

Initial Application Date:					
DRB # CU #					
COMMERCIAL COUNTY OF HARNETT LAND USE APPLICATION					
Central Permitting (Physical) 420 McKinney Pkwy, Lillington, NC 27546 (Mailing) PO Box 65 Lillington NC 27546 Phone: (910) 893-7525 opt # 1 Fax: (910) 893-2793 www.harnett.org/permits					
LANDOWNER: Moore HL Properties, Inc Mailing Address: 55 Walnut Creek Road					
City: Pinehurst State: NCZip: 28374 Contact # Email:					
APPLICANT*: Caviness & Cates Building and Development Company Mailing Address: 639 Executive Place, Ste 400					
City: Fayetteville State: NC Zip: 28305 Contact # 910-778-7902 Email: pam@cavinessandcates.com *Please fill out applicant information if different than landowner					
CONTACT NAME APPLYING IN OFFICE: Pamela Geddie Phone # (910) 778-7902					
Address: same as above PIN: 0527-40-7515.000					
Zoning: Watershed: Flood: Deed Book Page:/ .					
Setbacks - Front: Back: Side: Corner:					
PROPOSED USE:					
☐ Multi-Family Dwelling No. Units: No. Bedrooms/Unit:					
□ Business Sq. Ft. Retail Space:Type:# Employees: Hours of Operation:					
Daycare # Preschoolers: # Afterschoolers: # Employees: Hours of Operation:					
□ Industry Sq. Ft: # Employees: Hours of Operation:					
□ Church Seating Capacity: # Bathrooms: Kitchen:					
Accessory/Addition/Other (Size 31 x 7) Use: May Klosk					
Water Supply: NA County NA Existing Well NA New Well (# of dwellings using well NA) *Must have operable water before final					
(Need to Complete New Well Application at the same time as New Tank)					
Sewage Supply NA New Septic Tank NA Expansion NA Relocation NA Existing Septic Tank NA County Sewer (Complete Environmental Health Checklist on other side of application if Septic					
Comments:					
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					
Q1 × 10, 10-					
Signature of Owner's Agent Date					

This application expires 6 months from the initial date if permits have not been issued

RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION

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

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

"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				
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 <u>irrigation system</u> 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.

*Each section below must be filled out by whoever is performing the work. Must be owner or licensed contractor. Address, company name & phone must match information on state license.

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

COMMERCIAL

Application for Building and Trades Permit

Owner's Name: Moore HL Properties, Inc	Date: 8/26/25
455 DL L D. L L	Phone:
Directions to job site from Lillington:	
Subdivision: Ducks Landing	Lot:
Description of Proposed Work: May Krosk	
Heated SF Unheated SF <u>General Contractor Information:</u> Building Cost \$ J	17 500
General Contractor Information: Building Cost \$	15,500
Caviness & Cates Building and Development Company	(910) 778-7902
Building Contractor's Company Name	Telephone
639 Executive Place, Ste 400 Fayetteville, NC 28305	pam@cavinessandcates.com
Address	Email Address 59586
Signature of Owner/Sontractor/Officer(s) of Corporation	License #
<u>Electrical Contractor Information:</u> Electrical Cost Description of Work Service Size:	Amps #T-Poles
coc	
Electrical Contractor's Company Name	Telephone
Address	Email Address
Signature of Owner/Contractor/Officer(s) of Corporation Mechanical Contractor Information: Mechanical Co	License #
Description of Work	
Mechanical Contractor's Company Name	Telephone
Address	Email Address
Signature of Owner/Contractor/Officer(s) of Corporation Plumbing Contractor Information: Plumbing Cost	License #
Description of Work	# Baths
Plumbing Contractor's Company Name	Telephone
Address	Email Address
Signature of Owner/Contractor/Officer(s) of Corporation	License #
Insulation Contractor Information	
Insulation Contractor's Company Name & Address	Telephone

Sprinkler Contractor Information					
Sprinkler Contractor's Company Name	Telephone				
Address	Email Address				
Signature of Officer(s) of Corporation Fire Alarm Contractor Information	License #				
Fire Alarm Contractor's Company Name	Telephone				
Address	Email Address				
Signature of Officer(s) of Corporation	License #				
<u>Driveway Access</u> - NC Department of Transportation Driveway Access/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 charged at full price per current fee schedule.					
Λ. A.	10. 10				
Signature of Owner/Contractor/Officer(s) of Corporation	8 12 125 Date				
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:					
X 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' cor	mpensation insurance to cover them.				
Has one (1) or more subcontractors(s) and has obtained worker them.	s' compensation insurance to cover				
X Has one (1) or more subcontractors(s) who has their own policy covering themselves.	of workers' compensation insurance				
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: Caviness & Cates Building and Developm	ent Company				
	Date: 8/8/6/25				

