

SCANNED

Initial Application Date: 8-5-13  
8-23-13

Application # 1350031859R  
DATE \_\_\_\_\_ 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: Caviness And Cates Bldg + Dev Mailing Address: 639 Executive Place, Suite 400  
City: Fayetteville State: NC Zip: 28305 Contact No: 910-481-0503 Email: angie@cavinessandcates.com

APPLICANT: Cates Building Inc Mailing Address: 639 Executive Place Suite 400  
City: Fayetteville State: NC Zip: 28305 Contact No: 910-481-0503 Email: angie@cavinessandcates.com  
\*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Angie Fowler Phone # 910-481-0503

PROPERTY LOCATION: Subdivision: West Landing At The Summit Lot #: 185 Lot Size: 20,011 SF  
State Road # 123 State Road Name: Copper Loop Map Book & Page: 2013 / 108  
Parcel: 03958713 0020 80 PIN: 9587-90-0272.000  
Zoning: RA-20R Flood Zone: X Watershed: NA Deed Book & Page: 3116 / 831 Power Company\*: CEMC

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

PROPOSED USE:

SFD: (Size 46 x 56) # Bedrooms 3 # Baths 5 Basement(w/w bath): NO Garage:  Deck: NO 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/w 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: 1 Proposed Manufactured Homes: \_\_\_\_\_ Other (specify): \_\_\_\_\_

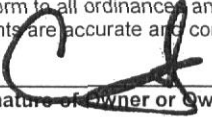
Required Residential Property Line Setbacks:

Front Minimum 10 Actual 36.2  
Rear 25 57.4  
Closest Side 10 39.0  
Sidestreet/corner lot NO  
Nearest Building on same lot NONE

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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\*\***



NAME: Cates Building Inc

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)

8-1-13

DATE

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 Cates Building Inc Date 9-17-13  
Site Address 123 Copper Loop Phone 910-481-0503  
Directions to job site from Lillington \_\_\_\_\_

Subdivision West Landing at The Summit Lot 185  
Description of Proposed Work Single Family Dwelling # of Bedrooms 5  
Heated SF 2964 Unheated SF 584 Finished Bonus Room? yes Crawl Space \_\_\_\_\_ Slab X

Cates Building, INC  
Building Contractor's Company Name Telephone 910-481-0503  
639 Executive Place, Suite 400 Fayetteville Email Address angie@carinessandcates.com  
Address NC 28305  
38851  
License #

Electrical Contractor Information

Description of Work \_\_\_\_\_ Service Size \_\_\_\_\_ Amps T-Pole \_\_\_\_\_ Yes \_\_\_\_\_ No  
Parnell Electric Telephone 910-237-2751  
Electrical Contractor's Company Name  
6400 Allie Cooper Rd - Godwin NC 28344 Email Address parnell.electric@gmail.com  
Address  
24236-U  
License #

Mechanical/HVAC Contractor Information

Description of Work \_\_\_\_\_  
Carolina Comfort Air, Inc Telephone 919-550-7711  
Mechanical Contractor's Company Name  
5212 US Hwy Email Address \_\_\_\_\_  
Address  
29077  
License #

Plumbing Contractor Information

Description of Work \_\_\_\_\_ # Baths \_\_\_\_\_  
Vance Johnson Plumbing Telephone 910-424-6712  
Plumbing Contractor's Company Name  
3242 Mid Pines Dr. Fayetteville NC 28306 Email Address \_\_\_\_\_  
Address  
7756-P1  
License #

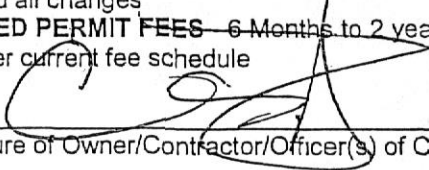
Insulation Contractor Information

Cumberland Insulation 4205 Clinton Road Telephone 910-484-7118  
Insulation Contractor's Company Name & Address  
Fayetteville, NC 28312

\*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

9-17-13  
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

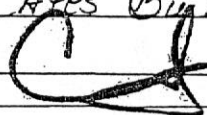
Has no more than two (2) employees and no subcontractors

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

Company or Name

Cates Building Inc

Sign w/Title



Date

9-17-13

**DO NOT REMOVE!****Details: Appointment of Lien Agent**

Entry #: 47394

Filed on: 09/17/2013

Initially filed by: CatesBuildingInc

**Designated Lien Agent**

Investors Title Insurance Company

Online: [www.liensnc.com](http://www.liensnc.com) [www.litnc.com](http://www.litnc.com)Address: 19 W. Hargett St., Suite 507 / Raleigh, NC  
27601

Phone: 888-690-7384

Fax: 913-489-5231

Email: [support@liensnc.com](mailto:support@liensnc.com) [info@investorstitle.com](mailto:info@investorstitle.com)**Property Type**

1-2 Family Dwelling

**Owner Information**Cates Building, Inc  
639 Executive Place, Suite 400  
Fayetteville, NC 28305  
United States  
Email: [angie@cavinessandcates.com](mailto:angie@cavinessandcates.com)  
Phone: 910-481-0503**Contractor Information**Cates Building, Inc  
639 Executive Place, Suite 400  
Fayetteville, ND 28305  
Email: [angie@cavinessandcates.com](mailto:angie@cavinessandcates.com)  
Phone: 910-481-0503**Project Property**West Landing at the Summit Pin # 9587-90-  
0272.000 Deed Book 3157 Page 903  
Lot: 185  
123 Copper Loop  
Sanford, NC 27332

Tax Parcel ID: 03958713002080

**Pre-Permit Workers**Moorman, Kizer, & Reitzel 910-484-5191 WG  
Landscaping inc 910-484-309**Notification Alert Emails:**

1. [kim@mkrinc.com](mailto:kim@mkrinc.com)
2. [wglanscaping@aol.com](mailto:wglanscaping@aol.com)

**Date of First Furnishing**

2013-07-30

**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





HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

LILLINGTON, NC 27546

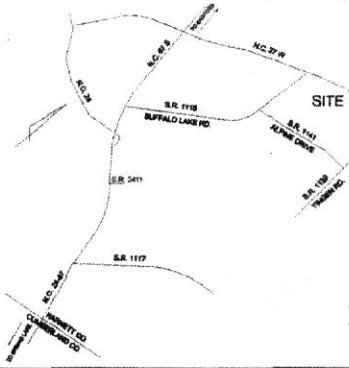
For Inspections Call: (910) 893-7525 Fax: (910) 893-2793

Bldg Insp scheduled before 2pm available next business day.

Application Number . . . . .	13-50031859	Page	2
Property Address . . . . .	123 COPPER LOOP	Date	9/25/13
PARCEL NUMBER . . . . .	03-9587-13- -0020- -80-		
Application description . . . . .	CP NEW RESIDENTIAL (SFD)		
Subdivision Name . . . . .	WEST LDG@THE SUMMIT 30LTS		
Property Zoning . . . . .	RES/AGRI DIST - RA-20R		
Permit . . . . .	BLDG,MECH,ELEC,PLB,INSU PERMIT		
Additional desc . . . . .			
Phone Access Code . . . . .	1002351		

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
10-30	814	A814	ADDRESS CONFIRMATION	_____	___/___/___
10-999	309	P309	R*PLUMB UNDER SLAB	_____	___/___/___
10-999	205	E205	R*ELEC UNDER SLAB	_____	___/___/___
20-999	114	B114	R*BLDG MONO SLAB/TEMP SVC POLE	_____	___/___/___
20	104	B104	R*FOUND & SETBACK VERIF SURVEY	_____	___/___/___
30-50	129	I129	R*INSULATION INSPECTION	_____	___/___/___
30-60	425	R425	FOUR TRADE ROUGH IN	_____	___/___/___
30-60	125	R125	ONE TRADE ROUGH IN	_____	___/___/___
30-60	325	R325	THREE TRADE ROUGH IN	_____	___/___/___
30-60	225	R225	TWO TRADE ROUGH IN	_____	___/___/___
40-60	429	R429	FOUR TRADE FINAL	_____	___/___/___
40-60	131	R131	ONE TRADE FINAL	_____	___/___/___
40-60	329	R329	THREE TRADE FINAL	_____	___/___/___
40-60	229	R229	TWO TRADE FINAL	_____	___/___/___
999		H824	ENVIR. OPERATIONS PERMIT	_____	___/___/___



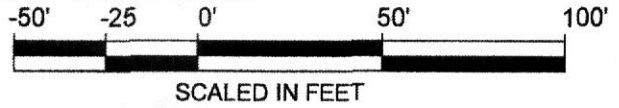
VICINITY MAP  
(N.T.S.)

Notes:

- This plat is for location purposes only. Builder should verify foundation information with plans before construction begins.
- There is no USCE or NCGS monument within 2000' of this site.
- The subject property is not within a special flood hazard area as determined by the Department of Housing and Urban Development.
- The easement information shown hereon was obtained from the recorded plat. No updated title search was performed by the surveyor.
- All distances are measured in feet.

LEGEND

- - EXISTING IRON PIPE
- - SET IRON PIPE
- - SURVEYED LINE
- - - - LINE NOT SURVEYED
- - - - EASEMENT

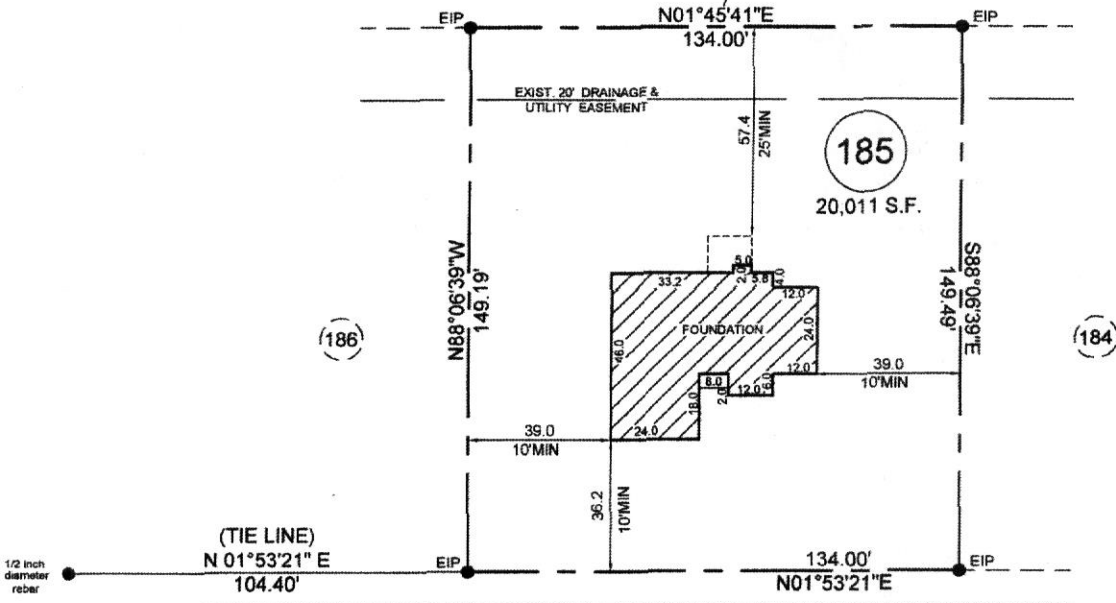


**\*\*PRELIMINARY PLAT- NOT FOR CONVEYANCES OR SALES\*\***

CRESTVIEW ESTATES  
PHASE THREE  
MAP 2002, PAGE 993



31859



**COPPER LOOP**  
(PUBLIC STREET & UTILITY ACCESS)  
50' R/W

- FOUNDATION MAP FOR -  
**CATES BUILDING**  
- SUBDIVISION -  
**WEST LANDING at the SUMMIT**

BARBECUE TWP.  
HARNETT COUNTY  
NORTH CAROLINA

SEPTEMBER 11, 2013  
SCALE 1" = 50'  
F.B. 100-2015

REFERENCE  
MAP # 2013, PG. 108  
HARNETT COUNTY NORTH CAROLINA REGISTRY



ENGINEERS  
PLANNERS  
SURVEYORS  
**M&R**  
MOORMAN, KIZER & REITZEL, INC.

115 broadfoot ave.  
p.o. box 53774  
fayetteville, n.c., 28305  
phone 910-484-5191  
fax 910-484-0388  
LICENSE #: F-0106

*Thomas J. Gooden*  
PROF. SURVEYOR NO. C-3196