Initial Application Date:AS . 14
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: HARVett LAND GROUP Mailing Address: PO Box 427
City:
APPLICANT : CAtes Building Inc Mailing Address: 639 Executive Place Suite 400
City: <u>FAYEHEVILLE</u> State: <u>AIC</u> Zip: <u>28305</u> Contact No: <u>910-481-0503</u> Email: <u>Angle @CAVINESS and cates</u> . Co *Please fill out applicant information if different than landowner
CONTACT NAME APPLYING IN OFFICE: Augic. Fowler Phone # 910-481-0503
PROPERTY LOCATION: Subdivision: Tingen Pointe Lot #: 170 Lot Size: . 61ac
State Road # 741 State Road Name: Juno DRive Map Book & Page: 2014, 179
Parcel: 039 57601 0088 82 PIN: 9597-32-1769,000
Zoning: Read Zone: X Watershed: MA Deed Book & Page 2257/94 Power Company*: Duke Trogkess
*New structures with Progress Energy as service provider need to supply premise number from Progress Energy.
PROPOSED USE:
SFD: (Size 52 x 41) # Bedrooms 3 # Baths: Basement(w/wo bath A Garage: Crawl Space: Slab: Slab: Slab:
(Is the bonus room finished? (
Mod: (Sizex) # 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:SWDWTW (Sizex) # Bedrooms: Garage:(site built?) Deck:(site built?)
Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit:
Home Occupation: # Rooms: Use: Hours of Operation:#Employees:
Addition/Accessory/Other: (Sizex) Use: Closets in addition? () yes () no
Water Supply:CountyExisting 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: Comments:
Front Minimum <u>35</u> Actual <u>36</u>
Rear <u>25</u> <u>138</u> .
Closest Side
Sidestreet/corner lot_1019.
Nearest Building
Residential Land Use Application Page 1 of 2 03/11

1

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APPLICATION CONTINUES ON BACK

Y

#### 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.

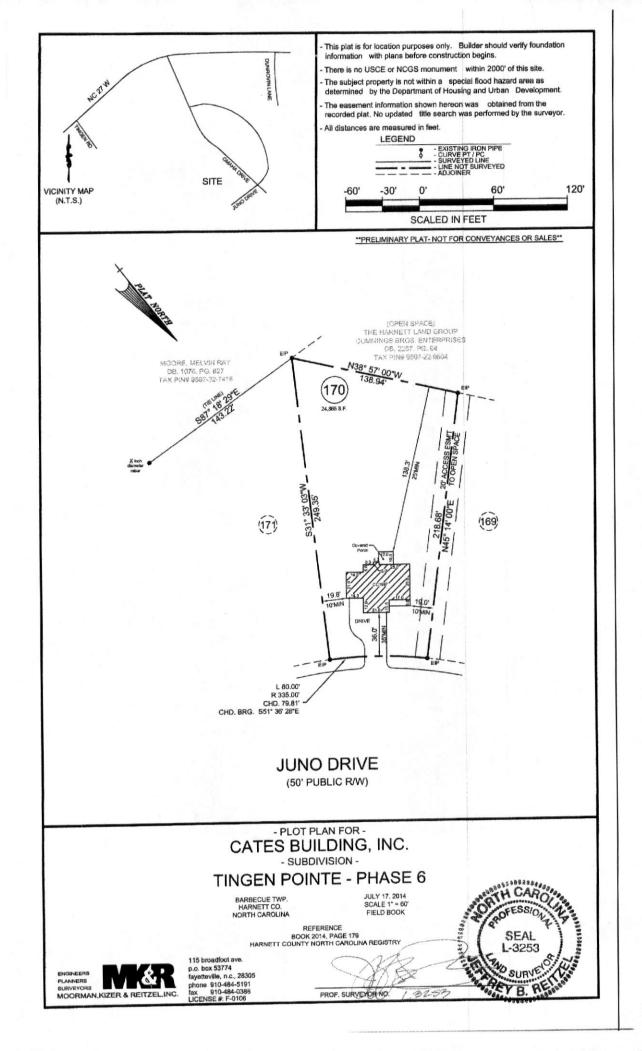
Signature wner or Owner's Agent

7-21-14 Date

1 24 G

\*\*\*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	
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CONFIRMATION #

- Environmental Health New Septic SystemCode 800
  - <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*.
  - <u>All lots to be addressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred</u> 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. <u>Please note</u> <u>confirmation number given at end of recording for proof of request.</u>
- 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. <u>Please note confirmation number</u> 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	INO	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	[1] NO	Is any wastewater going to be generated on the site other than domestic sewage?	
{}YES	1_NO	Is the site subject to approval by any other Public Agency?	
() YES	NO NO	Are there any Easements or Right of Ways on this property?	
{}}YES	{LINO	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)

DATE

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-	-	-				

h section below to be filled out nomever performing work be owner or licensed actor Address company	Harnett County Central PO Box 65 Lillington NC 910 893 7525 Fax 910 893 2793 www	2 27546 w harnett org/permits	
& phone must match	Ates Building -		
Owners Name		Loc Date Date	
Site Address 74	Juna Drive	Phone <u>910-481-050</u>	3
Directions to job site from	Lillington		
	72 / 7		•
Subdivision Ting	n Peinte	Lot 170	
Description of Proposed			
Heated SF 1997 Unh	eated SF 916 Finished Bonus F	Room? Crawl Space Slab	
	Gèneral Contractor Int	formation	
CAtes Buildi	NG, INC	<u>910 - 481 - 0503</u> Telephone	
Building Contractor s Cor		Telephone	
639 Executive	PLACE, Suite 400 Faye	theville angie @ cavinessand cate	25 .
	NC 2830:	5 Email Address	
3885/	·		
License #	Electrical Contractor In	formation	
Description of Work		/ice Size Amps T-Pole Yes No	
-	heel Electric	910-303-2334	
Electrical Longer		Telephone	
4. PO. BOX L	158 StedmanNC2	8391	
Address		Email Address	
22985-4			
License #			
	Mechanical/HVAC Contract	tor Information	
Description of Work			
	0 0		
	fort air, Inc	919-550-7711	
CArolina. Com Mechanical Contractors		<u>919-550-7711</u> Telephone	
CArolina Com Mechanical Contractors 52/2 US H		Telephone	
CArolina Com Mechanical Contractor s 52/2 US H Address			
Carolina Com Mechanical Contractors 52/2 US H Address 29077		Telephone	
CArolina Com Mechanical Contractor s 52/2 US H Address	Company Name WY	Telephone Email Address	
CArolina, Com Mechanical Contractor s 52/2 US H Address 29077 License #		Telephone Email Address	
Carolina. Com Mechanical Contractor s 52/2 U.S M Address 29077 License #	Company Name Wy <u>Plumbing Contractor I</u>	Telephone Email Address <u>information</u> # Baths	
CArolina. Com Mechanical Contractors 52/2 US H Address 29077 License # Description of Work Vance Sobosc	Plumbing Contractor In Plumbing	Telephone Email Address <u>information</u> # Baths	
CArolina Com Mechanical Contractor s 52/2 US H Address 29077 License # Description of Work Vance Sohnso Plumbing Contractor s C	Plumbing Contractor In <u>Plumbing Contractor In</u> <u>Plumbing</u> ompany Name	Telephone Email Address <u>information</u> # Baths	
<u>Carolina</u> <u>Com</u> Mechanical Contractor s <u>52/2</u> <u>US</u> <del>M</del> Address <u>29077</u> License # Description of Work <u>Vance</u> <u>Sohnse</u> Plumbing Contractor s C <u>3242</u> mid Pine	Plumbing Contractor In Plumbing	Telephone Email Address <u>information</u> # Baths	
<u>CArolina</u> Com Mechanical Contractor s <u>52/2</u> <u>US</u> <del>M</del> Address <u>29077</u> License # Description of Work <u>VANCE</u> <u>Sohnso</u> Plumbing Contractor s C <u>3242</u> <u>Mid Pine</u> Address	Plumbing Contractor In <u>Plumbing Contractor In</u> <u>Plumbing</u> ompany Name	Telephone         Email Address         Information        # Baths	
CArolina Com Mechanical Contractor s <u>52/2</u> <u>US</u> <del>M</del> Address <u>29077</u> License # Description of Work <u>Vance</u> <u>Sohnso</u> Plumbing Contractor s C <u>3242</u> <u>Mid</u> <u>Piwe</u> Address <u>7756 - P1</u>	Plumbing Contractor In <u>Plumbing Contractor In</u> <u>Plumbing</u> ompany Name	Telephone Email Address <u>information</u> # Baths	
<u>CArolina</u> Com Mechanical Contractor s <u>52/2</u> <u>US</u> <del>M</del> Address <u>29077</u> License # Description of Work <u>VANCE</u> <u>Sohnso</u> Plumbing Contractor s C <u>3242</u> <u>Mid Pine</u> Address	Plumbing Contractor In <u>Plumbing Contractor In</u> <u>Plumbing</u> <u>ompany Name</u> <u>SDr. Fayetteville</u> NC	Telephone Email Address <u>information</u> # Baths <u>910-424-67/2</u> Telephone <u>28306</u> Email Address	
CArolina. Com Mechanical Contractor s <u>52/2</u> <u>US</u> <del>M</del> Address <u>29077</u> License # Description of Work <u>VANCE</u> <u>Sohnso</u> Plumbing Contractor s C <u>3242</u> <u>Mid</u> <u>Pine</u> Address <u>7756 - P1</u> License #	Plumbing Contractor Insulation Contractor I	Telephone Email Address <u>information</u> # Baths <u>910-424-67/2</u> Telephone <u>28306</u> Email Address	
<u>CArolina</u> Com Mechanical Contractor s <u>52/2</u> <u>US</u> <del>M</del> Address <u>29077</u> License # Description of Work <u>VANCE</u> <u>Sohnsc</u> Plumbing Contractor s C <u>3242</u> <u>Mid</u> <u>Piwe</u> Address <u>7756 - P1</u> License # <u>Umberland</u> <u>Init</u> Insulation Contractor s C	Plumbing Contractor In <u>Plumbing Contractor In</u> <u>Plumbing</u> <u>ompany Name</u> <u>SDr. Fayetteville</u> NC	Telephone Email Address <u>information</u> # Baths <u>910-424-67/2</u> Telephone <u>28306</u> Email Address	

Application #

\*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 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 Idina Date 7-21-14 Sign w/Title

Appointment of Lien Agent: Details - LiensNC Lien Service

Page 1 of 1

34279

DO NOT REMOVE!

# **Details: Appointment of Lien Agent**

Entry #: 175244

27601

Filed on: 08/11/2014 Initially filed by: CatesBuildingInc

### **Designated Lien Agent**

Investors Title Insurance Company

Phone: 888-690-7384

Email: support@liensnc.com

Fax: 913-489-5231

Online: www.liensnc.com.thup/www.lettrus.com

Address: 19 W. Hargett St., Suite 507 / Raleigh, NC

### **Project Property**

TN 170 Tingen Pointe Subdivision Lot 170 PIN # 9597-32-1769.000 Deed Book / Page 3237 / 57-66

741 Juno Drive Broadway, NC 27505 Harnett County

**Property Type** 

Owner Information

Cates Building Inc 639 Executive Place Suite 400 Fayetteville, NC 28305 United States Email: angie@cavinessandcates.com Phone: 910-481-0503

View Comments (0)

1-2 Family Dwelling

## Date of First Furnishing

08/15/2014

### 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. Date 9/02/14 Application Number . . . . . . . . 14-50034279 Intersection . . . . . . . Property Address . . . . . . . 741 JUNO DR PARCEL NUMBER . . . . . . . . . 03-9576-01- -0088- -82-Application type description CP NEW RESIDENTIAL (SFD) Subdivision Name . . . . . TINGEN POINTE PH6 Property Zoning . . . . . RES/AGRI DIST - RA-20R Contractor Owner ------------CATES BUILDING INC THE HARNETT LAND GROUP II LLC 639 EXECUTIVE PLACE PO BOX 326 NC 27597 SUITE 400 ZEBULON FAYETTEVILLE NC 28305 (910) 481-0503 Applicant \_\_\_\_\_ CATES BUILDING INC #170 639 EXECUTIVE PL STE 400 (910) 481-0503 --- Structure Information 000 000 52X41 3BDR MONO W/ GARAGE Flood Zone . . . . . . . . FLOOD ZONE X Other struct info . . . . # BEDROOMS PROPOSED USE 3000000.00 SFD SEPTIC - EXISTING? WATER SUPPLY NEW TANK COUNTY Permit . . . . . BLDG, MECH, ELEC, PLB, INSU PERMIT Additional desc . . Phone Access Code . 1052448 9/02/14 Valuation . . . 0 Issue Date . . . . Expiration Date . . 9/02/15 Special Notes and Comments T/S: 07/25/2014 09:17 AM JBROCK ----TINGEN POINTE #170 PERMIT INCLUDES BLDG, ELEC, MECH, PLUMB INSULATION AND LAND USE. Work must conform and comply with the STATE BUILDING CODE and all other State and local laws, ordinances & regulations \_\_\_\_\_

P.O	. BOX	65	CENTRAL PERMITTING				
LILLINGTON, NC 27546 For Inspections Call: (910) 893-7525 Fax: (910) 893-2793 Bldg Insp scheduled before 2pm available next business day.							
Proper PARCEL Applic Subdiv	ty Add NUMBE ation ision	ress R descri Name		-82- (SFD)	2 9/02/14		
Permit			. BLDG, MECH, ELEC, PLB, INSU PERMI	Т			
Additi Phone			. 1052448				
			Required Inspections				
	Phone Insp#		Description	Initials	Date		
10-30 20-999 20 30-50 30-60 30-60 30-60 40-60 40-60 40-60 40-60 999 1000-999	114 104 129 425 125 325 225 429 131 329 229	B114 B104 I129 R425 R325 R325 R429 R131 R329 R229 H824	ADDRESS CONFIRMATION R*BLDG MONO SLAB/TEMP SVC POLE R*FOUND & SETBACK VERIF SURVEY R*INSULATION INSPECTION FOUR TRADE ROUGH IN ONE TRADE ROUGH IN THREE TRADE ROUGH IN TWO TRADE ROUGH IN FOUR TRADE FINAL ONE TRADE FINAL THREE TRADE FINAL THREE TRADE FINAL TWO TRADE FINAL ENVIR. OPERATIONS PERMIT R*PLUMB UNDER SLAB				

