

Application #	

\* Each section below to be filled out by whomever performing work! Must be owner/occupier or licensed contractor. Address, company name & phone must match informa

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Application for Residential	Building	and	<b>Trades</b>	Permit		
Application	101	CONTRACTOR OF STREET	AND CHARLES			

tor. Address, company  Application for Residential Building and Tra	
tion on license.	INC. Date: 3/11/21
Owner's Name: Benjamin Stout Real Estate Services.	5 5 5 6 5 10
Site Address: Dove Rol., Cameron, No. 28321	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Subdivision: Spartan Ridge	Lot: U
Description of Proposed Work: New SFD	Total Job Cost: \$304,950
General Contractor Information	
Benjamin Stout Roal Estate Services, Inc.	910-779-0019
Building Contractor's Company Name	Telephone
POBOX 53798. Fayetteville, NC 28305	meganebenstoutconstruction Email Address
Address	Hel Hel
69633-U HEATED SQ FT 2,288 BARAGE SQ	1 4 4 1 m
License # Electrical Contractor Information	n
Description of Work New InStall Service Size:	Amps 1-Pole: TesNO
Southern Pride Electrical	919-486-8855
Electrical Contractor's Company Name	Telephone
370 Slapout Rd., Mt. Olive, NC 29365	Email Address
Address and a succional notice regimes tensione beniefly and the de-	Elliali Address
24726	
License #  Mechanical/HVAC Contractor Inform	mation
Description of Work New Install	100 million and 100 million (1) 20 0 200 million
Covinced Heating 1 AC	910-858-0000
Mechanical Contractor's Company Name	Telephone
POBOX 1071, Hope Mills, NC 28348	ehrin certifiede amail com
Address	Email Address
20012-H3-C1	per variants ser guiani camasis d
License # Plumbing Contractor Informati	ion?
	# Baths shi we note:
Description of Work New Install	919-902-0990
Titans Plumbing Plumbing Contractor's Company Name	Telephone
1034 Brook Fern Way, Raleigh, NC 271409	business etitansplumbing. Col Email Address
Address	Email Address
34800 - C1	
1 1 4	Han
Insulation Contractor Information	910-486-8855
Tricity 334 Mountain Dr. Fayetteville, NC	Telephone
Insulation Contractor's Company Name & Address 28300	. orakitatia

\*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.

Bernald Hill

Signature of Owner/Contractor/Officer(s) of Corporation - CI Charles R. R. R. R. W. 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 permitted at any time during the permitted work from any person, firm or corporation carrying out the work.

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Initial Application Date:	Application #
	CU#
COUNTY OF HARNETT RESIDENTIAL L Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910)	AND USE APPLICATION  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: Behjamin Stout Real Estate Svc, Incomailing Add	ress: PO Box 53798
City: Fayetteville State: NC Zip: 28805 Contact No: 9	
APPLICANT Benjamin Stout Real Estate Mailing Address: Po	Box 53798
City: Faur Heville State: N. Zip: 28305 Contact No: 91 *Please fill out applicant information if different than landowner	
ADDRESS: DOVE Rd., Cameron, NC 28324PIN:	9546-65-8818.000
Zoning: 0.76 Minimal Little ever  Zoning: 0.76 Flood: Flood Watershed in 2 Deed Book / Page  Qures Plack: Class-W5111 - Haw  Setbacks - Front: Back: Side: Corne	3952:0478
Setbacks - Front: Back: Side: Corne	r:
PROPOSED USE:	Monolithic,
☐ SFD: (Size 426 x38 ) # Bedrooms: 4 # Baths: 3 Basement(w/wo bath):_	
(Is the bonus room finished? () yes () no w/ a clo	set? () yes () no (a yes add in with a bedrooms)
Mod: (Sizex) # Bedrooms # Baths Basement (w/wo bath) (Is the second floor finished? () yes () noAny or	Garage:Site Built Deck:On FrameOff Frame
(Is the second moor milished: () yes () incniny of	
☐ Manufactured Home: _SW _ DW _ TW (Sizex) # Bedroom	ns: Garage:(site built?) Deck:(site built?)
☐ Duplex: (Sizex) No. Buildings: No. Bedrooms Per	Unit:
☐ Home Occupation: # Rooms: Use: Hou	rs of Operation:#Employees:
Addition/Accessory/Other: (Sizex) Use:	Closets in addition? () yes () no
Water Supply:CountyExisting WellNew Well (# of dwellings of	using well) *Must have operable water before final
Sewage Supply: New Septic Tank Expansion _ Relocation _ Existing Value   New Septic Tank Expansion _ Relocation _ Existing Value   New Septic Tank Expansion _ Relocation _ Relocation _ Existing Value   New Septic Tank Expansion _ Relocation _ R	ng Septic Tank Jounty Sewer
(Complete Environmental Health Checklist on other side of application Does owner of this tract of land, own land that contains a manufactured home within fi	IT SEDUCI
Does the property contain any easements whether underground or overhead () yes	
Structures (existing or proposed): Single family dwellings: Manufac	tured Homes: Other (specify):
If permits are granted I agree to conform to all ordinance and laws of the State of No I hereby state that foregoing statements are accurate and correct to the best of my kn	owledge. Permit subject to revocation if false information is provided.
	3/23/21
Signature of Owner or Owner's Agent  ***It is the owner/applicants responsibility to provide the county with any application to: boundary information, house location, underground or overhead easem incorrect or missing information that is con  *This application expires 6 months from the initial	Date cable information about the subject property, including but not limited ents, etc. The county or its employees are not responsible for any tained within these applications.***

APPLICATION CONTINUES ON BACK

strong roots • new growth

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DEST TOTAL CONTRACT STREET



## \*\*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

Accessible So That A Complete Site Evaluation Can Be Performed.

## "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.
{}} Accepted	{ } Innovative { \sqrt{ Conventional } { } Any
{ } Alternative	{ } Other
The applicant shall notify question. If 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 { 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 {\sqrt{no}}	Does or will the building contain any drains? Please explain.
{ }YES { \sqrt{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?
{ <b>✓</b> }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 Applicat	tion And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And State
Officials Are Granted Righ	nt Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules. I
Understand That I Am Sol	lely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making The Site

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