

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

name & phone must match	Application for Residential Building array	E BET OF PRICES 2. S. LECTOR OF MODES (100)
	. Oh a Bara Soldings	S. INC. Date: 3/11/21
Owner's Name: Ben	jamin Stout Real Estate Services	010 77G MOIG
Site Address:D	we Rd., Cameron, NC 2832	
Subdivision: Spar	tan Ridge	Lot:
Description of Propos	sed Work: NEW SFD	
	General Contractor Information	on
Raviania Stal	ut poal Estate Services, Inc.	910-779-0019
Building Contractor's	Company Name	Telephone
PO 81X 5379	18. Fayether/1/e, NC 2830S	meganebenstoutconstruction Email Address
Address	1	and the second s
69633-L	HEATED SOFT 2,389 GARAGES	56F 559
License #	Electrical Contractor Informat	ion
Description of Work	New InStall Service Size	200 Amps 1-Pole1es10
Coulthorn P	ride Electrical	919-4-86-8855
Electrical Contractor	's Company Name	Telephone
270 Gapnut	Rd. Mt. Olive, NC 29365	Email Address
Address	and has obtained vorkers' companiestion insurance	Email Address
24726	- North Calver	ng mentagod of earlier to (1) sago of
License #	Mechanical/HVAC Contractor Info	ormation
	( 1 - 0 - 0 )	and another property and the second
Description of Work	New Install	910-858-0000
<u>Certified</u> It	tor's Company Name	Telephone
Mechanical Contrac	ctor's Company Name	ehrin certifiede amail com
Address	II, HOPE WINS, I've was to	Email Address
20012-H3	-Cleanes s, wyonan enzuenes so sapraggios s	
License #		Frank Area of the sale and the sale and the sale and
	Plumbing Contractor Informa	
Description of World	New Install	# Baths
Titans DI	umbina	Telephone
	or's Company Name	4
1034 Brook	Fern Way, Rakigh, NC 27409	<u>Dusiness etitans plumbing.</u> Col
Address	) J	
34800 - CI		
License #	Insulation Contractor Inform	nation Out (10)
Tricitu	234 Mountain Dr. Fauetteville, NC	910-486-8855
Insulation Contrac	tor's Company Name & Address 28300	
<i>J</i>		

\*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.

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.

Signature of Owner Contractor/Officer(s) of Corporation

Date

72	Maria War as part of a contraction of the second of the
	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.
n <sup>31</sup> - 35	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.
	Sign w/Title: Date: 3/11/21

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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: Benjamin Start Real Estate SVS, Inc. Mailing Add	ress: PO Box 53798
City: Fayetteville State: NC Zip: 28305 Contact No: 91	0-779-0019 Email: Megan Shenst out construction
APPLICANT BENGMIN STOUT Real Estate SVS. Inc. Po	Box 53798
City: Faucheville State: NC Zip: 2805 Contact No: 91 *Please fill out applicant information if different than landowner	0-979-0019 Email: Residentiale benstout constructi
ADDRESS: PIN:	9546-126-4093.000
*Please fill out applicant information if different than landowner  ADDRESS:  RA-2DR Minimal  Zoning: 0.77 Flood: Flood Watershed: W	:3952:0478
Setbacks - Front: Back: Side: Corne	r:
PROPOSED USE:	
SFD: (Size $\frac{40' \times 51'}{}$ ) # Bedrooms: # Baths: Basement(w/wo bath):	Garage:Deck:Crawl Space:Slab:Slab:
(Is the bonus room finished? () yes () no w/ a close	set? () yes () no (if yes add in with # bedrooms)
☐ Mod: (Sizex) # Bedrooms # Baths Basement (w/wo bath) (Is the second floor finished? () yes () no Any of	
☐ Manufactured Home: _SW _DW _TW (Sizex) # Bedroom	s: 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:County Existing Well New Well (# of dwellings to (Need to Complete New Well	/ell Application e came time as New Tank)  ng Septic Tank County Sewer  if Septic)
Does the property contain any easements whether underground or overhead () yes	<u>√</u> no
Structures (existing or proposed): Single family dwellings: Manufac	tured Homes:Other (specify):
If permits are granted I agree to conform o all ordinances and laws of the State of No I hereby state that foregoing statements are accurate and correct to the best of my known	th Carolina regulating such work and the specifications of plans submitted.  bwledge. Permit subject to revocation if false information is provided.
Signature of Owner or Owner's Agent	3/23/2\ Date
***It is the owner/applicants responsibility to provide the county with any applic to: boundary information, house location, underground or overhead easem incorrect or missing information that is cont *This application expires 6 months from the initia	able information about the subject property, including but not limited ents, etc. The county or its employees are not responsible for any ained within these applications.***

APPLICATION CONTINUES ON BACK

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A CRITCHA TO MILE SEALS



#### \*\*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.

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

SEPTIC If applying for authorization	on to construct please indic	ate desired system type(s):	can be ranked in order of preference, must choose one.
{ } Accepted		Conventional	
{ } Alternative	{ } Other		
The applicant shall notify question. If the answer is	the local health departme "yes", applicant MUST	ent upon submittal of this ATTACH SUPPORTIN	application if any of the following apply to the property in G DOCUMENTATION:
{ }YES { NO	Does the site contain an	y Jurisdictional Wetlands	?
{ }YES { NO	Do you plan to have an	irrigation system now or	in the future?
{ }YES { NO	Does or will the buildin	g contain any <u>drains</u> ? Ple	ase explain
{ }YES { NO	Are there any existing v	vells, springs, waterlines	or Wastewater Systems on this property?
{ }YES { NO	Is any wastewater going	to be generated on the si	te other than domestic sewage?
{ }YES { NO	Is the site subject to app	roval by any other Public	Agency?
{ }YES { NO	Are there any Easement	ts or Right of Ways on thi	s property?
{ -}YES { } NO	Does the site contain an	y existing water, cable, p	hone or underground electric lines?
	If yes please call No C	uts at 800-632-4949 to lo	cate the lines. This is a free service.
I Have Read This Applicat	ion And Certify That The	Information Provided Her	ein Is True, Complete And Correct. Authorized County And State
			termine Compliance With Applicable Laws And Rules. I
Understand That I Am Sol	lely Responsible For The P	roper Identification And I	abeling Of All Property Lines And Corners And Making The Site

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