

Initial Application Date: 11/4/21

Application # _____

CU# _____

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 Fax: (910) 893-2793 www.harnett.org/permits

LANDOWNER: John Crooks Mailing Address: 20 Wallace Lane

City: Lillington State: NC Zip: 27546 Contact # 910-658-2569 Email: crooks@campbell.edu

APPLICANT*: Southeastern Construction of Buies Creek Mailing Address: PO Box 157

City: Buies Creek State: NC Zip: 27506 Contact # 919-242-2443 Email: michael@si-nc.com

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Michael E Weaver Phone #: 919-282-2443

PROPERTY LOCATION: Subdivision: Keith Hills 1228 Keith Hills Rd Lot #: 136 Lot Size: .49

State Road #: _____ State Road Name: Keith Hills Rd Map Book&Page: 1742 1684

Parcel: 110579 0172 PIN: 0579-16-7182.000

Zoning: Conservation Flood Zone: 100yr 1500yr Watershed: _____ Deed Book&Page: 1856 10326 Power Company*: Duke Energy

*New structures with Progress Energy as service provider need to supply premise number _____ from Progress Energy.

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Take 421 from Lillington to Buies Creek, Turn right into Keith Hills

House will be on the right approx. 1 mile 1228 Keith Hills Rd

PROPOSED USE:

- SFD: (Size 38 x 61) # Bedrooms: 3 # Baths: 2 1/2 Basement(w/wo bath): _____ Garage: Deck: Crawl Space: Slab: _____ Monolithic Slab: _____
(Is the bonus room finished? yes () no w/ a closet? () yes () no (If yes add in with # bedrooms)
- Mod: (Size _____ x _____) # 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
- 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: County _____ Existing Well _____ New Well (# of dwellings using well _____) *MUST have operable water before final

Sewage Supply: _____ New Septic Tank (Complete Checklist) _____ Existing Septic Tank (Complete Checklist) 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 no

Structures (existing or proposed): Single family dwellings: _____ Manufactured Homes: _____ Other (specify): _____

Required Residential Property Line Setbacks: _____ Comments: _____

	Minimum	Actual	Comments:
Front	<u>35</u>	<u>39</u>	
Rear	<u>25</u>	<u>75</u>	
Closest Side	<u>10</u>	<u>15</u>	
Sidestreet/corner lot	<u>20</u>	<u>N/A</u>	
Nearest Building on same lot	<u>5</u>	<u>N/A</u>	

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.

Michael E Weaver
Signature of Owner or Owner's Agent

11-4-21
Date

This application expires 6 months from the initial date if permits have not been issued
A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION

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


Application # _____
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

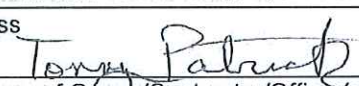
Owner's Name: John Crooks Date: 9/27/21 11-4-21
Site Address: 1228 Keith Hills Rd Phone: _____
Directions to job site from Lillington: Take Hwy 421 from Lillington to Bules Creek. Turn Right into Keith Hills
Subdivision and proceed approx. 1.5 miles and lot will be on the right.

Subdivision: Keith Hills Lot: 136
Description of Proposed Work: New Residential Construction # of Bedrooms: 3
Heated SF: 2219 Unheated SF: 1317 Finished Bonus Room? _____ Crawl Space: _____ Slab:

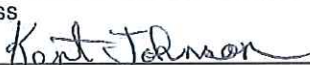
General Contractor Information

Southeastern Construction of Bules Creek, LLC 919-282-2443
Building Contractor's Company Name Telephone
PO Box 157 Bules Creek, NC 27506 michael@sl-nc.com
Address Email Address
 62649
Signature of Owner/Contractor/Officer(s) of Corporation License #


Electrical Contractor Information

Description of Work Electrical for New Construction Service Size: 200 Amps T-Pole: Yes No
Patrick Electrical Contractors 910-893-5774
Electrical Contractor's Company Name Telephone
1309 North Main Street / Lillington, NC 27546 tommypatrick910@gmail.com
Address Email Address
 4910U
Signature of Owner/Contractor/Officer(s) of Corporation License #

Mechanical/HVAC Contractor Information

Description of Work HVAC for New Construction
J&M Heating and Air
Mechanical Contractor's Company Name Telephone
724 Turlington Rd / Dunn, NC 28334 910-897-5501
Address Email Address
 17164
Signature of Owner/Contractor/Officer(s) of Corporation License #

Plumbing Contractor Information

Description of Work Plumbing for New Construction # Baths 2.5
Young's Electrical Inc
Plumbing Contractor's Company Name Telephone
10590 NC-210 / Angier, NC 27501 919-639-2297
Address Email Address
 20693
Signature of Owner/Contractor/Officer(s) of Corporation License #

Insulation Contractor Information

Tri City Insulation
Insulation Contractor's Company Name & Address Telephone

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

Homeowners Applying to Build Their Own Home

Please answer the following questions then see a Permit Technician to determine if you qualify for permit under Owners Exemption. Questionnaire per G.S. 87-14 Regulations as to Issue of Building Permits (Memo available upon request)

1. Do you own the land on which this building will be constructed? Yes No
2. Have you hired or intend to hire an individual to superintend and manage construction of the project? Yes No
3. Do you intend to directly control & supervise construction activities? Yes No
4. Do you intend to schedule, contract, or directly pay for all phases of construction work to be done? Yes No
5. Do you intend to personally occupy the building for at least 12 consecutive months following completion of construction and do you understand that if you do not do so, it creates the presumption under law that you fraudulently secured the permit? Yes No

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 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 of Owner/Contractor/Officer(s) of Corporation

9-27-21 11-4-21
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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.

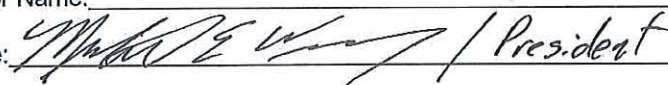
Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them.

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.

Company or Name: Southeastern Construction of Buies Creek, LLC

Sign w/Title:  / President

Date: 9/27/21 11-4-21