Initial Application Date:	6-15-18		Ap	plication # 18502	×44019
Central Permitting			DENTIAL LAND USE APP ne: (910) 893-7525 ext:2		www.harnett.org/permits
A RECORDED S	URVEY MAP, RECORDED DEED (O	R OFFER TO PURCHAS	E) & SITE PLAN ARE REQUIRI	ED WHEN SUBMITTING A LAND) USE APPLICATION
LANDOWNER: Curr-Wel	Il Developments, LLC	Ma	ailing Address: 21 Little Fa	arm Circle	
City: Angier	II Developments, LLC State:	Zip: 27501 Conta	ct No: 9196327255	Email:Currie@ada	mshowell.com
	; 				
City: Greensboro	State: NC	Mailing Address Zin: 27410 Conta	ct No [.] 919-995-5654	Email: Trabitz@wa	dejurneyhomes.cor
*Please fill out applicant infor	mation if different than landowner	00///2			
CONTACT NAME APPLY	VING IN OFFICE: Tara Rabitz			Phone #	
	Subdivision:Quail Hollow			Lot #:	Lot Size: 4(
State Road # 357	State Road Name: De	anne Ln.		Map Book & Pag	10099, 10019
	5845				
	Zone: <u>J</u> Watershed: <u></u>				.e
	gress Energy as service provide				
) # Bedrooms # Baths	d? () yes () nc	• w/ a closet? () yes (o bath) Garage:	_) no (if yes add in with # b Site Built Deck: On F	edrooms)
	(Is the second floor finishe :SWDWTW (Siz .x) No. Buildings:	zex)#	Bedrooms: Garage:	(site built?) Deck:	(site built?)
Home Occupation: #	# Rooms: Use:		Hours of Operation:		#Employees:
Addition/Accessory/	Other: (Sizex) Use	e:		Closets in ac	ldition? () yes () no
Sewage Supply: N Does owner of this tract of Does the property contain	unty Existing Well lew Septic Tank (Complete Chro of land, own land that contains a n any easements whether under oposed): Single family dwelling	ecklist) Existi a manufactured hom- rground or overhead	ing Septic Tank (<i>Complete</i> e within five hundred feet (() yes (✔) no	Checklist) County 500') of tract listed above?	Sewer () yes (✔) no
Required Residential P	roperty Line Setbacks:	Comments:			
-	Actual 42				
Rear	88.6	·,			
Closest Side		<u></u>			
Sidestreet/corner lot					
Nearest Building					02/44

Residential Land Use Application

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Head west on E Front St toward S 1st St

· · · · · · · · · · · · · · · · · · ·	 ·	 	

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.

Tara Rabit	;			
			-	

Signature of Owner or Owner's Agent

5/2/18 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

NAME: Wade Unin Homes

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 8 00

- All property irons must be made v isible. Place "pink p roperty flags" on each corner i ron 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 <u>undergrowth</u> to allow the soil evaluation to be performed. Inspectors should be able to walk freely around site. <u>Do not grade property.</u>
- <u>All lots to be addressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred</u> 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 En vironmental Health inspection. <u>Please note</u> <u>confirmation number given at end of recording for proof of request.</u>
- Use Click2Gov or IVR to verify results. Once approved, proceed to Central Permitting for permits.
- Environmental Health Existing Tank Inspections Cod e 800
 - · Follow above instructions for placing flags and card on property.
 - Prepare for inspection by removing soil over <u>over outlet end</u> as diagram indicates, and lift lid straight up (if possible) and then close back down. (Unless inspection is for a septic tank in a mobile home park)
 - After uncovering outlet end call the voice permitting system at 910-893-7525 option 1 & select notification permit if multiple permits, then u se code 800 for Environmental Health ins pection. <u>Please note confirmation number</u> 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	<pre>{} Innovative</pre>	{X} Conventional	{} Any
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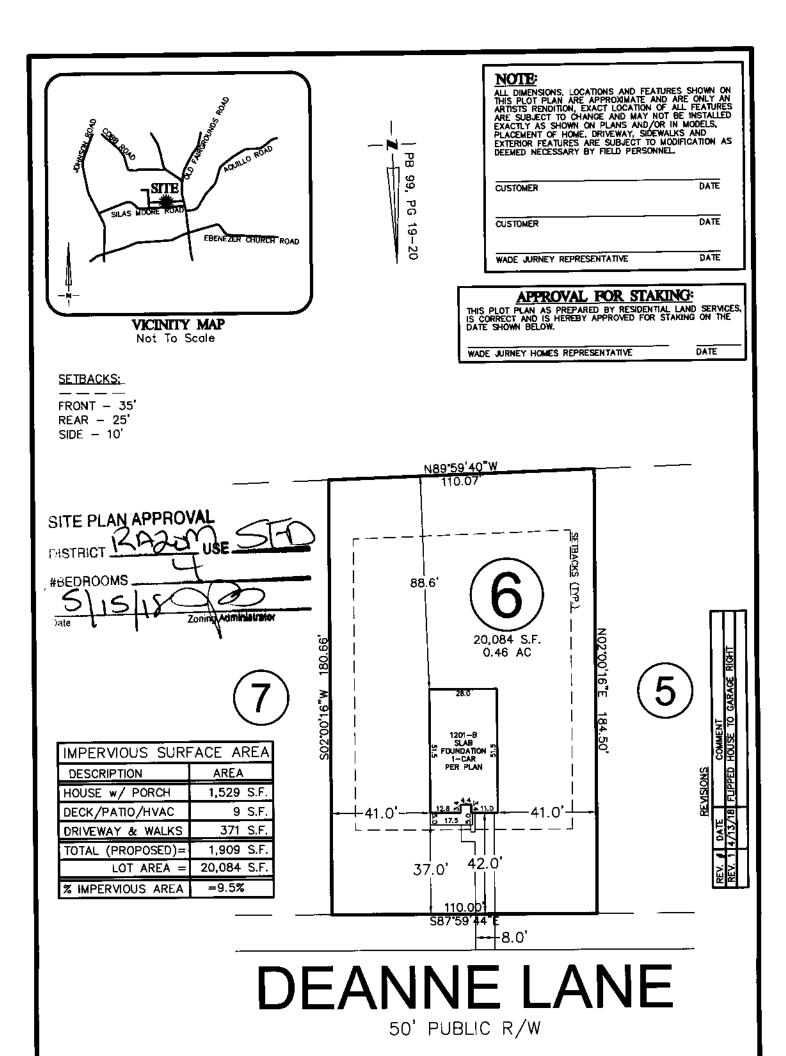
{__} Alternative {__} Other ___

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 <u>irrigation system</u> now or in the future?	
{}YES	{ X } NO	Does or will the building contain any <u>drains</u> ? Please explain	
{}}YES	(X) 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	{ Х } 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?	
XYES	{} 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)



HARNETT COUNTY CASH RECEIPTS *** CUSTOMER RECEIPT *** Uper: JBROCK Type: CP Drawer: 1 Date: 5/15/18 52 Receipt no: 357063 Year Number Amount 2018 50044019 91749 TECH 2 LILLINGTON, NC 27546 B4 BP - ENV HEALTH FEES 84 BP - ENV HEALTH FEES 84 S750.00 NEW TANK WJH LLC Tender detail CK CHECK PAYMEN 15563 \$750.00 Total tendered \$750.00 Total payment \$750.00

Trans date: 5/15/18 Time: 18:57:26

** THANK YOU FOR YOUR PAYMENT **

Application # 18 500 44019 Harnett County Central Permitting PO Box 65 Lillington, NC 27546 910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Application for Residential Building and Trades Permit

Owner's Name: Curr-Well Development, LLC	Date:		
over the second se	Phone: 919-623-7255		
Directions to job site from Lillington: Head West on E Front St. towards	s S 1st St. Continue on S. Main St. Take		
US-421 S and NC-27 to Ebenezer Church Rd. in Coats.			
Subdivision: Quail Hallow	Lot: 6		
Description of Proposed Work: Single Family New Residential	# of Bedrooms: 4		
Heated SF: 1209 Unheated SF: 216 Finished Bonus Room General Contractor Information	h? <u>No</u> Crawl Space: Slab: _ <mark>✓</mark>		
	919-995-5654		
WJH, LLC	Telephone		
Building Contractor's Company Name	Trabitz@wadejurneyhomes.com		
3300 Battleground Ave. Ste.101	Email Address		
Address 49262			
49202 License #			
Electrical Contractor Inform	nation (
Description of Work Electrical Install Service S	Size: <u>200</u> Amps T-Pole: <mark>✓</mark> YesNo		
W-3	919-550-7341		
Electrical Contractor's Company Name	Telephone		
308 W. Main St. Clayton, NC, 27528	Ewiggly@w3electric.com		
Address	Email Address		
11452U			
License #	formation		
Mechanical/HVAC Contractor In	lionnation		
Description of Work Heating and Air	336-794-9730		
Comfort Air			
Mechanical Contractor's Company Name			
PO Box 527 Clemmons NC 27012	kayaustin@outlook.com		
Address	Email Address		
4218			
License # Plumbing Contractor Inform	mation		
Description of Work Plumbing Install	# Baths <u>2</u> 919-550-4833		
Thornton's Plumbing			
Plumbing Contractor's Company Name			
3160 A Vinson Rd. Clayton NC 27520	Thorntonsplumbing@embarqmail.cc		
Address	Email Address		
4218			
License # Insulation Contractor Infor	mation		
Builders Insulation	919-788-9806		
	Telephone		

Insulation Contractor's Company Name & Address

Telephone

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

Homeowners Applying to Bu Please answer the following questions then see a Permit Technician to dete Questionnaire per G.S. 87-14 Regulations as to Issue of Bui	ermine if you qualify for permit under Owners Exemption.				
1. Do you own the land on which this building will be c	onstructed?Yes _∕_No				
Have you hired or intend to hire an individual to sup manage construction of the project?	erintend andYesNo				
3. Do you intend to directly control & supervise constru	uction activities? <u> </u>				
4. Do you intend to schedule, contract, or directly pay construction work to be done?	for all phases of Yes No				
5. Do you intend to personally occupy the building for months following completion of construction and do yo you do not do so, it creates the presumption under law secured the permit?	u understand that if				
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 <u>I affirm that I have obtained all listed contractors</u> <u>permission to obtain these permits</u> and if <u>any</u> 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.					
Tana Rabotz					
Signature of Owner/Contractor/Officer(s) of Corporation	Date				
Affidavit for Worker's Compe The undersigned applicant being the:	nsation N.C.G.S. 87-14				
General Contractor Owner O	fficer/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 w	vorkers' compensation insurance to cover them.				
Has one (1) or more subcontractors(s) and has obtain them.	ned workers' compensation insurance to cover				
Has one (1) or more subcontractors(s) who has their covering themselves.	own policy of workers' compensation insurance				
Has no more than two (2) employees and no subcon	itractors				
While working on the project for which this permit is sought Department issuing the permit may require certificates of co to issuance of the permit and at any time during the permitte carrying out the work.	it is understood that the Central Permitting overage of worker's compensation insurance prior ed work from any person, firm or corporation				
Department issuing the permit may require certificates of co to issuance of the permit and at any time during the permitte carrying out the work.	it is understood that the Central Permitting overage of worker's compensation insurance prior ed work from any person, firm or corporation				
Department issuing the permit may require certificates of co to issuance of the permit and at any time during the permitte	it is understood that the Central Permitting overage of worker's compensation insurance prior ed work from any person, firm or corporation				

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Details: Appointment of Lien Agent Entry #: 846585

Designated Lien Agent

Project Property

QLH 6

357 Deanne Lane

Coats, NC 27521 Harnett County

Property Type

1-2 Family Dwelling

Investors Title Insurance Company

Online: <u>www.liensnc.com, www.inuccom</u> Address: 19 W. Hargett St., Suite 507 / Raleigh, NC 27601 Phone: 888-690-7384 Fax: 913-489-5231

Email: support/@liensne.com.maile.cover.it.cove.cover.

Owner Information

WJH, LLC 3300 Battleground Ave Suite 101 Greensboro, NC 27410 United States Email: trabitz@wadejurneyhomes.com Phone: 336-282-3606

View Comments (0)

Technical Support Hotline: (888) 690-7384

Filed on: 05/08/2018 Initially filed by: wjh2013

Print & Post



Contractors: Please post this notice on the Job Site.

Suppliers and Subcontractors: Scan this image with your smart phone to view this filing. You can then file a Notice to Lien Agent for this project.