. Burke

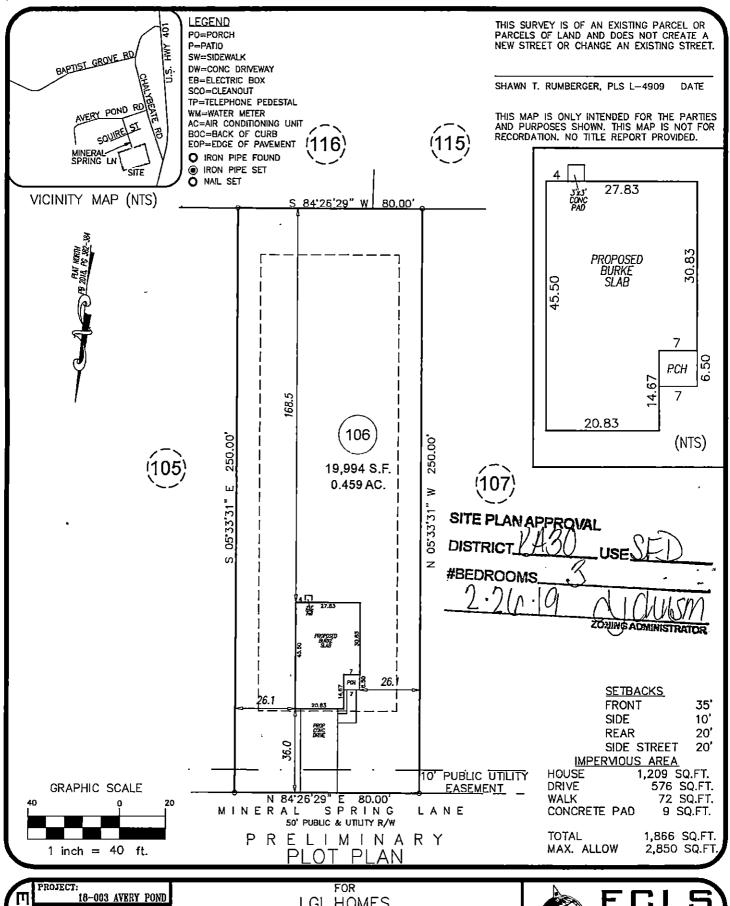
Initial Application Date: 2 1919



Application # SFD 1902-0056

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 Ribbolins Dr. Suite 430
city: The Woodland 5 state: TX zip: 77380 contact No: 919-520-840 6 Email: Oliver hudson elginores.
APPLICANT: NIVER HUDGON Mailing Address: 1450 LOVE ROLDING DV. SLITE 430 COM
City: The Woodlands State: TX zip: 7788 Contact No: 919-520-8406 Email: Oliver. hudson olginoms. *Please fill out applicant information if different than landowner
contact name applying in office: Oliver Hudson
DEED OR OTP:
PROPOSED USE:
SFD: (Siz 27 10 x 45 6 # Bedrooms: 3 # Baths 2.5 Basement(w/wo bath): Garage: 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: #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
Poes the property contain any easements whether underground or overhead () yes (no
Structures (existing or proposed): Single family dwellings: proposed Manufactured Homes:Other (specify):
f 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. 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 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



	PROJEC	T:
<b>/</b> [□]		18-003 AVERY POND
O	DRAWN	BY: AMW
	SCALE:	1"≒40⁴
(II)	DATE:	02-5-19

# LGI HOMES

465 MINERAL SPRING LANE LOT 106 AVERY POND SUBDIVISION; PHASE IIIA HECTOR'S CREEK TWP., HARNETT CO., NC P.B. 2018, PG. 382-384



GLOBAL, INC U.S. VETERAN-DWNED 19 N MCKINLEY ST CDATS, NC 27521 910.897.3257 ECLSGLOBALING.COM 910.897.2329 (FAX) CO#C-4175





### \*\*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

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

If applying	for authorization	on to construct please indicate desired system type(s):	can be ranked in order of preference, must choose one.
{}} Acc	epted	{_}} Innovative {\bigvert \} Conventional	{}} Any
{}} Alte	rnative	{}} Other	
		the local health department upon submittal of this "yes", applicant MUST ATTACH SUPPORTIN	application if any of the following apply to the property in G DOCUMENTATION:
{}}YES	ОИ { <b>Ҳ</b> }	Does the site contain any Jurisdictional Wetlands	?
{}}YES	( <u>X</u> ) NO	Do you plan to have an irrigation system now or i	n the future?
{}}YES	{ <u><b>X</b></u> } №	Does or will the building contain any drains? Plea	se explain
{}}YES	ON { <u>X</u> }	Are there any existing wells, springs, waterlines of	r Wastewater Systems on this property?
{_}}YES	{ <b>X</b> } №	Is any wastewater going to be generated on the sit	e other than domestic sewage?
{_}}YES	$\{\overline{oldsymbol{\chi}}\}$ NO	Is the site subject to approval by any other Public	Agency?
{ <b>√</b> }YES	{}} NO	Are there any Easements or Right of Ways on this	s property?
{_}}YES	{ <b>X</b> } №	Does the site contain any existing water, cable, ph	one or underground electric lines?
		If yes please call No Cuts at 800-632-4949 to loc	ate 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.

strong roots · new growth

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

<u> </u>	م د مراه
Owner's Name: LCI Homes - NC, LLC	
Site Address:	Phone: <u>919-795-3922</u>
Directions to job site from Lillington: Hwy 401N From Lillington: Left on Chalybeate Rd for "18 mik, Avery	rator to Fuguer Varina.
Left on Chalybeate Rd for 18 mile. Aven	Pool on Left
,——————————————————————————————————————	
Subdivision: Avery Pond	Lot:/06
Description of Proposed Work: New Construction - 5F	
Heated SF: 1800 Unheated SF: Finished Bonus Room?	on Space: Slab:
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: Tr	Email Address
77380	
License #  Electrical Contractor Informati	iau.
Description of Work New Construction Service Size	i <u>on</u> s:∂oo^Amps T-Pole: ✔Yes No
J. Crabtree Electric	919-557-1800
Electrical Contractor's Company Name	Telephone
103 Floming St.	J. Crabtree ayahoo.com
Address	Email Address
20925	
License #  Mechanical/HVAC Contractor Infor	rmation
Description of Work New Construction	manon,
Caryl Mechanical	704-901 4512
Mechanical Contractor's Company Name	
5910 Stockbridge Drive Monroe	mwalker acarylmechanicals. con
Address	Email Address
16647 - Douglas Bivens	
License #	
Plumbing Contractor Information	<u>101</u>
Description of Work New Construction	# Baths_ <u> </u>
Barbour and Pourrow Plumbing Plumbing Contractor's Company Name	# Baths 2 1/2
	releprone
114 Lec Court Clayton, NC 27520	Email Address
, 1441-000	Linal Address
License #	
Insulation Contractor Information	<del></del>
Tatum Insulation	919-661-0999 Telephone
Insulation Contractor's Company Name & Address	Telephone

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.

La Sam	2/15/19	
Signature of Owner/Contractor/Officer(s) of Corporation	Date	

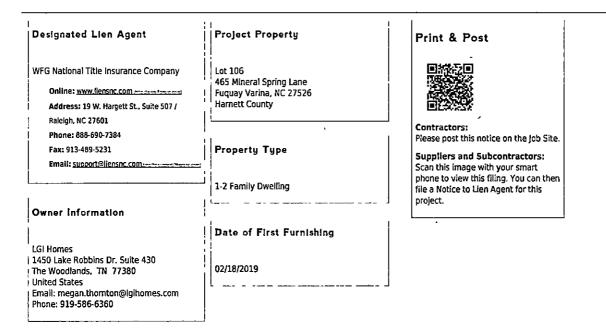
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:
General Contractor Owner Officer/Agent of the Contractor or Owner
Do hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:
Has three (3) 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.
Sign w/Title: Zuit for - Regional Construction Manager Date: 215 19

#### DO NOT REMOVE!

## Details: Appointment of Lien Agent

Entry #: 994499

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



View Comments (0)

Technical Support Hotline: (888) 690-7384