

Initial Application Date: 8/11/13

Application # 1350031849

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****

LANDOWNER: Weaver Homes Mailing Address: 350 Wagoner Drive
City: Fayetteville State: NC Zip: 28303 Contact No: 919-606-4696 Email: cdb1971@gmail.com

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

CONTACT NAME APPLYING IN OFFICE: Dustin Blackwell Phone # 919-606-4696

PROPERTY LOCATION: Subdivision: Shaylah's Knoll Lot #: 1 Lot Size: .57
State Road # _____ State Road Name: Widgeon Way Map Book & Page: 2006 112~
Parcel: 1306300096 PIN: 0630-25-7880.000

Zoning: RA30 Flood Zone: X Watershed: NA Deed Book & Page: 3139 / 0485 Power Company*: Progress Energy
*New structures with Progress Energy as service provider need to supply premise number 83396036 from Progress Energy.

PROPOSED USE:

SFD: (Size 45 x 64) # Bedrooms: 3 # Baths: 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

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

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

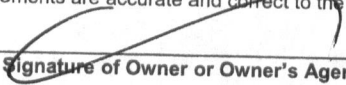
Required Residential Property Line Setbacks:

	Minimum	Actual
Front	35	39
Rear	25	73
Closest Side	10	40
Sidestreet/corner lot	_____	_____
Nearest Building on same lot	_____	_____

Comments: _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Old US 421 North 4 miles outside city limits on right

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 of Owner or Owner's Agent

8/1/13

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****

SITE PLAN APPROVAL

DISTRICT RA 30 USE SE-U

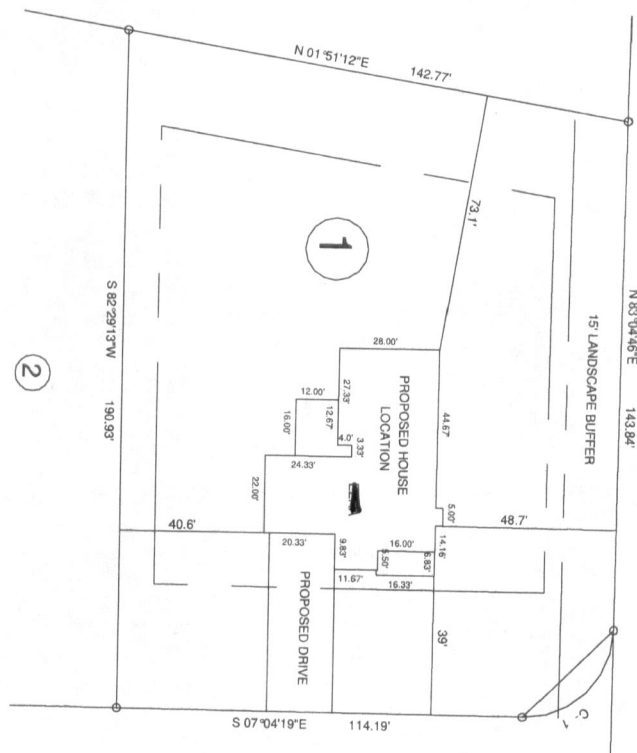
#BEDROOMS 3

8-2-13 V. E. ...
Date Zoning Administrator

MAP NO. 2006-1122

MAP REFERENCE: MAP NO. 2006-1122

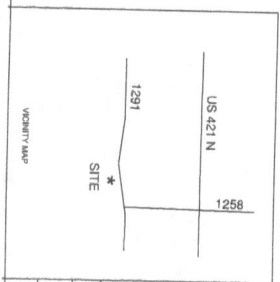
MINIMUM BUILDING SET BACKS
FRONT YARD --- 5'
REAR YARD --- 25'
SIDE YARD --- 10'
CORNER LOT SIDE YARD --- 20'
MINIMUM HEIGHT --- 35'



NCSR # 1291 "OLD US 421" 60' R/W

"WIDGEON WAY" 50' R/W

CURVE	RADIUS	LENGTH	CHORD	CH BEARING
C-1	25.00'	39.21'	35.31'	S 51° 59' 44\"



PROPOSED PLOT PLAN - LOT - 1 SHAYLAH'S KNOWL SUBDIVISION	
TOWNSHIP	UPPER LITTLE RIVER
COUNTY	HARRIETT
STATE	NORTH CAROLINA
DATE	JULY 30, 2013
ZONE	RA-30
WATERSHED DISTRICT	

BENNETT SURVEYS 1682 CLARK RD., LILLINGTON, N.C. 27546 (919) 883-5252	
SCALE: 1" = 50'	DRAWN BY: RVB
CHECKED & CLOSURE BY:	FIELD BOOK
	DRAWING NO. 13289

NAME: Weaver Honey

APPLICATION #: _____

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) 910-893-7525 option 1

CONFIRMATION # _____

- Environmental Health New Septic System** Code 800
 - **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.**
 - After preparing proposed site call the voice permitting system at 910-893-7525 option 1 to schedule and use code **800** (after selecting notification permit if multiple permits exist) for Environmental Health inspection. Please note confirmation number given at end of recording for proof of request.
 - Use Click2Gov or IVR to verify results. Once approved, proceed to Central Permitting for permits.
- Environmental Health Existing Tank Inspections** Code 800
 - 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**
 - After uncovering **outlet end** call the voice permitting system at 910-893-7525 option 1 & select notification permit if multiple permits, then use code **800** for Environmental Health inspection. Please note confirmation number given at end of recording for proof of request.
 - Use Click2Gov or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.

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 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.

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

11/11/13
DATE

09/09/11

Application #

13500 31849

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 or licensed contractor. Address company name & phone must match.

Application for Residential Building and Trades Permit

Owner's Name Weaver Homes Date _____
Site Address 12 Widgaw way Phone _____
Directions to job site from Lillington _____

Subdivision _____ Lot _____
Description of Proposed Work _____ # of Bedrooms _____
Heated SF _____ Unheated SF _____ Finished Bonus Room? _____ Crawl Space _____ Slab _____

General Contractor Information

Weaver Dev
Building Contractor's Company Name _____ Telephone _____
PO Box 53786 Address _____ Email Address _____
26982 License # _____

Electrical Contractor Information

Description of Work New Construction Service Size 200 Amps T-Pole Yes No
J.M. Pope Electric Telephone 919-776-5144
Electrical Contractor's Company Name _____
409 Chatham ST. Sanford, NC Address _____ Email Address _____
21326-L License # _____

Mechanical/HVAC Contractor Information

Description of Work New Construction
Caroline Comfort AEC Telephone 919-934-1060
Mechanical Contractor's Company Name _____
528 W. Market ST Smithfield, NC Address _____ Email Address _____
29077 License # _____

Plumbing Contractor Information

Description of Work New Construction # Baths 2
Jamie Johnson Plumbing Telephone 910-814-7705
Plumbing Contractor's Company Name _____
864 Byrd Road Bunker, NC Address _____ Email Address _____
21649 License # _____

Insulation Contractor Information

MASCO Telephone 910-486-855
Insulation Contractor's Company Name & Address _____

*NOTE General Contractor 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 of Owner/Contractor/Officer(s) of Corporation _____

Date 1/16/13

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 Waver Hous

Sign w/Title [Signature] Date 1/16/13

Jennifer Brock

From: Charles Blackwe <cdb1971@gmail.com>
Sent: Wednesday, August 14, 2013 3:47 PM
To: Jennifer Brock
Subject: Fwd: LiensNC Notice of Appointment of Lien Agent - Address: 12 Widgeon Way, Lillington, 27546

Dustin

Begin forwarded message:

From: LiensNC Support <donotreply@ncliens.com>
Date: August 13, 2013, 10:13:30 AM EDT
To: Undisclosed recipients;;
Subject: LiensNC Notice of Appointment of Lien Agent - Address: 12 Widgeon Way, Lillington, 27546

A(n) Appointment of Lien Agent was filed on August 13, 2013, 10:13:24 AM using the North Carolina Online Lien Agent System (LiensNC). Details of this filing include:

Project Property

Lot#1 Shaylah's Knoll
12 Widgeon Way
Lillington, NC 27546

Entry Number: [36,400 \(entry search, view related filings\)](#)

Date of Filing: August 13, 2013, 10:13:24 AM

Lien Agent

First American Title Insurance Company

- **Online:** www.liensnc.com
- **Address:** 19 W. Hargett St., Suite 507 / Raleigh, NC 27601
- **Phone:** 888-690-7384
- **Fax:** 913-489-5231
- **Email:** support@liensnc.com

Owner Information

Weaver Development Co., Inc.DBA Weaver Homes
350 Wagoner Drive
Fayetteville, NC 28303
United States Email: nmcleod@weavercompanies.com
Phone: 910-433-0888

Contractor Information

Weaver Development Co., Inc:DBA:Weaver Homes
350 Wagoner Drive
Fayetteville, NC 28303
Email: cdb1971@gmail.com
Phone: 919-606-4696

Pre-Permit Workers

NONE

Emails:

1. nmcleod@weavercompanies.com

Date of First Furnishing

August 23, 2013

[Click to view full filing details](#)

Scan for instant access on your mobile phone



[Unsubscribe](#)

HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

LILLINGTON, NC 27546

For Inspections Call: (910) 893-7525 Fax: (910) 893-2793

Bldg Insp scheduled before 2pm available next business day.

Application Number	13-50031849	Date	8/14/13
Property Address	12 WIDGEON WAY		
PARCEL NUMBER	13-0630- - -0096- - -		
Application type description	CP NEW RESIDENTIAL (SFD)		
Subdivision Name	SHAYLAHS KNOLL 36 LOTS		
Property Zoning	PENDING		

Owner	Contractor
-----	-----
WEAVER DEVELOPMENT COMPANY INC	WEAVER DEVELOPMENT CO INC
A NORTH CAROLINA CORPORATION	PO BOX 53786
PO BOX 53786	FAYETTEVILLE
FAYETTEVILLE	NC 28305
NC 28305	(910) 433-0888

Applicant

WEAVER HOMES #1

--- Structure Information 000 000 45X64 3BDR 2BATH SFD W GAR SLAB

Flood Zone	FLOOD ZONE X		
Other struct info	# BEDROOMS		3.00
	PROPOSED USE	SFD	
	SEPTIC - EXISTING?	NEW TANK	
	WATER SUPPLY	COUNTY	

Permit	BLDG, MECH, ELEC, PLB, INSU PERMIT		
Additional desc			
Phone Access Code	995654		
Issue Date	8/14/13	Valuation	0
Expiration Date	8/14/14		

Special Notes and Comments

T/S: 08/02/2013 09:54 AM VBROWN ----

WIDGEON WAY, SHAYLAHS KNOLL SUB DIV #1.

CORNER LOT ON CORNER OF OLD US 421 AND WIDGEON WAY, WITH DRIVEWAY ON WEDGEON WAY, OLD 421 PAST NEIL THOMAS RD, SUB DIV ON LEFT.

XX

PERMIT INCLUDES BLDG, ELEC, MECH, PLUMB INSULATION AND LAND USE.

XX

Work must conform and comply with the STATE BUILDING CODE and all other State

HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

LILLINGTON, NC 27546

For Inspections Call: (910) 893-7525 Fax: (910) 893-2793

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Application Number	13-50031849	Page	2
		Date	8/14/13

Special Notes and Comments
and local laws, ordinances & regulations

HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

LILLINGTON, NC 27546

For Inspections Call: (910) 893-7525 Fax: (910) 893-2793

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Application Number	13-50031849	Page	3
Property Address	12 WIDGEON WAY	Date	8/14/13
PARCEL NUMBER	13-0630- - -0096- - -		
Application description . . .	CP NEW RESIDENTIAL (SFD)		
Subdivision Name	SHAYLAHS KNOLL 36 LOTS		
Property Zoning	PENDING		
Permit	BLDG, MECH, ELEC, PLB, INSU PERMIT		
Additional desc			
Phone Access Code	995654		

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
10	101	B101	R*BLDG FOOTING / TEMP SVC POLE	_____	___/___/___
20	103	B103	R*BLDG FOUND & TEMP SVC POLE	_____	___/___/___
20-30	814	A814	ADDRESS CONFIRMATION	_____	___/___/___
30-999	111	B111	R*BLDG SLAB INSP/TEMP SVC POLE	_____	___/___/___
30-999	309	P309	R*PLUMB UNDER SLAB	_____	___/___/___
40-50	129	I129	R*INSULATION INSPECTION	_____	___/___/___
40-60	425	R425	FOUR TRADE ROUGH IN	_____	___/___/___
40-60	125	R125	ONE TRADE ROUGH IN	_____	___/___/___
40-60	325	R325	THREE TRADE ROUGH IN	_____	___/___/___
40-60	225	R225	TWO TRADE ROUGH IN	_____	___/___/___
50-60	429	R429	FOUR TRADE FINAL	_____	___/___/___
50-60	131	R131	ONE TRADE FINAL	_____	___/___/___
50-60	329	R329	THREE TRADE FINAL	_____	___/___/___
50-60	229	R229	TWO TRADE FINAL	_____	___/___/___
999		H824	ENVIR. OPERATIONS PERMIT	_____	___/___/___

COUNTY OF HARNETT
Building Inspections Department
Planning Services

Certificate of Compliance: _____ **Occupancy:** ✓

Certificate issued pursuant to the requirements of North Carolina General Statute 153A-363 and Harnett County Zoning Ordinances. This certifies at the time of issuance, this structure was in compliance with the various ordinances of the County of Harnett and the North Carolina State Building Codes. For the following:

Use Classification: ✓ HOME

Permit Numbers

Name: WEAVER DEVELOPMENT

Building: _____

Electrical: _____

Address: 12 WINGSON WAY

Insulation: _____

DILLINGFORD 27545

Plumbing: _____

Mechanical: _____

MFG Home: _____

Date: 10-21-13

Building Official: Fred [Signature]

ADDRESS : 12 WIDGEON WAY
CONTRACTOR : WEAVER DEVELOPMENT CO INC
OWNER : WEAVER DEVELOPMENT COMPANY INC
PARCEL : 13-0630- - -0096- - -
APPL NUMBER: 13-50031849 CP NEW RESIDENTIAL (SFD)
DIRECTIONS : T/S: 08/02/2013 09:54 AM VBROWN ----
WIDGEON WAY, SHAYLAHS KNOLL SUB DIV #1.
CORNER LOT ON CORNER OF OLD US 421 AND
WIDGEON WAY, WITH DRIVEWAY ON WEDGEON
WAY, OLD 421 PAST NEIL THOMAS RD, SUB
DIV ON LEFT.

SUBDIV: SHAYLAHS KNOLL 36 LOTS
PHONE : (910) 433-0888
PHONE :

STRUCTURE: 000 000 45X64 3BDR 2BATH SFD W GAR SLAB

FLOOD ZONE : FLOOD ZONE X

BEDROOMS : 3.00

SEPTIC - EXISTING? : NEW TANK

PROPOSED USE : SFD

WATER SUPPLY : COUNTY

PERMIT: CPSF 00 CP * SFD

TYP/SQ	REQUESTED COMPLETED	INSP RESULT	DESCRIPTION RESULTS/COMMENTS
B101 01	8/16/13	FS	R*BLDG FOOTING / TEMP SVC POLE VRU #: 002426401
	8/16/13	AP	T/S: 08/16/2013 11:50 AM FSPIVEY -----
B103 01	8/21/13	FS	R*BLDG FOUND & TEMP SVC POLE VRU #: 002428134
	8/21/13	AP	T/S: 08/21/2013 03:02 PM FSPIVEY -----
A814 01	8/21/13	TW	ADDRESS CONFIRMATION TIME: 17:00 VRU #: 002428142
	8/23/13	AP	12 WIDGEON WAY LILLINGTON 27546----- T/S: 08/23/2013 12:14 PM TWARD -----
P309 01	8/26/13	FS	R*PLUMB UNDER SLAB TIME: 17:00 VRU #: 002430692
	8/26/13	AP	T/S: 08/26/2013 03:04 PM FSPIVEY -----
B111 01	8/28/13	FS	R*BLDG SLAB INSP/TEMP SVC POLE VRU #: 002431658
	8/28/13	AP	T/S: 08/28/2013 03:37 PM FSPIVEY -----
R425 01	9/30/13	FS	FOUR TRADE ROUGH IN VRU #: 002446045
	9/30/13	AP	T/S: 09/30/2013 02:52 PM FSPIVEY -----
I129 01	10/01/13	FS	R*INSULATION INSPECTION TIME: 17:00 VRU #: 002447068
	10/01/13	AP	T/S: 10/01/2013 02:59 PM FSPIVEY -----
H824 01	10/09/13	GB	ENVIR. OPERATIONS PERMIT TIME: 17:00 VRU #: 002451508
	10/09/13	AP	T/S: 10/10/2013 10:30 AM SSTEWARD -----
			T/S: 10/10/2013 10:31 AM SSTEWARD -----
R429 01	10/21/13	TI	FOUR TRADE FINAL VRU #: 002454973

10-21-13 AP

COMMENTS AND NOTES

FS *DF 9:00 10-21-13*

83396034

