

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/occupier 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: 7/22/2021
Site Address: 122 Kensington Drive	Phone: 919972004
Subdivision: Crossing at Anderson Creek	Lot: 208
11.00	Total Job Cost: 166,000
General Contractor Information	
Capitol City Homes	919-872-0048
Building Contractor's Company Name	Telephone
5711 Six Forks Rd, Suite 200, Raleigh, NC 27609	irivera@capitolcity-homes.com
Address	Email Address
70324 HEATED SQ FT 20 16 GARAGE SC	1100
License #	ZIEIL ( . C
Electrical Contractor Information	<u>n</u>
Description of Work New Electrical Wiring SFH Service Size:	
Buford Electrical INC	919-481-5490
Electrical Contractor's Company Name	Telephone
2978 Gillespir St. Fayetteville, NC 28306	bufordeletric@gmail.com
Address	Email Address
31424-U	
License #	-41
Mechanical/HVAC Contractor Inform	<u>iation</u>
Description of Work Install New Heating & Air System in SFH	
Certified Heating 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 Informatio	n.
Description of Work Install all plumbing in SFH	_# Baths <sup>2.5</sup> 910-424-6712
Vance Johnson Plumbing Co, INC	<del></del>
Plumbing Contractor's Company Name	Telephone
PO Box 64307, Fayetteville, NC 28306	wbleacher@vjplumbing.com
Address	Email Address
07756	
License #  Insulation Contractor Information	an .
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.



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.

$\mathcal{M}$	7/22/2021	
Signature of Owner/Contractor/Officer(s) of Corporation	Date	
Affidavit for Worker's Component Undersigned applicant being the:	ensation N.C.G.S. 87-14	
x General Contractor Owner C	Officer/Agent of the Contractor or Owner	
Do hereby confirm under penalties of perjury that the personal forth in the permit:	on(s), firm(s) or corporation(s) performing the work	
Has three (3) or more employees and has obtained	workers' compensation insurance to cover them.	
Has one (1) or more subcontractors(s) and has obtathem.	ained workers' compensation insurance to cover	
Has one (1) or more subcontractors(s) who has the covering themselves.	ir own policy of workers' compensation insurance	
Has no more than two (2) employees and no subco	ntractors.	
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: 7/22/2021	



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\*\* Mailing Address:\_\_\_\_5711 Six Forks Rd, Suite 200 Capitol City Homes, LLC LANDOWNER: State: NC Zip: 27609 Contact No: 919-872-0048 x 106 Email: irivera@capitolcity-homes.com City: Raleigh APPLICANT\*: Ivette Rivera Same as above Mailing Address:\_ City: State: Contact No: Email: \*Please fill out applicant information if different than landowner ADDRESS: Watershed: PROPOSED USE: #Baths:\_\_\_ Basement(w/wo bath); Garage: Deck: Crawl Space: Slab: \_) # Bedrooms:\_\_\_ GARAGE SQ FT498 (Is the bonus room finished? (\_\_) yes (\_\_) no w/ a closet? (\_\_) yes (\_\_) no (if yes add in with # bedrooms) ) # Bedrooms\_\_\_ # Baths\_\_\_ Basement (w/wo bath)\_\_\_ Garage:\_\_\_ Site Built Deck:\_\_\_ On Frame\_\_\_ Off Frame\_\_\_ (is the second floor finished? (\_\_\_) yes (\_\_\_) no Any other site built additions? (\_\_\_) yes (\_\_\_) no TOTAL HTD SQ FT Manufactured Home: \_\_\_SW \_\_\_DW \_\_\_TW (Size \_\_\_\_x \_\_\_) # Bedrooms: \_\_\_\_ Garage: \_\_\_(site built?\_\_\_) Deck: \_\_\_(site built?\_\_\_) Duplex: (Size \_\_\_\_x\_\_\_) No. Buildings:\_\_\_\_\_\_No. Bedrooms Per Unit:\_\_\_\_\_\_ TOTAL HTD SQ FT \_\_\_\_ Use:\_\_\_\_ Home Occupation: # Rooms: Hours of Operation: Addition/Accessory/Other: (Size \_\_\_\_x\_\_\_) Use:\_\_\_\_\_\_ Closets in addition? (\_\_) yes (\_\_) no TOTAL HTD SQ FT GARAGE Water Supply: \_\_ County \_\_\_\_ Existing Well \_\_\_\_ New Well (# of dwellings using well \_ \_) \*Must have operable water before final (Need to Complete New Well Application at the same time as New Tank) Expansion\_ \_\_Relocation\_\_\_\_Existing Septic Tank \_\_\_\_ County Sewer New Septic Tank (Complete Environmental Health Checklist on other side of application if Septic) Does owner of this tract of land, own land that contains a manufactured home within five hundred feet (500') of tract listed above? ( ) yes ( ) no Does the property contain any easements whether underground or overhead (\_\_\_) yes (\_\_\_) no Structures (existing or proposed): Single family dwellings:\_\_\_\_\_ Manufactured Homes:\_\_\_ 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. I hereby state that foregoing statements are a culate and correct to the best of my knowledge. Permit subject to revocation if false information is provided. 7/22/2021 Signature of Owner or Owner's Agent Date

**APPLICATION CONTINUES ON BACK** 

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\*\*\*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\*\*



#### \*\*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, stc. once lot confirmed ready.

#### □ Environmental Health Existing Tank\nspections

- 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"

<u>SEPTIC</u>	
If applying for authoriz	zation to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.
{}} Accepted	{} Innovative {} Conventional {} Any
{} Alternative	{}} Other
	tify the local health department upon submittal of this application if any of the following apply to the property in er is "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:
{}}YES	Does the site contain any Jurisdictional Wetlands?
}YES	Do you plan to have an <u>rrigation system</u> now or in the future?
{}}YES	Does or will the building contain any drains? Please explain.
{}}YES	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
{_}}YES	Is any wastewater going to be generated on the site other than domestic sewage?
{_}}YES	Is the site subject to approval by any other Public Agency?
{_}}YES	Are there any Easements or Right of Ways on this property?
{_}}YES	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 Light 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.

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