

Birch



Initial Application Date: 2/14/25

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

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

**COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION**

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: LGI Homes Mailing Address: 1450 Lake Robbins Drive Ste 430  
City: The Woodlands State: TX Zip: 77380 Contact No: 919-520-8406 Email: oliver.hudson@lgihomes.com

APPLICANT: LGI Homes Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Contact No: \_\_\_\_\_ Email: \_\_\_\_\_  
\*Please fill out applicant information if different than landowner

ADDRESS: 405 Chedworth Drive, Angier, NC 27501 PIN: \_\_\_\_\_

Zoning: \_\_\_\_\_ Flood: \_\_\_\_\_ Watershed: \_\_\_\_\_ Deed Book / Page: \_\_\_\_\_

Setbacks - Front: \_\_\_\_\_ Back: \_\_\_\_\_ Side: \_\_\_\_\_ Corner: \_\_\_\_\_

**PROPOSED USE:**

SFD: (Size 39.10x96) # Bedrooms: 3 # Baths: 2.5 Basement (w/wo bath): \_\_\_\_\_ Garage:  Deck: \_\_\_\_\_ Crawl Space: \_\_\_\_\_ Slab: \_\_\_\_\_ Monolithic Slab:   
**TOTAL HTD SQ FT** 1792 **GARAGE SQ FT** 449 (Is the bonus room finished? ( ) yes ( ) no w/ a closet? ( ) yes ( ) no (if yes add in with # bedrooms)

Modular: (Size \_\_\_\_\_ x \_\_\_\_\_) # Bedrooms \_\_\_\_\_ # Baths \_\_\_\_\_ Basement (w/wo 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 ( ) no

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

Structures (existing or proposed): Single family dwellings: proposed 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.

Oliver Hudson  
Signature of Owner or Owner's Agent

2/14/25  
Date

**\*\*\*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



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: LGI Homes Date \_\_\_\_\_  
Site Address: 405 Chedworth Drive, Anger, NC 27501 Phone 919-520-8406  
Subdivision: Atherstone Lot 314  
Description of Proposed Work: New Construction Total Job Cost \$125,000

General Contractor Information

LGI Homes Telephone 919-520-8406  
Building Contractor's Company Name  
1450 Lake Robbins Dr. Ste 430, The Woodlands, TX 77380  
Address  
74803  
License # HEM103011742 CAR103011449  
Email Address oliver.hudson@lgihomes.com

Electrical Contractor Information

Description of Work New Construction Service Size: \_\_\_\_\_ Amps T-Pole:  Yes  No  
J Crabtree Telephone 919-667-1600  
Electrical Contractor's Company Name  
103 Fleming St., Creedmoor NC 27522  
Address  
20925  
License # \_\_\_\_\_  
Email Address j-crabtreeinc@yahoo.com

Mechanical/HVAC Contractor Information

Description of Work New Construction  
Caryl Mechanical Telephone 704-882-4522  
Mechanical Contractor's Company Name  
5910 Stockbridge Dr., Monroe NC 28110  
Address  
16647  
License # \_\_\_\_\_  
Email Address byrd@carylmechanicals.com

Plumbing Contractor Information

Description of Work New Construction # Baths \_\_\_\_\_  
Titans Plumbing Telephone 919-618-1947  
Plumbing Contractor's Company Name  
PO Box 1045, Dunn NC 28335  
Address  
34800  
License # \_\_\_\_\_  
Email Address business@titansplumbing.com

Insulation Contractor Information

Tatum Insulation Telephone 919-661-0999  
Insulation Contractor's Company Name & Address

**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.**

*Karl Lee*  
Signature of Owner/Contractor/Officer(s) of Corporation

\_\_\_\_\_  
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: *Karl Lee - Regional Construction Manager* Date: *2/14/05*