Initial Application Date:_	10-	6.	13
middi i ippiiodion bato.			

Application # _	1350032333
	CU#

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910)

A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION

Central Permitting

on same lot

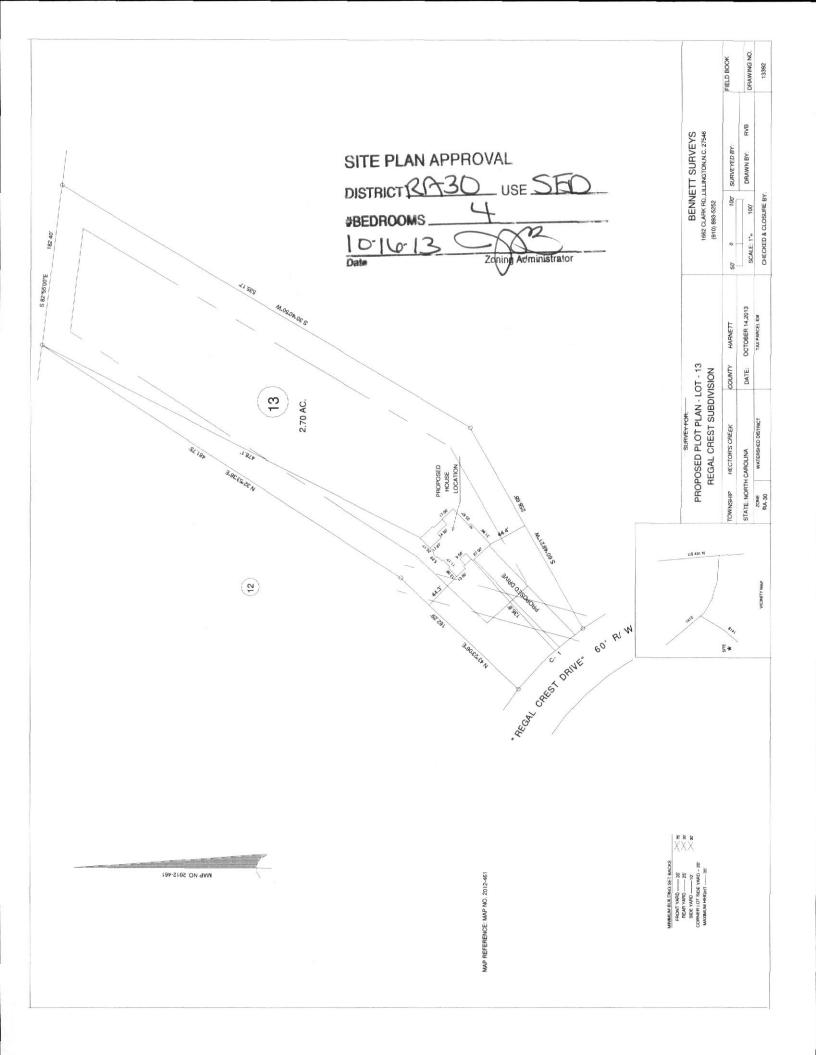
Residential Land Use Application

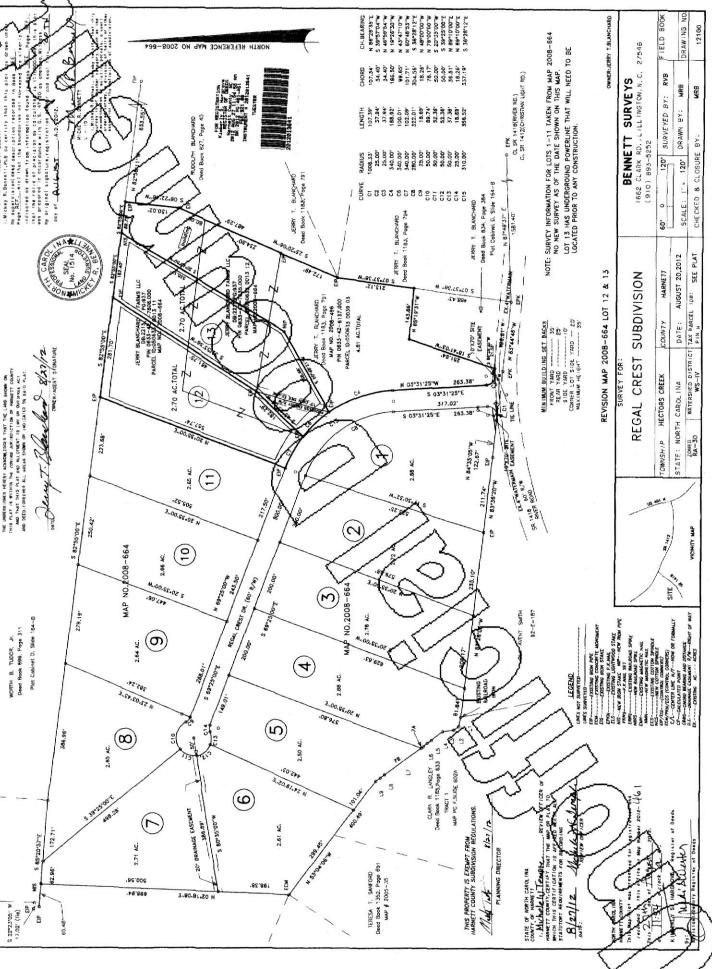
Fax: (910) 893-2793 www.harnett.org/permits

LANDOWNER: Jason Minton			_ Mailing Address:	Fieldstone Drive	
City: Holly Springs	State: NC Z	ip: _27540 C	ontact No: 919606469	6 Email: cdb	1971@gmail.com
APPLICANT*: Weaver Homes		Mailing Addr	350 Wagoner Driv	/e	
City: Fayetteville *Please fill out applicant information if diffe	State: NC Z	ip:C	ontact No: 919606469	6 Email: cdb	1971@gmail.com
*Please fill out applicant information if diffe	erent than landowner				
CONTACT NAME APPLYING IN OF	FICE: Dustin Black	well		Phone #	4696
PROPERTY LOCATION: Subdivisio	n: Regal Crest			Lot #:	3 Lot Size: 7. 70
State Road #Sta	te Road Name: 98 R	egal Crest D	rive	Map Bo	ok & Page:
Parcel: 050633001312			PIN: 0633-42-7635.0	000	
State Road # State Road # State Road # State Parcel: 050633001312 Zoning RASO Flood Zone: X	Watershed\	Deed Bo	ok & Page 3 56	237 Power Compar	ny*: Duke
*New structures with Progress Energ					
PROPOSED USE:					
SFD: (Size 55 x 60) # Bed	drooms: 4 # Baths:	2.5 Basement(w/wo bath): Garage	: V Deck: V Crawl	Space: Slab: Slab:
(Is the	bonus room finished?	(v) yes (_) no w/ a closet? (🗾) y	ves () no (if yes add in	with # bedrooms)
☐ Mod: (Sizex) # Bed (Is the				: Site Built Deck: ilt additions? () yes (_	1945 St. 194
☐ Manufactured Home:SW _	DWTW (Size	x	_) # Bedrooms: Ga	arage:(site built?) Deck:(site built?)
□ Duplex: (Sizex) No	o. Buildings:	No. B	edrooms Per Unit:		
☐ Home Occupation: # Rooms:	Use:		Hours of Opera	ation:	#Employees:
☐ Addition/Accessory/Other: (Size	x) Use:_			Clos	sets in addition? () yes () no
Water Supply: County	Existing Well	_ New Well (#	of dwellings using well _) *Must have o	perable water before final
Sewage Supply: New Septic 1	Fank (Complete Chec	klist)E	xisting Septic Tank (Con	nplete Checklist)	County Sewer
Does owner of this tract of land, own	land that contains a r	nanufactured h	ome within five hundred	feet (500') of tract listed	above? () yes (✔) no
Does the property contain any easen	nents whether underg	round or overh	ead () yes () no		
Structures (existing or proposed); sin		1	Manufactured Home		ner (specify):
on detailed (exacting of proposed) on	igio idiriliy divoliligo		Manadada va violilo		ior (opcony).
Required Residential Property Lie	ne Setbacks:	Comments	New M	oup- Lot s)	respe
Front Minimum 35 Ac	tual 13 6				
Rear 25	478				
Closest Side 10	44				
Sidestreet/corner lot		-			
Nearest Building	A 14.7 (1 E54)	N			

^{***}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:		0	Lavu	Hune				A	PPLICA	TION#	: <u>.</u>			
				This application	n to be fill	ed out who	en applyin	g for a	septic sy	stem insp	pection.*			
PERMIT depending	OR g upo	AUT on do	alth D o TION IN HORIZA	THIS APPLICATION TO CONSTI on submitted. (Co	plication TON IS FAI RUCT SHA	n for Im LSIFIED, C LL BECOM	<mark>Drovemei</mark> HANGED, ((E INVALII	nt Peri OR THE D. The p plete plat	mit and SITE IS . Dermit is v t = withou	Vor Au ALTEREI	thoriza D, THEN T ther 60 mo	THE IMP	DOVEN	ACAPT.
□ Env	riro	nme	ntal He	alth New Septi	c Systen	Code 8	00							
•	All	pro	perty ir	ons must be i	made vis	ible. Plac	e "pink pr	operty	flags" o	n each	corner in	ron of la	t. All	property
	nne	s m	ust de c	early flagged a nouse corner fla	pproximat	tely every	50 feet be	tween	corners.					
	out	DUIL	aings, s	wimming pools,	etc. Plac	ce flags pe	er site plan	n develo	oped at/	for Centr	ral Perm	itting.		
•	Pla If p	ce o rope	range E rty is th	nvironmental H ickly wooded, E performed. In	ealth card Invironme	d in locatio ental Healt	n that is e	asily vi	ewed from	om road	to assist	t in locat	o allov	w the soil
•	All	iots	to be a	ddressed with	in 10 bu:	siness da	vs after c	an nee confirm	aroun	a site. <i>Li</i> 25 00 re	io not gi sturn trii	rade pro n fee m	operty ev ha	'. Incurred
•	Afte 800	er pr (aft	<i>ire to u</i> eparing er selec	ncover outlet I proposed site of ting notification mber given at e	all the vo	<i>house co</i> ice permit multiple p	<i>rners and</i> ting syster permits ex	<i>i prope</i> m at 91 ist) for	erty line 10-893-7 Environ	s, etc. o 525 opti	nce lot	confirm schedule	ed rea	ady.
•	Use	e Cli	ck2Gov	or IVR to verify	results.	Once appr	roved, pro	ceed to	Centra	Permitt	ing for p	ermits.		
Env	riro	nme	ntal He	alth Existing T	ank Insp	ections C	ode 800	0						
•	Pre	ow a	above in	structions for p pection by rem	acing flag	gs and car Lover out	d on prope	erty.	as diad	am india	natos ar	ad lift lia	l otroi	
	pos	ssible	e) and th	en put lid bac	k in place	e. (Unless	inspection	is for	a septic	tank in a	a mobile	home p	ark)	gnt up (<i>II</i>
				LIDS OFF OF S g outlet end ca			ina evetam	n at Q1(0-902-76	S25 optio	n 1 9 c	alaat nat	tificatio	
	it n	nultip	ole pern	nits, then use o	code 800	for Enviro	onmental	Health	inspect	ion. Ple	ase note	e confirm	nation	number
•	Use	e Cli	ck2Gov	or IVR to hear i	results. O	nce appro	ved, proce	ed to (Central I	Permittin	a for ren	nainina	permit	s.
SEPTIC													***	
				on to construct ple						in order o	f preferen	ice, must	choose	one.
1 1 A	lterr	ncu		{} Innovative {} Other	ت	Com	venuonai	1_	} Any					
												120		
question.	. If	the a	nswer is	the local health o "yes", applicant	MUST AT	TTACH SU	UPPORTI	NG DO	cumen	ny of the	following N:	g apply t	o the p	roperty in
{}}YE	S	(7)	NO	Does the site co	ntain any]	Jurisdiction	al Wetland	ls?						
{}}YE	S	$\{\underline{Y}\}$	NO	Do you plan to	nave an <u>irr</u>	igation sys	tem now or	in the f	future?					
{}}YE	S	(1)	NO	Does or will the	building o	contain any	drains? Ple	ease exp	plain					
{}}YES	8	14	NO	Are there any ex	kisting wel	lls, springs,	waterlines	or Was	stewater S	Systems o	on this pro	operty?		
{}}YE	S		NO	Is any wastewat	er going to	be genera	ted on the s	site othe	er than do	mestic se	ewage?			
{}}YE	S	14	NO	Is the site subject	ct to appro	val by any	other Publi	ic Agend	су?					
{ X }YE	S	{}	NO	Are there any E	asements (or Right of	Ways on th	nis prop	erty?					
{_}}YE	S	(Y)	NO	Does the site co	ntain any	existing wa	ter, cable, p	phone o	r underg	ound ele	ctric lines	s?		
				If yes please ca	ll No Cuts	at 800-632	2-4949 to lo	ocate the	e lines. T	This is a f	ree servic	ce.		
I Have R	ead	This	Applicat	ion And Certify T	hat The In	formation P	rovided He	erein Is T	True, Cor	nplete An	d Correct	t. Author	ized Co	ounty And
State Off	icial	ls Ar	e Grante	Right Of Entry	Fo Conduc	t Necessary	Inspections	To Deta	ermine C	ompliance	e With Ap	plicable i	Laws A	nd Rules.
I Unders	tand	l Tha	t I Am S	olely Responsible	For The Pr	oper Identi	fication And	d Labeli	ng Of All	Property	Lines An	d Corner	s And l	Making
The Site	Acc	essib	le So Tha	A Complete Site	Evaluation	n Can Be Pe	erformed.						1/11	1,5
PROPE	RT	Y OV	NERS	OR OWNERS	LEGAL R	EPRESEN	TATIVE	SIGNA	TURE (REQUIF	RED)	D	ATE	115

Each section below to be filled out by whomever performing work Must be owner or licensed contractor Address company name & phone must match 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
Subdivision Regel Crest Lot 13
Description of Proposed Work New Construction # of Bedrooms
Heated SF 2628 Unheated SF 1124 Finished Bonus Room? Crawl Space Slab
General Contractor Information
Weaver Development CU. 919-604-4696
Building Contractor's Company Name 350 WMGON END OF FWORKING (NC) Address Email Address
350 WAGON ER OF FURTHUILD IN C
Address 28303 Email Address
26962
License # Flectrical Contractor Information
Description of Work New Coust west Service Size ZO Amps T-Pole Yes No
J.M. Papa Electric 919-776-5144
Flectrical Contractor & Company Name
C/09 Chathan ST. San Ford NC Address Email Address
NESTA 2015
21326-6
License #
Description of Work New Contractor Information
Contract Con
Caroline Con Fort AER 919-934-1060 Mechanical Contractor's Company Name . Telephone
Mechanical Contractor's Company Name Telephone
Address Email Address
29077
License #
Plumbing Contractor Information
Description of Work New Coast antion #Baths Z
Plumbing Contractor's Company Name Telephone
gry Byrd load Binker, NC
Address Email Address
21649
License #
Insultation Insulation Contractor Information 919-774-197
Insulation Contractor's Company Name & Address Telephone

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 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 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

Sign w/Title

County of Harnett Building Inspections Department Planning Services Certificate of Compliance: Occupancy: x

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:

Date: 03-20-2014 Building Official: BSutton

PREPARED 3/19/14, 14:14:55 Harnett County

INSPECTION TICKET INSPECTOR: IVR

PAGE

DATE 3/20/14

ADDRESS . : 98 REGAL CREST DR

CONTRACTOR : WEAVER DEVELOPMENT CO INC

PHONE : (910) 433-0888

SUBDIV: REGAL CREST 13LOTS

OWNER . . : MINTON JASON & MEGAN

PHONE :

PARCEL . . : 05-0633- - -0013- -12-

APPL NUMBER: 13-50032333 CP NEW RESIDENTIAL (SFD) DIRECTIONS : T/S: 10/16/2013 10:30 AM JBROCK ----

REGAL CREST LOT 13

FLOOD ZONE . . . : FLOOD ZONE X

BEDROOMS : 4000000.00 PROPOSED USE : SFD SEPTIC - EXISTING? . . . : NEW TANK WATER SUPPLY : COUNTY

PERMIT	: CPSF 00 CP *		
TYP/SQ	REQUESTED COMPLETED	INSP RESULT	DESCRIPTION RESULTS/COMMENTS
B101 0	• • • • • •	BS	R*BLDG FOOTING / TEMP SVC POLE TIME: 17:00 VRU #: 002466886
	11/19/13	DP	T/S: November 19, 2013 10:12 AM BSUTTON
			No footing done. No one at jobsite working. Inpsection not
D101 0	0		cancelled. \$50 re fee
B101 0	· · ·		R*BLDG FOOTING / TEMP SVC POLE TIME: 17:00 VRU #: 002468601
	11/21/13	AP	T/S: 11/20/2013 02:19 PM DJOHNSON
B103 0	1 11/25/13	BS	R*BLDG FOUND & TEMP SVC POLE VRU #: 002469245
	11/25/13	AP	T/S: November 25, 2013 12:33 PM BSUTTON
A814 0		TW	ADDRESS CONFIRMATION TIME: 17:00 VRU #: 002469252
•	12/13/13	AP	98 REGAL CREST DR FUQUAY VARINA 27526
			T/S: 12/13/2013 02:11 PM TWARD
B105 0	1 11/27/13	TI	R*OPEN FLOOR VRU #: 002470664
	11/26/13	CA	
B105 0	2 12/02/13	BS	R*OPEN FLOOR VRU #: 002470748
	12/19/13	AP	T/S: December 19, 2013 02:56 PM BSUTTON
R425 0		KS	FOUR TRADE ROUGH IN VRU #: 002479376
	12/27/13	DA	Fairly complicated floor and roof system. Inspection may
			take longer than normal.
			T/S: 12/27/2013 12:22 PM KSLATTUM
			1. Portal frame garasge wall. 2. Need floor I joist
			repairs where top chords were drilled for plumbing and
T100 0	1/16/14	D.C.	electrical.
I129 0:	l 1/16/14 1/16/14	BS	R*INSULATION INSPECTION VRU #: 002484947
	1/16/14	DA	T/S: January 16, 2014 10:51 AM BSUTTON
	•		sheath inside of garage wall. OK to begin sheetrock
R425 0	2 1/16/14	BS	FOUR TRADE ROUGH IN TIME: 17:00 VRU #: 002485100
	1/16/14	DA	T/S: 01/15/2014 02:18 PM DJOHNSON
	_, _, _,		T/S: January 16, 2014 10:51 AM BSUTTON
			Portal framing is incorrect. Install washers per code and
			sheath inside of garage wall. OK to begin sheetrock
R425 03	3 1/17/14	BS	FOUR TRADE ROUGH IN VRU #: 002485373
	1/17/14	AP	T/S: January 17, 2014 10:19 AM BSUTTON
I129 02		BS	R*INSULATION INSPECTION TIME: 17:00 VRU #: 002485530
	1/17/14	AP	T/S: 01/16/2014 02:13 PM DJOHNSON
			/T/S: January 17, 2014 10:19 AM BSUTTON
H824 0	· ·	JM /	ENVIR. OPERATIONS PERMIT TIME: 17:00 VRU #: 002488062
	1/23/14	AP 🗸	T/S: 01/24/2014 10:45 AM SSTEWART

----- CONTINUED ONTO NEXT PAGE ------

PREPARED 3/19/14, 14:14:55 INSPECTION TICKET PAGE 6
Harnett County INSPECTOR: IVR DATE 3/20/14

ADDRESS . : 98 REGAL CREST DR SUBDIV: REGAL CREST 13LOTS

CONTRACTOR: WEAVER DEVELOPMENT CO INC PHONE: (910) 433-0888

OWNER . . : MINTON JASON & MEGAN PHONE :

APPL NUMBER: 13-50032333 CP NEW RESIDENTIAL (SFD)

PARCEL . . : 05-0633- - -0013- -12-

----- COMMENTS AND NOTES ------