

Initial Application Date: 2/8/16

Application # 1050037989

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 LLC Mailing Address: 350 Wagoner Drive
City: Fayetteville State: nc Zip: 28303 Contact No: 9196064696 Email: cdb1971@gmail.com

APPLICANT*: Same 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 # 9196064696

PROPERTY LOCATION: Subdivision: Thomas Manor Lot #: 8 Lot Size: .574
State Road # 184 State Road Name: Widgeon Way Map Book & Page: 203 / 279-281
Parcel: 130630 0096 10 PIN: 0630-24-796.000
Zoning: RA30 Flood Zone: NC Watershed: - Deed Book & Page: 3149 / 037 Power Company*: Duke

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

PROPOSED USE:

- SFD: (Size 69 x 42) # 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: Proposed Manufactured Homes: _____ Other (specify): _____

Required Residential Property Line Setbacks:

	Minimum	Actual
Front	35	39
Rear	25	92
Closest Side	10	41.5
Sidestreet/corner lot	_____	_____
Nearest Building on same lot	_____	_____

Comments: _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Old US 421 North. After passing Neil Thomas Road Thomas Manor is on
left side. Lot 13 is on the right at the end of the project.

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

2/7/14

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

NAME: Weaver Development, 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 # 014088-LB-2-9-16

- 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**:

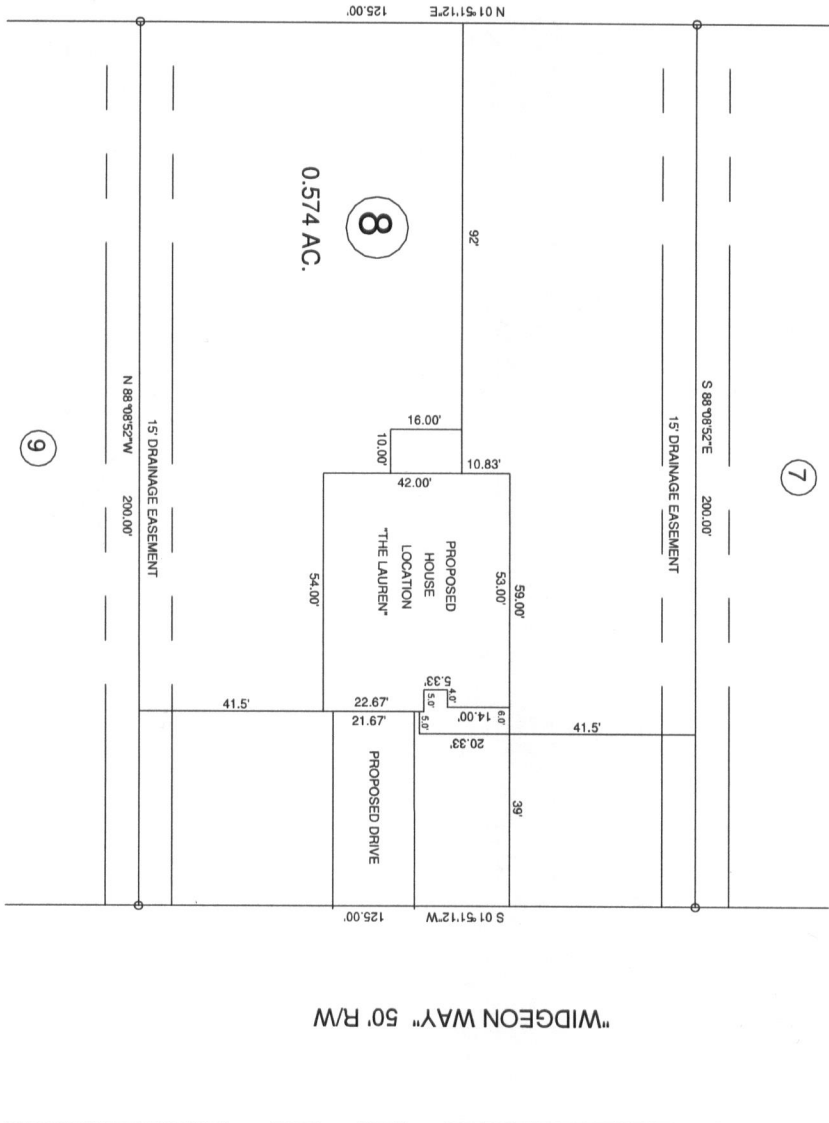
- YES NO Does the site contain any Jurisdictional Wetlands?
- YES NO Do you plan to have an irrigation system now or in the future?
- YES NO Does or will the building contain any drains? Please explain. _____
- YES NO Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
- 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)

16/18/14
DATE



MAP REFERENCE: MAP NO. 2013-279-281

MINIMUM BUILDING SET BACKS
 FRONT YARD ----- 30'
 REAR YARD ----- 25'
 SIDE YARD ----- 10'
 CORNER LOT SIDE YARD - 20'
 MAXIMUM HEIGHT ----- 35'

TOWNSHIP UPPER LITTLE RIVER COUNTY HARNETT STATE: NORTH CAROLINA DATE: FEBRUARY 03, 2016 ZONE RA-30 WATERSHED DISTRICT PARCEL ID#		PROPOSED PLOT PLAN - LOT - 8 "THOMAS MANOR S/D"		BENNETT SURVEYS 1882 CLARK RD. LILLINGTON, N.C. 27546 (910) 893-5252 SCALE: 1" = 40' SURVEYED BY: RVB DRAWN BY: RVB FIELD BOOK F-1304 DRAWING NO. 18058	
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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 _____ Date _____

Site Address _____ Phone _____

Directions to job site from Lillington _____

Subdivision _____ Lot _____

Description of Proposed Work New Construction # of Bedrooms _____

Heated SF _____ Unheated SF _____ Finished Bonus Room? _____ Crawl Space _____ Slab _____

General Contractor Information

Weaver Development, Inc _____ 919-606-4696 _____
Building Contractor's Company Name Telephone

350 Wagoner Dr. Fayetteville, NC 28303 _____
Address Email Address

26962 _____
License #

Electrical Contractor Information

Description of Work New Construction Service Size 200 Amps T-Pole Yes _____ No _____

JM Pope Electric _____ 910-890-1060 _____
Electrical Contractor's Company Name Telephone

409 Chatham St. Sanford, NC 27330 _____
Address Email Address

21326 _____
License #

Mechanical/HVAC Contractor Information

Description of Work New Construction _____ 919-398-4281 _____
Central Air, Inc. Telephone

Mechanical Contractor's Company Name
POB 175 For Oaks, NC 27524 _____
Address Email Address

28699 _____
License #

Plumbing Contractor Information

Description of Work New Construction # Baths _____

Jamie Johnson Plumbing _____ 910-814-7705 _____
Plumbing Contractor's Company Name Telephone

614 Byrd Rd. Bunnlevel, NC 28323 _____
Address Email Address

21649 _____
License #

Insulation Contractor Information

Insulation, Inc. _____ 919-770-1974 _____
Insulation Contractor's Company Name & Address Telephone

*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

10/18/14

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 Weaver Development, Inc

Sign w/Title [Signature] Date 10/18/14

Jennifer Brock

From: CD Blackwell <cdb1971@gmail.com>
Sent: Sunday, March 13, 2016 4:09 PM
To: Jennifer Brock
Subject: Fwd: LiensNC Notice of Appointment of Lien Agent - Address: 184 Widgeon Way, Lillington, 27546

----- Forwarded message -----

From: **LiensNC Support** <donotreply@liensnc.com>
Date: Tue, Mar 1, 2016 at 12:08 PM
Subject: LiensNC Notice of Appointment of Lien Agent - Address: 184 Widgeon Way, Lillington, 27546
To:

A(n) Appointment of Lien Agent was filed on March 01, 2016, 12:08:06 PM using the North Carolina Online Lien Agent System (LiensNC). Details of this filing include:

Project Property

Lot 8 Thomas Manor
184 Widgeon Way
Lillington, NC 27546
Harnett County

Entry Number: [426461](#) ([entry search](#), [view related filings](#))

Date of Filing: March 01, 2016, 12:08:06 PM

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 Homes Inc.
350 Wagoner Drive
Fayetteville, NC 28303
United States Email: nmcleod@weavercompanies.com
Phone: [910-433-0888](tel:910-433-0888)

Design Professionals

Date of First Furnishing

March 07, 2016

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	16-50037989	Page	2
Property Address	184 WIDGEON WAY	Date	3/14/16
PARCEL NUMBER	13-0630- - -0096- -10-		
Application description	CP NEW RESIDENTIAL (SFD)		
Subdivision Name	THOMAS MANOR 36LOTS		
Property Zoning	PENDING		
Permit	BLDG, MECH, ELEC, PLB, INSU PERMIT		
Additional desc			
Phone Access Code	1127430		

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	_____	___/___/___
30-999	205	E205	R*ELEC 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	_____	___/___/___

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.

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 Property Address 184 WIDGEON WAY
 PARCEL NUMBER 13-0630- - -0096- -10-
 Application type description CP NEW RESIDENTIAL (SFD)
 Subdivision Name THOMAS MANOR 36LOTS
 Property Zoning PENDING

Owner

WEAVER DEVELOPMENT COMPANY INC
 350 WAGNOR DR
 FAYETTEVILLE NC 28305

Contractor

WEAVER DEVELOPMENT CO INC
 PO BOX 53786
 FAYETTEVILLE NC 28305
 (910) 433-0888

Applicant

WEAVER HOMES LLC
 350 WAGONOR DR
 FAYETTEVILLE NC 28303
 (919) 606-4696

--- Structure Information 000 000 69X42 3BDR W/GARAGE SLAB
 Flood Zone FLOOD ZONE X
 Other struct info # BEDROOMS 3.00
 PROPOSED USE SFD
 SEPTIC - EXISTING? NEW
 WATER SUPPLY COUNTY

Permit BLDG, MECH, ELEC, PLB, INSU PERMIT
 Additional desc
 Phone Access Code 1127430
 Issue Date 3/14/16 Valuation 0
 Expiration Date 3/14/17

Special Notes and Comments

T/S: 02/09/2016 08:36 AM LBENNETT --
 OLD US 421 NORTH - AFTER PASSING NEILL
 THOMAS ROAD - THOMAS MANOR IS ON THE
 LEFT SIDE - LOT 8 IS ON THE RIGHT
 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