Hartford

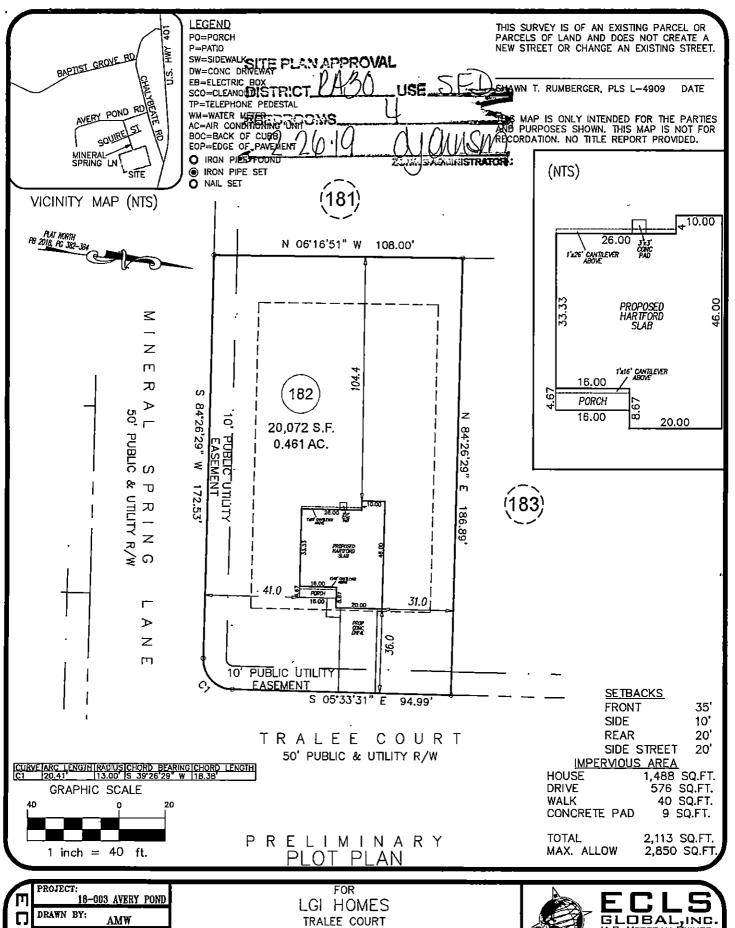
Initial Application Date: 2 19 19

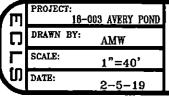


Application # SFD 1902.000

				CU#		
Central Permitting	COUNTY OF 108 E. Front Street, Lillington	HARNETT RESIDENTIAL L , NC 27546 Phone: (910)		TION ax: (910) 893-2793 www.	.harnett.org/permits	_
"A RECORDED SURV	YEY MAP, RECORDED DEED (OR	OFFER TO PURCHASE) & SITE	PLAN ARE REQUIRED WI	HEN SUBMITTING A LAND USE	APPLICATION**	
LANDOWNER: LGI						
city: The Woodlo	ndS state: $IX$ z	ip: <u>77300</u> Contact No: <u>(</u>	<u> 119 -520 -84</u>	40 6 Email: 01 1VO	hudson elgi	homes.
APPLICANT*: <u>                                     </u>	Hudson .	Mailing Address: 1450	) Louk Robb	oins or. Suite	430	് <i>ശ്ര</i> ന -
city: The Wood of Please fill out applicant information	ands state: TX z	ip: <u>7-7880</u> Qontact No: <u>C</u>	119-520-8	3406 Email: Oliver	.hudsonelgir	
CONTACT NAME APPLYING ADDRESS: 180	SIN OFFICE: Oliver	HUDSONPIN:	Pho	one # 919-520-	8406	(611) -
DEED OR OTP:	<del></del>	PIN:			)	-
PROPOSED USE:	<u> </u>	<del></del>		<del></del>		-
SFD: (Size <u>36 x 46</u>	)# Bedrooms: ### # Bathse (Is the bonus room finished?					
	# Bedrooms# Baths (Is the second floor finished?				Off Frame	
Manufactured Home:	]swowrw (Size	x) # Bedroom	s:Garage:(s	site built? Deck:si	te built?	
Duplex: (Sizex_	) No. Buildings:	No. Bedrooms Per U	Jnit:	<u> </u>	**	
Home Occupation: # Roc	oms:Use:	Hour	s of Operation:	#E	mployees:	
Addition/Accessory/Othe	r: (Sizex) Use:_			Closets in addition	? (□) yes (□) no	
Water Supply:County Sewage Supply:New S. (Complete En	entic Tank Expansion	Relocation Existing	ell Application at the sa	ame time as New Tank)		
Does the property contain any		, — ·	<del></del>			
Structures (existing or propose	ed): Single family dwellings:	OPPSED Manufactu	ired Homes:	Other (specify):		
f permits are granted I agree the hereby state that foregoing state	to conform to all ordinances a tatements are accurate and o Signature of Owner or O	correct to the best of my know	wledge. Permit subjec	such work and the specifica at to revocation if false infor	mation is provided.	d.
	n, house location, undergro incorrect or missing This application expires		ble information abou nts, etc. The county o ined within these app date if permits have i	pate it the subject property, in or its employees are not r plications.***	cluding but not limite	

strong roots • new growth





LOT 182 AVERY POND SUBDIVISION; PHASE IIIA HECTOR'S CREEK TWP., HARNETT CO., NC P.B. 2018, PG. 382-384



OBAL, INC

19 N MCKINLEY ST CDATS, NC 27521 910.897.3257 ECLSGLOBALINC.CD 910.897.2329 (FAX) CD#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

- <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

Accessible So That A Complete Site Evaluation Can Be Performed.

SEPTIC

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

If applying	for authorizati	on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.
{}} Acce	epted	[_] Innovative {\( \sum_{\text{\text{Conventional}}}\) Conventional
{}} Alte	rnative	{}} Other
		the local health department upon submittal of this application if any of the following apply to the property in s "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:
{}}YES	0 <i>N</i> { <b>X</b> }	Does the site contain any Jurisdictional Wetlands?
{}}YES	{ <u>X</u> } NO	Do you plan to have an <u>irrigation system</u> now or in the future?
{}}YES	{ <b>∑</b> } №	Does or will the building contain any drains? Please explain.
{}}YES	$\{X\}$ NO	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
{}}YES	{ <b>X</b> } №	Is any wastewater going to be generated on the site other than domestic sewage?
{}}YES	ON { <b>X</b> _}	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 property?
{}}YES	( <b>X</b> ) 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.

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I Have Read This Application And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And State

Understand That I Am Solely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making The Site

Officials Are Granted Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules. I

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: LCI Homes - NC, LLC	
Site Address:	Phone: 919-795-3922
Directions to job site from Lillington: Hwy 401N From Lillington:	enten 10 Fueras Vacan
Left on Chalybeate Rd for 1/8 mile, Avery	Part Day Left
Subdivision: Avery Pond	Lot:
Description of Proposed Work: New Construction - SF	# of Bedrooms: 34
Heated SF: 1800 Unheated SF: Finished Bonus Room?	bone Crawl Space: Slab:
General Contractor Information	<u>on</u>
LEL Homes-NC LIC	919-795-3922
Building Contractor's Company Name	Telephone
1450 Lake Robbins #430 Address The Woodlands, Tx 74803 License #	Keith. Scars a L GI homes, com
74803 (TR WOODIANDS, TX	Email Address
License #	
Electrical Contractor Information	on
Description of Work New Construction Service Size	
J. Crabtree Electric  Electrical Contractor's Company Name	919-557-1800
· •	Telephone
103 Floming St. Address	J. Crabtree ayahoo.com Email Address
20925	Linai 7 dai 000
License #	
Mechanical/HVAC Contractor Infor	<u>mation</u>
Description of Work New Construction	
Caryl Mechanical  Mechanical Contractor's Company Name	<u> 704 - 882 -4522                                 </u>
	Telephone
5910 Stockbridge Drive Monroe	mwalkeracary/mechanicals.com Email Address
16647 - Douglas Bivens	Email Address
License #	
Plumbing Contractor Informati	<u>on</u>
Description of Work New Construction	# Baths 2 12
Barbour and Pourrow Plumbing Plumbing Contractor's Company Name	# Baths 2 1/2  919-553-4455 Telephone  Jeremy abpolumbing.com Email Address
Plumbing Contractor's Company Name	Telephone
114 Lec Court Clayton, NC 27520  Address	Screny abpplumbing.com
Address	Email Address ' ' V
License #	
Insulation Contractor Informati	<u>on</u>
Tatur laculation	
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.

The Same	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: Zwilf Regional Construction Manage Date: 21519

### DO NOT REMOVE!

# Details: Appointment of Lien Agent

Entry #: 994479

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

#### **Designated Lien Agent**

WFG National Title Insurance Company

Online: www.liensnc.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** 

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

**United States** 

Email: megan.thornton@lgihomes.com Phone: 919-586-6360

#### Project Property

Lot 182 TBD

Fuquay Varina, NC 27526 Harnett County

Property Type

1-2 Family Dwelling

## Date of First Furnishing

02/18/2019

## 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.

View Comments (0)

Technical Support Hotline: (888) 690-7384