

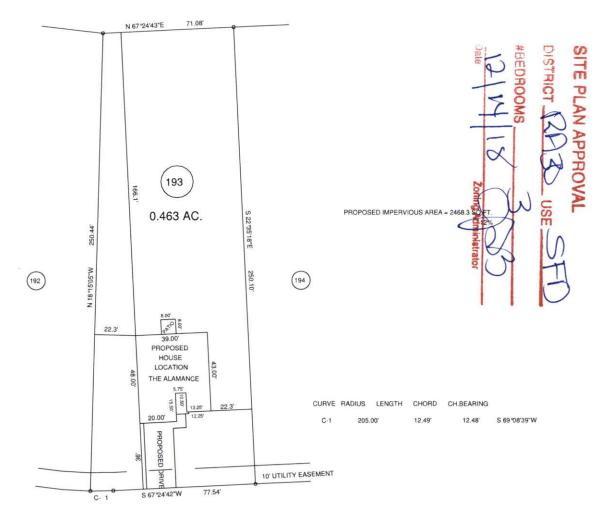
initial Application Date:			Application #_		
				CU#	
Central Permitting 108 B	COUNTY OF HARNETT RE E. Front Street, Lillington, NC 27546			893-2793 www.ha	arnett.org/permits
A RECORDED SURVEY N	MAP, RECORDED DEED (OR OFFER TO PUR	CHASE) & SITE PLAN ARE R	EQUIRED WHEN SUBI	MITTING A LAND USE A	PPLICATION
LANDOWNER: LGI Hor	na -NC, LLC.	_ Mailing Address:/	450 Lake	Robbins, #	430
city: The Woodlands	State: <u>TX</u> Zip: <u>7738</u> %	Contact No: 919-7	95-3922	Email: Keith. S	ews Algihama
441	Mailing Add				
City: *Please fill out applicant information if	State: Zip: C	Contact No:		Email:	
CONTACT NAME ADDI VING IN	OFFICE: Keith Seurs		Phone #	919-795-29	22
	ral Spring Lanc		5-73-1/1/		
\$					
PROPOSED USE:					Monolithic.
SFD: (Size <u>39 x 48</u>)#	Bedrooms: 3 # Baths: 2 Basement(the bonus room finished? (\square) yes (\square	w/wo bath): Garage:]) no w/ a closet? () ye	es () no (if yes a	rawl Space:Slab: add in with # bedroom	Slab: V
	Bedrooms# BathsBasement the second floor finished? () yes (Off Frame
Manufactured Home: S\	W DW TW (Size x) # Bedrooms: Ga	rage: (site built?	Deck: site	built?
Duplex: (Sizex)) No. Buildings: No. B	edrooms Per Unit:			
☐ Home Occupation: # Rooms	::Use:	Hours of Opera	tion:	#Emp	oloyees:
Addition/Accessory/Other: (S	Sizex) Use:			Closets in addition?	() yes () no
Sewage Supply: New Septi	Existing Well New Well (# (Need to Cor ic Tank Expansion Relocatio nmental Health Checklist on other side own land that contains a manufactured h	mplete New Well Application Existing Septic Ta of application if Septic)	tion at the same time ank County Se	e as New Tank) ewer	
	sements whether underground or overh				
Structures (existing or proposed):	: Single family dwellings: Proposed	Manufactured Home	s:	_ Other (specify):	
If permits are granted I agree to coll hereby state that foregoing state	conform to all ordinances and laws of the lements are accurate and correct to the lements.	e State of North Carolina best of my knowledge. Pe	regulating such wo	rk and the specification	ons of plans submitted.
X	Signature of Owner or Owner's Agen		#12/11/1	18	
to: boundary information, I	Signature of Owner or Owner's Agen sponsibility to provide the county with house location, underground or over incorrect or missing information *This application expires 6 months fr	th any applicable inform head easements, etc. The n that is contained withi	nation about the su he county or its en in these application	ubject property, incl nployees are not res ns.***	

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APPLICATION CONTINUES ON BACK



EFERENCE: MAP NO. 2018-321



MINERAL SPRING LANE 50' R/W



FRONT	YARD -		- 35		
REAF	YARD -		- 20'		
SIDE	YARD		10"		
CORNER	LOT SID	EYA	ARD .	20'	
MAXIMU	M HEIGH	IT	3	5	

1429	PROPOSED PLOT PLAN - LOT - 193 AVERY POND S/D,PHASE - IIIA		BENNETT SURVEYS 1662 CLARK RD.LILLINGTON,N.C. 27546 (910) 893-5252		F-1304	
SITE*	TOWNSHIP H	ECTOR'S CREEK	COUNTY HARNETT	12.5' 0 25'	SURVEYED BY:	FIELD BOOK
Y	STATE: NORTH CA	ROLINA	DATE: OCTOBER 26,2018	SCALE: 1"= 50"	DRAWN BY: RVB	DRAWING NO.
VICINITY MAP	ZONED RA-30	WATERSHED DISTRICT WS-IV	TAX PARCEL ID#: PIN #	CHECKED & CLOSURE BY		18350



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

- <u>All property irons must be made visible</u>. 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 <u>undergrowth</u> 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	on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.
{} Acce	epted	{_}} Innovative {★} Conventional {} Any
{_}} Alter	native	{}} Other
		the local health department upon submittal of this application if any of the following apply to the property in "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:
{}}YES	{ ∠ } NO	Does the site contain any Jurisdictional Wetlands?
{}}YES	{ _ } NO	Do you plan to have an <u>irrigation system</u> now or in the future?
{}}YES	NO [Does or will the building contain any drains? Please explain.
{}}YES	NO 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 Applicati	on 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.

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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

Application for Residential Building and Trades Permit

Owner's Name: LCI Homes - NC, LC	Date:
Site Address:	Phone: 919-795-3922
Directions to job site from Lillington: Hwy 401N From Lillington:	gton to Fuguar Varina.
Directions to job site from Lillington: Hwy 401N From Lillington: Left on Chalybeate Rd for 118 mile, Avery	Pond on Left
, ,	
Subdivision: Avery Pond	Lot:Lot:
Description of Proposed Work: New Construction - SF	# of Bedrooms:
Heated SF: 1316 Unheated SF: Finished Bonus Room?	No Crawl Space: Slab:
General Contractor Information	
LGI Homes-NC LLC	919-795-3922
Building Contractor's Company Name	Telephone
1450 LAKEROMbins #430	Keith. Sears a LGI homes. com
Address The Woodlands Tx	Email Address
Address The Woodlands, TX 74803 Licenses #	
License # Electrical Contractor Informati	on
Description of Work New Construction Service Size	: 200 Amps T-Pole: VYes No
J. Crabtree Electric	919-557-1800
Electrical Contractor's Company Name	Telephone
103 Fleming St.	J. Crabtree ayahoo.com
Address	Email Address
20925	
License #	
Mechanical/HVAC Contractor Infor	<u>mation</u>
Description of Work New Construction	
Caryl Mechanical	704-882-4522
Mechanical Contractor's Company Name	Telephone
5910 Stockbridge Drive Monroe	mwalker acarylmechanicals. con
Andress	Email Address
16647 - Douglas Bivens	
License #	
Plumbing Contractor Informat	<u>ion</u>
Description of Work New Construction	# Baths
Plumbing Contractor's Company Name	919-553-4455
Plumbing Contractor's Company Name	Telephone
114 Lec Court Clayton, NC 27520	719-553-4455 Telephone Jeremy abplumbing.com Email Address
Address	Email Address
License #	u.
Insulation Contractor Informat	A
Tatum Insulation	919-661-0999
Insulation Contractor's Company Name & Address	relephone

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>by signing below I have obtained all subcontractors 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.

Signature of Owner/Contractor/Officer(s) of Corporation	12/12/18	
Signature of Owner/Contractor/Officer(s) of Corporation	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: LGI Homes - NC, LLC.
Sign w/Title: Zwilf - Regional Construction Manager Date:

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 958363

Filed on: 12/04/2018

Initially filed by: LGIHOMESNC

Designated Lien Agent

WFG National Title Insurance Company

Online: www.liensnc.com (hatto //www.liensuc.com)

Address: 19 W. Hargett St., Suite 507 /

Raleigh, NC 27601 Phone: 888-690-7384 Fax: 913-489-5231

Email: support@liensnc.com

Owner Information

LGI Homes-NC, LLC 1450 Lake Robbins Drive Suite 430 The Woodlands, TX 77380 United States

Email: keith.sears@lgihomes.com

Phone: 919-679-3213

Project Property

Lot 193 - Avery Pond Subdivision 334 Mineral Springs Lane Fuquay Varina, NC 27526 Harnett County

Property Type

1-2 Family Dwelling

Date of First Furnishing

12/14/2018

Print & Post



ontractors:

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.

View Comments (0)

Technical Support Hotline: (888) 690-7384