

Initial Application Date: 3-7-14

Application # 14500330640
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: Phillip Page Mailing Address: 730 Page Rd
City: Broadway State: NC Zip: 27505 Contact No: 910 893 8610 Email: ppage@harnett.k12.nc.us

APPLICANT*: William B. Wester III Mailing Address: 663 Page Rd
City: Broadway State: NC Zip: 27505 Contact No: 919 499 7640 Email: westerwb3@ADL.com
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: William B. Wester III Phone # 919 499 7640

PROPERTY LOCATION: Subdivision: _____ Lot #: _____ Lot Size: 2.47 AC
State Road # 1243 State Road Name: Page Road Map Book & Page: 2014 / 58
Parcel: 0613 0508 0006 PIN: 0508-68-7139.000
Zoning: RA3D Flood Zone: X Watershed: AA Deed Book & Page: 918 / 861 Power Company*: _____

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

PROPOSED USE:

SFD: (Size 76 x 51) # Bedrooms: 3 # Baths: 3 1/2 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: 1 proposed SFD Manufactured Homes: _____ Other (specify): _____

Required Residential Property Line Setbacks:

Front Minimum _____ Actual 122
Rear _____ 292
Closest Side _____ 45
Sidestreet/corner lot _____
Nearest Building on same lot _____

Comments: _____

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SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Take 27 west ≈ 10 miles
turn Right onto Leaflet Church Rd ≈ 3 miles turn left
onto Page Rd. ≈ lot is .75 miles on left.

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.

Phillip Page
Signature of Owner or Owner's Agent

3-7-14
Date

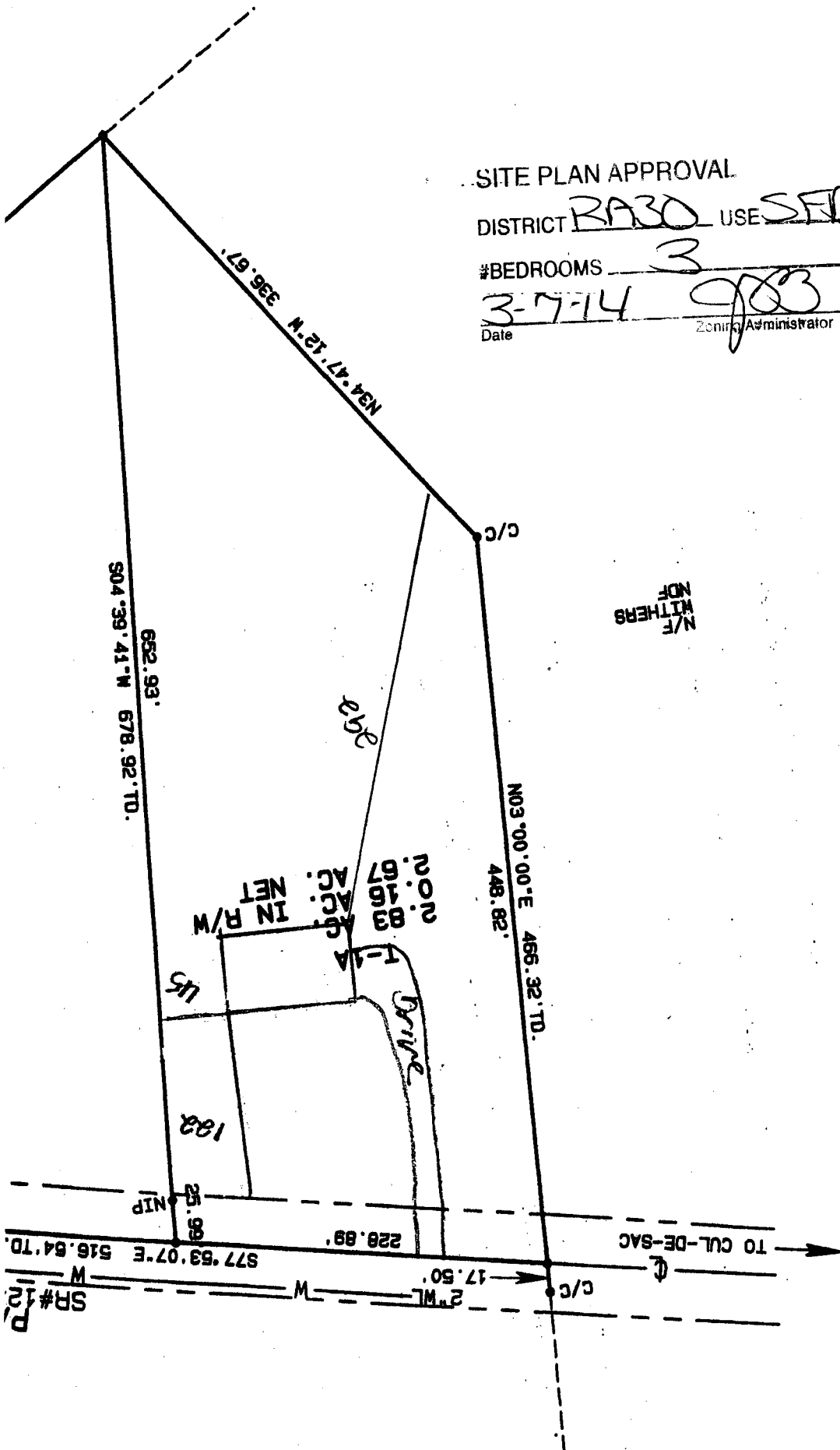
It is the owner/applicants responsibility to provide the county with any applicable information about the subject property, including but not limited to: boundary information, house location, underground or overhead easements, etc. The county or its employees are not responsible for any incorrect or missing information that is contained within these applications.

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

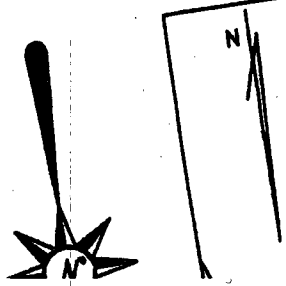
AT ALL CORNERS
 COMPUTER
 THIN 2,000 FEET
 SEPTIC
 REAR: 25'
 XKS:

SITE PLAN APPROVAL
 DISTRICT RA30 USE SFD
 #BEDROOMS 3
3-7-14 [Signature]
 Date Zoning Administrator

[Signature]



ON AND JURISDICTION:
 (are) the owner (s) or
 labeled hereon and that
 division with my (our)
 building setback lines,
 walks, parks, and other
 private use as noted, and
 within the subdivision
 County except:



PC.C/:

SR#12
 M
 P

NAME: _____

APPLICATION #: _____

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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 8 00

- **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 over outlet end as diagram indicates, and lift lid straight up (if possible) and then close back down. (Unless inspection is for a septic tank in a mobile home park)
- 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.

Phillip Page

3-7-14

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

DATE

Plan Box # File

Date 3-7-14

Job Name Wester

App # 33004

Valuation ~~203291~~ 203291 Heated SQ Feet 2475

Garage 654

= 3129

Inspections for SFD/SFA

Crawl Slab _____ Mono _____ Basement _____

Footing	Footing	Plum Under Slab	Footing
Foundation	Foundation	Ele. Under Slab	Foundation
Address	Address	Address	Waterproofing
Open Floor	Slab	Mono Slab	Plum Under slab
Rough In	Rough In	Rough In	Address
Insulation	Insulation	Insulation	Slab
Final	Final	Final	Open Floor
			Rough In
			Insulation
			Final

Foundation Survey _____ Envir. Health Other _____

Additions / Other

- Footing _____
- Foundation _____
- Slab _____
- Mono _____
- Open Floor _____
- Rough In _____
- Insulation _____
- Final _____

33004

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 Billy Wester Date _____
Site Address Page Rd Broadway NC Phone _____
Directions to job site from Lillington 27505

Subdivision _____ Lot _____
Description of Proposed Work _____ # of Bedrooms _____
Heated SF 2495 Unheated SF 1500 Finished Bonus Room? _____ Crawl Space Slab _____

General Contractor Information

Wester Construction Co. Inc. 919-499-3946
Building Contractor's Company Name Telephone
614 Leslie Rd. Sanford NC 27332 William.Wester@gmail.com
Address Email Address
59595
License #

Electrical Contractor Information

Description of Work Electrical Tough in trim Service Size 400 Amps T-Pole Yes No
Billy Wester 919 499 7640
Electrical Contractor's Company Name Telephone
663 Page Rd Broadway NC 27505 westerwb3@ADL.com
Address Email Address
29742-2
License #

Mechanical/HVAC Contractor Information

Description of Work HVAC
Mechanical Contractor's Company Name Telephone
Address Email Address
Owner
License #

Plumbing Contractor Information

Description of Work Plumbing rough in & trim out # Baths 3 1/2
Jamie Johnson Plumbing 910-814-7705
Plumbing Contractor's Company Name Telephone
614 Byrd rd Bunnlevel
Address Email Address
21649
License #

Insulation Contractor Information

Insulation Inc. 1827 Jefferson Davis Hwy 919-776-4138
Insulation Contractor's Company Name & Address Sanford NC Telephone
27330

*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

William B. White
Signature of Owner/Contractor/Officer(s) of Corporation

8-19-14
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 Wester Construction Coy Inc.

Sign w/Title William B. White Date 8-19-14

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 178857

Filed on: 08/19/2014

Initially filed by: MATTHEWSLAW

Designated Lien Agent

Investors Title Insurance Company

Online: www.liensnc.com (<mailto:support@liensnc.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>)

Project Property

2.83 acres on Page Rd, Broadway Map 2014, Page 58
771 Page Road
Broadway, NC 27505
Harnett County

Property Type

1-2 Family Dwelling

Date of First Furnishing

08/19/2014

Owner Information

Wester Construction Co. Inc.
614 Leslie Road
Sanford, NC 27332
United States
Email: willianwester@gmail.com
Phone: 919-499-3946

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.

View Comments (0)

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 14-50033064 Date 8/27/14
 Property Address 771 PAGE RD
 PARCEL NUMBER 13-0508- - -0006- -01-
 Application type description CP NEW RESIDENTIAL (SFD)
 Subdivision Name
 Property Zoning PENDING

Owner

PAGE PHILLIP V 1/2 UND INT &
 STROUD PHYLLIS P 1/2 IND INT
 663 PAGE ROAD
 BROADWAY NC 27505
 (910) 893-8610

Contractor

WESTER CONSTRUCTION CO INC
 546 LESLIE RD
 SANFORD NC 27332
 (919) 499-5389

Applicant

WESTER III WILLIAM B
 663 PAGE RD
 BROADWAY NC 27505
 (919) 499-7640

--- Structure Information 000 000 76X51 3BDR CRAWL W/ GARAGE
 Flood Zone FLOOD ZONE X
 Other struct info # BEDROOMS 3000000.00
 PROPOSED USE SFD
 SEPTIC - EXISTING? NEW TANK
 WATER SUPPLY COUNTY

Permit BLDG,MECH,ELEC,PLB,INSU PERMIT

Additional desc . . .

Phone Access Code . 1022953

Issue Date 8/27/14

Valuation 203291

Expiration Date . . 8/27/15

Special Notes and Comments

T/S: 03/07/2014 01:32 PM JBROCK ----
 TAKE 27 W 10 MILES TURN R ONTO LEAFLET
 CHURCH RD 3 MILES TURN L ONTO PAGE RD
 LOT IS .75 MILES ON LEFT
 XXX
 PERMIT INCLUDES BLDG,ELEC,MECH,PLUMB
 INSULATION AND LAND USE.
 XXX
 Work must conform and comply with the
 STATE BUILDING CODE and all other State
 and local laws, ordinances & regulations

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P.O. BOX 65

LILLINGTON, NC 27546

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

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Permit BLDG, MECH, ELEC, PLB, INSU PERMIT

Additional desc . . .
 Phone Access Code . . . 1022953

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	105	B105	R*OPEN FLOOR	_____	___/___/___
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	_____	___/___/___