



Initial Application Date: 11.24.21

Application # SFD 2109-0023

CU# \_\_\_\_\_

Central Permitting 420 McKinney Pkwy, Lillington, NC 27546 Phone: (910) 893-7525 ext:1 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: Carol Construction Homes, Inc Mailing Address: 63 Veron Ct.  
City: Willow Springs State: NC Zip: 27592 Contact No: 919-639-3281 Email: \_\_\_\_\_

APPLICANT: G.C. Adams Construction, Inc Mailing Address: 10000 Raleigh Rd  
City: Benson State: NC Zip: 27504 Contact No: 919-868-7700 Email: cameron.adams1087@gmail.com  
\*Please fill out applicant information if different than landowner

ADDRESS: \_\_\_\_\_ PIN: 039589 1034 55

Zoning: P-20 Flood: \_\_\_\_\_ Watershed: \_\_\_\_\_ Deed Book / Page: 2021/325 9597-48-2892

Setbacks - Front: 35 Back: 25 Side: 10 Corner: \_\_\_\_\_

**PROPOSED USE:**

SFD: (Size 464' x 55') # Bedrooms: 3 Baths: 2 Basement(w/w bath): \_\_\_\_\_ Garage:  Deck:  Crawl Space:  Slab: \_\_\_\_\_ Monolithic Slab: \_\_\_\_\_  
TOTAL HTD SQ FT 1460 GARAGE SQ FT 467 (Is the bonus room finished? ( ) yes (X) no w/ a closet? ( ) yes (X) no (if yes add in with # bedrooms)

Modular: (Size \_\_\_\_\_ x \_\_\_\_\_) # Bedrooms \_\_\_\_\_ # Baths \_\_\_\_\_ Basement (w/w bath) \_\_\_\_\_ Garage: \_\_\_\_\_ Site Built Deck: \_\_\_\_\_ On Frame \_\_\_\_\_ Off Frame \_\_\_\_\_  
TOTAL HTD SQ FT \_\_\_\_\_ (Is the second floor finished? ( ) yes ( ) no Any other site built additions? ( ) yes ( ) no

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 \_\_\_\_\_

Home Occupation: # Rooms: \_\_\_\_\_ Use: \_\_\_\_\_ Hours of Operation: \_\_\_\_\_ #Employees: \_\_\_\_\_

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)

Sewage Supply:  New Septic Tank \_\_\_\_\_ Expansion \_\_\_\_\_ Relocation \_\_\_\_\_ Existing Septic Tank \_\_\_\_\_ County Sewer  
(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 (X) no

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

Structures (existing or proposed): Single family dwellings: \_\_\_\_\_ 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. I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

[Signature] Signature of Owner or Owner's Agent Date 11/24/2021

**\*\*\*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 3<sup>rd</sup> Party Engineer

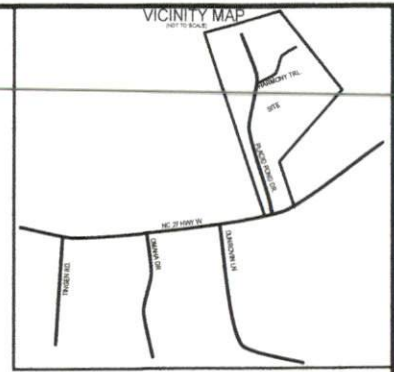
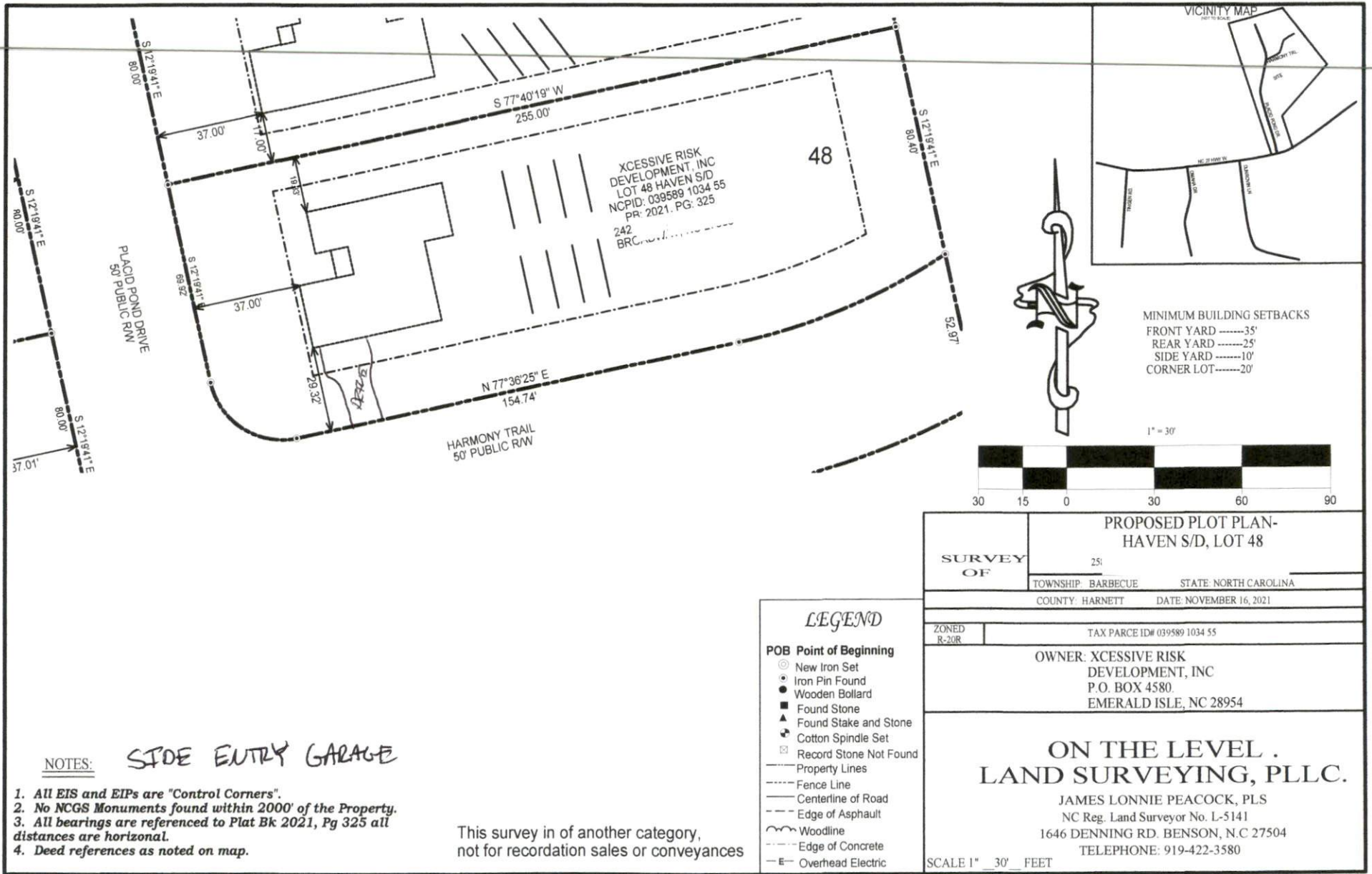
The applicant shall notify the local health department upon submittal of this application if any of the following apply to the property in question. If the answer is "yes", applicant **MUST ATTACH SUPPORTING DOCUMENTATION**:

- 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.**

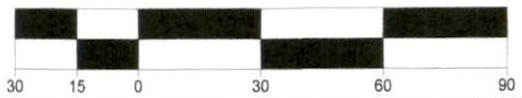




MINIMUM BUILDING SETBACKS  
 FRONT YARD -----35'  
 REAR YARD -----25'  
 SIDE YARD -----10'  
 CORNER LOT -----20'



1" = 30'



SURVEY OF		PROPOSED PLOT PLAN- HAVEN S/D, LOT 48	
		251	
TOWNSHIP: BARBECUE		STATE: NORTH CAROLINA	
COUNTY: HARNETT		DATE: NOVEMBER 16, 2021	
ZONED R-20R	TAX PARCE ID# 039589 1034 55		
OWNER: XCESSIVE RISK DEVELOPMENT, INC P.O. BOX 4580, EMERALD ISLE, NC 28954			
<b>ON THE LEVEL .</b> <b>LAND SURVEYING, PLLC.</b> JAMES LONNIE PEACOCK, PLS NC Reg. Land Surveyor No. L-5141 1646 DENNING RD. BENSON, N.C 27504 TELEPHONE: 919-422-3580			
SCALE 1" = 30' FEET			

- LEGEND**
- POB Point of Beginning
  - New Iron Set
  - Iron Pin Found
  - Wooden Bollard
  - Found Stone
  - ▲ Found Stake and Stone
  - Cotton Spindle Set
  - ☒ Record Stone Not Found
  - Property Lines
  - Fence Line
  - Centerline of Road
  - - - Edge of Asphalt
  - ~ Woodline
  - - - Edge of Concrete
  - E- Overhead Electric

NOTES:

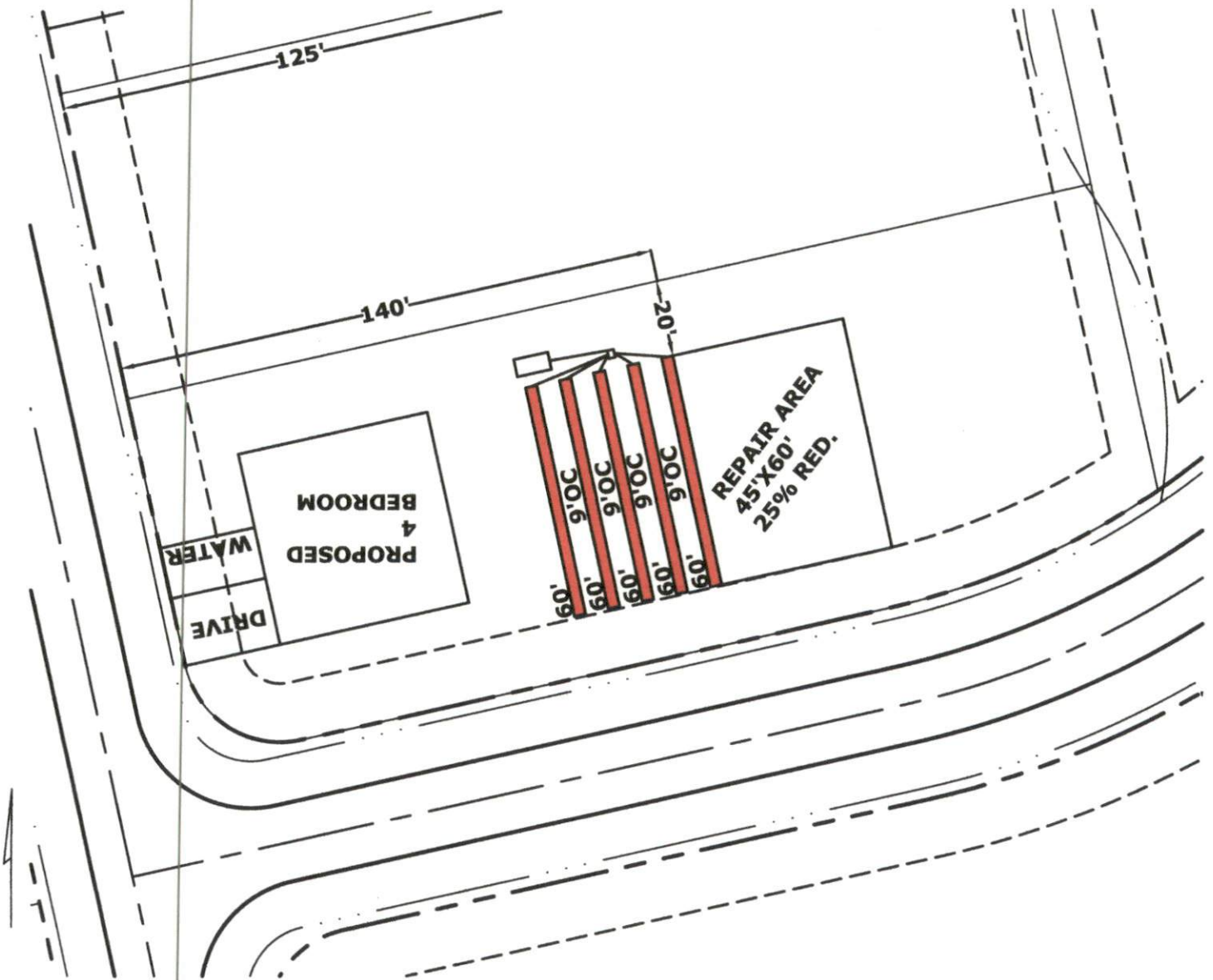
*SIDE ENTRY GARAGE*

1. All EIS and EIPs are "Control Corners".
2. No NCGS Monuments found within 2000' of the Property.
3. All bearings are referenced to Plat Bk 2021, Pg 325 all distances are horizontal.
4. Deed references as noted on map.

This survey in of another category,  
not for recordation sales or conveyances

Owner: HAVEN S/D  
 Address: LOT 48  
 Location: PLACID POND DRIVE

**PITTMAN SOIL CONSULTING**  
**PO BOX 1387**  
**RICHLANDS, NC 28574**  
**910-330-2784**  
**[pittmansoil@yahoo.com](mailto:pittmansoil@yahoo.com)**



**INITIAL**  
 4 BEDROOM  
 LTAR .4  
 5-60' 25% REDUCTION  
 12-18" TB  
 >6" SOIL COVER REQUIRED OVER  
 SYSTEM AND 5' BEYOND SYSTEM

**REPAIR AREA**  
 4 BEDROOM  
 LTAR .4  
 5-60' 25% REDUCTION  
 12-18" TB  
 >6" SOIL COVER REQUIRED OVER  
 SYSTEM AND 5' BEYOND SYSTEM



**APPROX SCALE 1"=40'**





Application # \_\_\_\_\_

**Harnett County Central Permitting**

420 McKinney Pkwy Lillington, NC 27546

PO Box 65 Lillington, NC 27546

910-893-7525 ext. 1 Fax 910-893-2793 www.harnett.org/permits

\* 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: Carroll Construction Homes, Inc Date 11/22/2024  
 Site Address: \_\_\_\_\_ Phone 919-868-7700  
 Subdivision: HAVEN Lot 4B  
 Description of Proposed Work: NEW RESIDENTIAL Total Job Cost 265,000

**General Contractor Information**

G.C. ADAMS Construction, INC. 919-868-7700  
 Building Contractor's Company Name Telephone  
1000 Raleigh Road Benson NC 27504 cameron.adams1087@gmail.com  
 Address Email Address  
81270 HEATED SQ FT 1488 GARAGE SQ FT 487  
 License #

**Electrical Contractor Information**

Description of Work NEW RESIDENTIAL Service Size: 200 Amps T-Pole:  Yes  No  
R.A. JACKSON Electric 919-894-5367  
 Electrical Contractor's Company Name Telephone  
9261 Raleigh Road Benson NC 27504  
 Address Email Address  
21144SFD  
 License #

**Mechanical/HVAC Contractor Information**

Description of Work NEW RESIDENTIAL  
Stephenson Heating & AIR INC 919-329-0686  
 Mechanical Contractor's Company Name Telephone  
343 Shipwash DR GARNER NC 27529  
 Address Email Address  
18644  
 License #

**Plumbing Contractor Information**

Description of Work NEW RESIDENTIAL # Baths 2  
Ambit Plumbing 919-934-1379  
 Plumbing Contractor's Company Name Telephone  
755 Rock Pillar RD CLAYTON NC 27520  
 Address Email Address  
20823  
 License #

**Insulation Contractor Information**

TATUM INSULATION II 519 OLD BUG STORE RD 919-661-0999  
 Insulation Contractor's Company Name & Address GARNER NC Telephone  
27529

\*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.

[Signature]  
Signature of Owner/Contractor/Officer(s) of Corporation

11/22/2021  
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.

Sign w/Title: [Signature]

PRESIDENT

Date: 11/22/2021

**DO NOT REMOVE!**

**Details: Appointment of Lien Agent**  
Entry #: 1584508

Filed on: 11/22/2021  
Initially filed by: cameronadams

**Designated Lien Agent**

Investors Title Insurance Company

Online: [www.liensnc.com](http://www.liensnc.com) (http://www.liensnc.com)

Address: 223 S. West Street, Suite 900 /  
Raleigh, NC 27603

Phone: 888-690-7384

Fax: 919-489-5231

Email: [support@liensnc.com](mailto:support@liensnc.com) (mailto:support@liensnc.com)

**Owner Information**

G.C. Adams Construction, Inc  
10000 Raleigh Road  
Benson, NC 27504  
United States  
Email: [cameron.adams1087@gmail.com](mailto:cameron.adams1087@gmail.com)  
Phone: 919-868-7700

View Comments (0)

**Project Property**

Lot 48 haven

broadway, NC 27503  
harnett County

**Property Type**

1-2 Family Dwelling

**Date of First Furnishing**

11/22/2021

**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.

**Technical Support Hotline:** (888) 690-7384