershed" - No

MLRA - Carolina and Georgia Sand Hills - 137



Application # _____

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 information on license.

Application for Residential Building and Trades Permit

Owner's Name: Ben Stout Real Estate Services Inc Date: 08/05/18
Site Address: 166 OLD FIELD LOOP, SANFORD NC 27332 Phone: 9104655748
Subdivision: Persimmon Hill Lot: 16
Description of Proposed Work: New Construction Residential SFD

General Contractor Information

Ben Stout Construction Telephone: 9104655748
Building Contractor's Company Name
409 Chicago Dr Unit 103 Fayetteville NC 28306 Email Address: residential@benstoutconstruction.com
Address
69633-U
License #

Electrical Contractor Information

Description of Work New SFD Service Size: 200 Amps T-Pole: Yes No
Butord Electric LLC Telephone: 910723-1937
Electrical Contractor's Company Name
948 Pam Drive Hope Mills NC 28348 Email Address: butordelectric@gmail.com
Address
U. 31424
License #

Mechanical/HVAC Contractor Information

Description of Work New SFD
Carolina Comfort Air Telephone: 9103392374
Mechanical Contractor's Company Name
703 N. Clinton Ave Dunn NC 28334 Email Address: marie@carolinacomfortair.com
Address
29077
License #

Plumbing Contractor Information

Description of Work New SFD # Baths: 4
Ivey's Plumbing Contractor Inc Telephone: 910624-7368
Plumbing Contractor's Company Name
1177 Watts Dairy Rd St. Paul NC 28384 Email Address: ipcinc08@aol.com
Address
16423 P-1
License #

Insulation Contractor Information

Cumberland Insulation Telephone: 9104847118
Insulation Contractor's Company Name & Address

NOTE: General Contractor / owner 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

08/03/18

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.

Sign w/Title: Director of Residential Operations Date: 08/03/18