



Initial Application Date: _____

Application # _____

CU# _____

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: Capitol City Homes LLC (Jason Morrow) Mailing Address: 5711 Six Forks Rd. Suite 200
City: Raleigh State: NC Zip: 27609 Contact No: 919-872-0048 Email: J.Rivera@CapitolCityHomes.com

APPLICANT*: Nette Rivera Mailing Address: Same

City: _____ State: _____ Zip: _____ Contact No: _____ Email: _____

*Please fill out applicant information if different than landowner Lot 1166

ADDRESS: 916 Spruce Hollow Circle PIN: _____

Zoning: Residential Flood: _____ Watershed: _____ Deed Book / Page: 3111/521

Setbacks - Front: 25' Back: 25' Side: 8 1/2' Corner: _____ Side Street 20'

PROPOSED USE:

- SFD: (Size ___x___) # Bedrooms: 3 # Baths: 2.5 Basement(w/wo bath): ___ Garage: X Deck: ___ Crawl Space: ___ Slab: ___ Slab: X
Mod: (Size ___x___) # 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: (Size ___x___) No. Buildings: ___ No. Bedrooms Per Unit: ___
Home Occupation: # Rooms: ___ Use: ___ Hours of Operation: ___ #Employees: ___
Addition/Accessory/Other: (Size ___x___) Use: ___ Closets in addition? (___) yes (___) no

Water Supply: X County ___ Existing Well ___ New Well (# of dwellings using well ___) *Must have operable water before final

Sewage Supply: ___ New Septic Tank ___ Expansion ___ Relocation ___ Existing Septic Tank X County Sewer

Does owner of this tract of land, own land that contains a manufactured home within five hundred feet (500') of tract listed above? (___) yes (X) no

Does the property contain any easements whether underground or overhead (___) yes (X) no

Structures (existing or proposed): Single family dwellings: X 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.

Signature of Owner or Owner's Agent: Nette Rivera Date: 11/9/2020

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

****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 undergrowth 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 to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.

- Accepted Innovative Conventional Any
 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 NO Does the site contain any Jurisdictional Wetlands?
 YES NO Do you plan to have an irrigation system now or in the future?
 YES NO Does or will the building contain any drains? Please explain. _____
 YES 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 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.



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 information on license.

Application for Residential Building and Trades Permit

Owner's Name: Capitol City Homes LLC Date: 11/9/2020

Site Address: _____ Phone: 919-872-0048

Subdivision: Carriage Circle @ Anderson Creek Lot: _____

Description of Proposed Work: New Construction - Single Family Dwelling

General Contractor Information

Capitol City Homes LLC (Jason Morrow) 919-872-0048
Building Contractor's Company Name Telephone
5711 Six Forks Rd. Suite 200 Raleigh NC 27609 jason.morrow@capitolcity-homes.com
Address Email Address
70324

License # _____

Electrical Contractor Information

Description of Work New Electrical Wiring SFD Service Size: 200 Amps T-Pole: Yes No

Buford Electric Inc 919-491-5490
Electrical Contractor's Company Name Telephone

2978 Gillespie St. Fayetteville NC 28306 bufordelectric@gmail.com
Address Email Address

31424-U

License # _____

Mechanical/HVAC Contractor Information

Description of Work Install new Heating and HVAC Systems in SFD

Certified Heating and Air Conditioning 910-858-0000
Mechanical Contractor's Company Name Telephone

PO Box 1071 Hope Mills, NC 28348 certifiedheatair@embarqmail.com
Address Email Address

H3C1-20012

License # _____

Plumbing Contractor Information

Description of Work Install all Plumbing in New SFD # Baths _____

Vance Johnson Plumbing Co. Inc 910-424-6712
Plumbing Contractor's Company Name Telephone

PO Box 64307 Fayetteville, NC 28306 wbleacher@vjplumbing.com
Address Email Address

07756

License # _____

Insulation Contractor Information

Tatum Insulation II, Inc - 519 Old Drug Store Rd. Garner, NC 27529 919-661-0999
Insulation Contractor's Company Name & Address Telephone

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

