Avery

Initial Application Date: 2.2.6.19



Application # SFD 1902 . 0054

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: LGI HOMES Mailing Address: 450 Lake BOODINS Or Suite 430
city: The Woodland S_ state: TX zip: 77880 contact No: 919-520-840 6 Email: 01 NOV. hudson @ 191 homes.
APPLICANT: Oliver Hydson Mailing Address: 1480 Lake Rolobin & Dr. Suite 430 Com
City: The Woodlands state: TX zip: 7780 Contact No: 919-520-840 Email: Oliver hudson or landowner *Please fill out applicant Information if different than landowner
CONTACT NAME APPLYING IN OFFICE: Oliver Hudson Phone # 919-520-8406
ADDRESS: 436 MINERAL SPRIN LA PIN:
DEED OR OTP:
PROPOSED USE:
SFD: (Size 30 x 41) # Bedrooms: 3 # Baths 2.5 Basement(w/wo bath): Garage: X Deck: Crawl Space: Slab:
☐ Mod: (Sizex) # 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: (Sizex) No. Buildings: No. Bedrooms Per Unit:
Home Occupation: # Rooms: Use: Hours of Operation: #Employees:
Addition/Accessory/Other: (Sizex) Use: Closets in addition? () yes () no
Water Supply: CountyExisting WellNew 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) Does owner of this tract of land, own land that contains a manufactured home within five hundred feet (500') of tract listed above? () yes () no
Does the property contain any easements whether underground or overhead () yes (
Structures (existing or proposed): Single family dwellings: Proposed_ 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 ***It is the owner/applicants recognitivity to resulted the country of the count
tis 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

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**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 <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

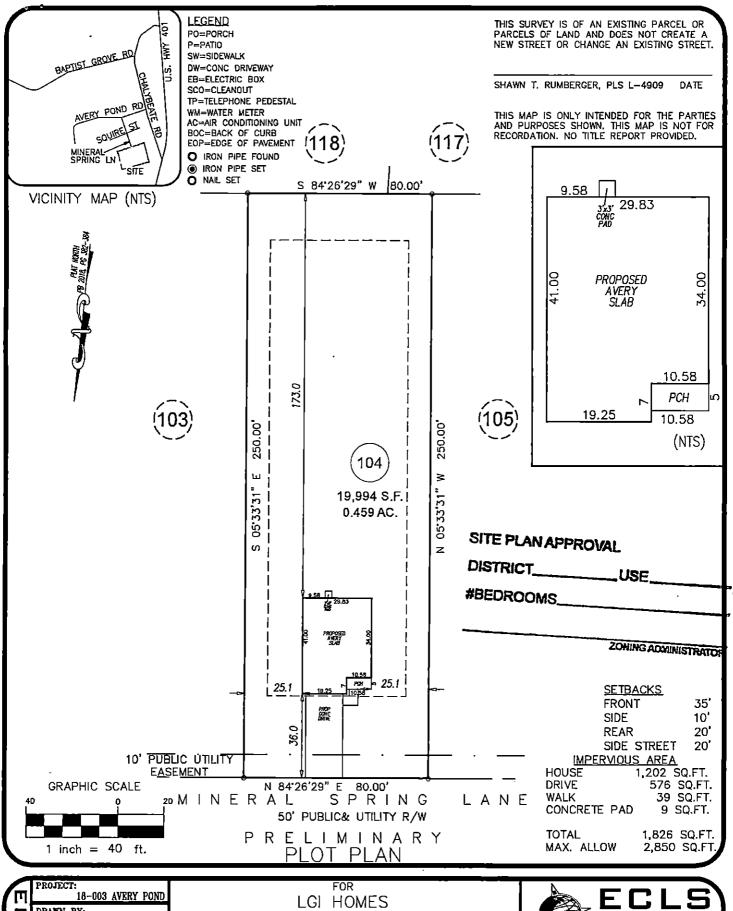
CUDITO

"MORE INFORMATION MAY BE REQUIRED TO COMPLETE ANY INSPECTION".

SELIC					
If applying for authorization to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.					
{}} Accepted		{} Innovative {\nu} Conventional {} Any			
{}} Alternative		{}} Other			
The applica	ent shall notify f the answer is	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	{ ∑ } №	Does the site contain any Jurisdictional Wetlands?			
{}}YES	$\{\underline{X}\}$ NO	Do you plan to have an irrigation system now or in the future?			
{}}YES	{ X } №	Does or will the building contain any drains? Please explain.			
YES	$\{\chi_{}\}$ MO	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?			
{}}YES	0И {∑}}	Is any wastewater going to be generated on the site other than domestic sewage?			
{}}YES	{ ≯ } №	Is the site subject to approval by any other Public Agency?			
{ <u></u> X}YES	{}} NO	Are there any Easements or Right of Ways on this property?			
{}}YES	$\{\underline{X}\}$ 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.

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	PROJECT:
/ [18-003 AVERY POND
	DRAWN BY: AMW
L	SCALE: 1"=40'
(II)	DATE: 02-5-19

435 MINERAL SPRING LANE LOT 104 AVERY POND SUBDIVISION; PHASE IIIA HECTOR'S CREEK TWP., HARNETT CO., NC P.B. 2018, PG. 382-384



GLOBAL, INC 19 N MCKINLEY ST CDATS, NC 27521 910.897.3257 ECLSGLOBALING.COM 910.897.2329 (FAX) CO#C-4173

Application #		
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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: LCT Homes - NC, LLC	Date: _ 2 19 19
Site Address:	Phone: 919-795-3922
Directions to job site from Lillington: Hwy 401N From Lill	
Directions to job site from Lillington: Hwy 401N From Lill Left on Chalybeate Rd for 18 mile, Aver	y Pond on Left
Subdivision: Avery Pond	Lot: 194 104
Subdivision: <u>Hvery Pond</u> Description of Proposed Work: <u>New Construction</u> - SF	D # of Bedrooms: 3
Heated SF: 1800 Unheated SF: Finished Bonus Room?	Mbbour Crawl Space: Slab:
General Contractor Informat	<u>ion</u>
LGL Homes-NC LLC	919-795-3922
Building Contractor's Company Name 1450 Lake Robbins #430	Telephone
Address The Woods The	Keith. Sears a LGThomes. com
Address The Woodlands, TK 74803 License #	Linai Addiess
License #	
Electrical Contractor Informa	tion
Description of Work New Construction Service Size	
J. Crabtree Electric Electrical Contractor's Company Name	<u>919-557-7800</u> Telephone
and the second s	J. Crabtree ayahoo.com
Address	Email Address
20925	
License #	_
Mechanical/HVAC Contractor Info	<u>ormation</u>
Description of Work New Construction	
Caryl Mechanical	<u> 704 - 88 a -4522 </u>
Mechanical Contractor's Company Name	Telephone
5910 Stockbridge Drive Monroe Address	<u>mwalkeraCary/mechanicals.con</u> Email Address
16647 - Douglas Bivens	Email Address
License #	
Plumbing Contractor Informa	
Description of Work New Construction	# Baths <i>2 '1</i> 2
Plumbing Contractor's Company Name	919-553-4455
	Telephone
114 Lec Court Clayton, NC 27520	919-553-4455 Telephone <u>Jeremy abpplumbing.com</u> Email Address
Address	Email Address ' ' V
License #	
Insulation Contractor Informa	ition
. Tatum Insulation	
Insulation Contractor's Company Name & Address	<u>919-661-0999</u> Telephone

*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.

Le Sam	2/15/19
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.
Company or Name: LGI Homes - NC, LLC. Sign w/Title: Kuil for - Regional Construction Manage Date: 0 16 19

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 994504

Filed on: 02/20/2019 Initially filed by: LGIHOMESNC

Designated Lien Agent

WFG National Title Insurance Company

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

Raieigh, NC 27601 Phone: 888-690-7384

Fax: 913-489-5231 Email: support@liensnc.com Property Type

Project Property

435 Mineral Spring Lane

Fuguay Varina, NC 27526 Harnett County

1-2 Family Dwelling

02/18/2019

Date of First Furnishing

Owner Information

LGI Homes 1450 Lake Robbins Dr. Suite 430 The Woodlands, TX 77380

United States Email: megan.thornton@lgihomes.com

Phone: 919-586-6360

Print & Post



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