	21	29	16
nitial Application Date:	21	- 0	· · ·

Application # 1050038338
CU#

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Central Permitting

Nearest Building on same lot

Residential Land Use Application

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** _____ Mailing Address: 98 Regal Crest Drive LANDOWNER: Jason & Megan Minton Fuquay Varina APPLICANT*: Weaver Homes, Inc.

Mailing Address: 350 Wagoner Drive

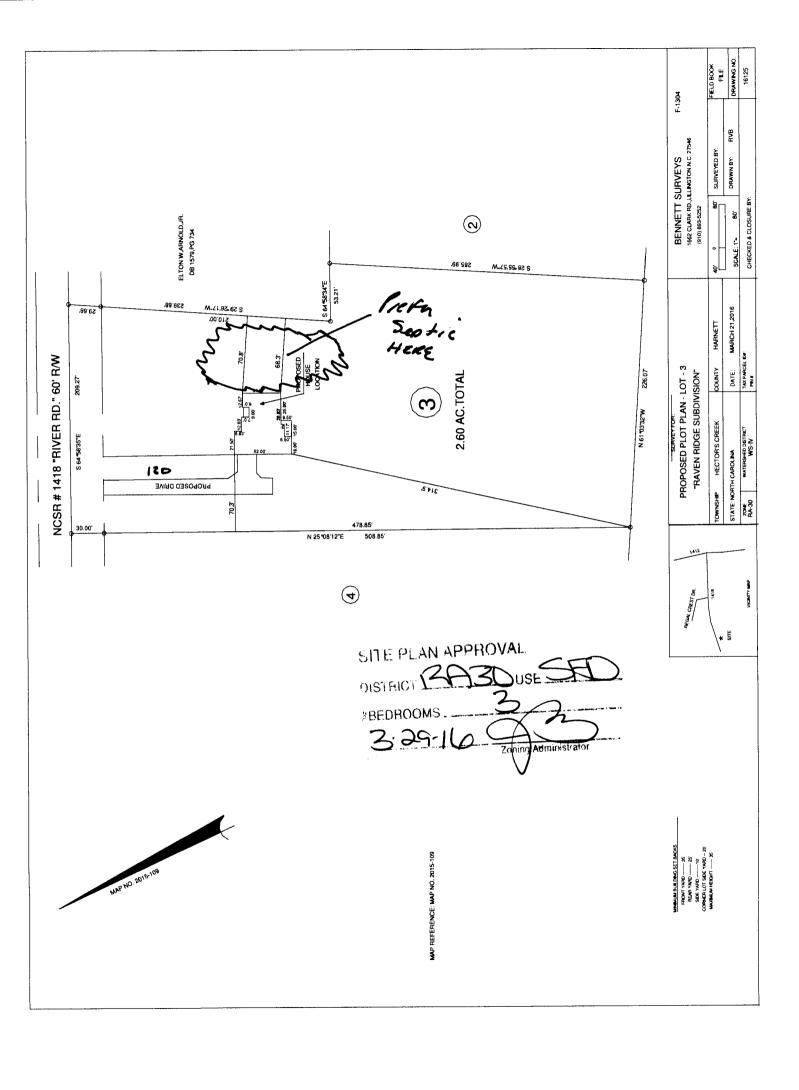
Fayetteville State: NC Zip: 28030 Contact No: 910-630-2100 Email: cdb1971@gmail.com

Please fill out applicant information if different than landowner CONTACT NAME APPLYING IN OFFICE: Dustin Blackwell Phone # 919-606-4696 PROPERTY LOCATION: Subdivision: _ Raven Ridge Rin load Map Book & Page: 30 State Road # 1418 State Road Name: PIN: 0633-21-2632.000 Parcel: 050633 0001 03 Zoning: Rood Zone: Watershed: Deed Book & Page: 3347 / 612 Power Company: *New structures with Progress Energy as service provider need to supply premise number ______ from Progress Energy. **PROPOSED USE:** SFD: (Size 56 x 52) # Bedrooms: 3 # Baths: 2 Basement(w/wo bath): Garage: Deck: Crawl Space: Slab: 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: Manufactured Homes: Other (specify): Comments: Required Residential Property Line Setbacks: Front Rear Closest Side Sidestreet/corner lot_

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:	Hwy 401 left on Chris	stian Light Road.	Left on River Road.	Pass Regal
Crest and Raven Ridge is road side lots on the right side.				
	-			
				······································
f permits are granted I agree to conform to all ordinances and laws o	f the State of North Caroli	ina regulating such	work and the specificat	ions of plans submitted.
hereby state that foregoing statements are accurate and correct to the	ne best of my knowledge.	Permit subject to r	evocation if false inforn	nation is provided.
		3/20/16		
Signature of Owner or Owner's Ag	gent	Date		
_				

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

^{***}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.***



NAME:	Weaver	Homes Juc.		APPLICATION #:
Count IF THE INF PERMIT OI depending u P Envir P If P If A 6 A 6 A 6 CC	ty Health D FORMATION II R AUTHORIZA Ipon documenta 10-893-7525 FORMENTAL HORIZA II property I Thes must be of lace "orange I I buildings, s lace orange I I property is the valuation to be It lots to be or failure to the or failure to the one of the confirmation n	*This application to be epartment Applica IN THIS APPLICATION IS ATTION TO CONSTRUCT it ion submitted. (Complete option 1 palth New Septic Systems must be made clearly flagged approximation by the second flags as wimming pools, etc. Environmental Health inckly wooded, Environe performed. Inspect addressed within 10 uncover outlet lid, made proposed site call the citing notification performed in the citing notification performed in the citing notification performed in the citing notification at end of	ation for Improvements S FALSIFIED, CHANGED, O SHALL BECOME INVALID esterplan = 60 months; Complete Stem Code 800 Evisible. Place "pink produce the each corner of the proportion of the proport	for a septic system inspection.* It Permit and/or Authorization to Construct R THE SITE IS ALTERED, THEN THE IMPROVEMENT The permit is valid for either 60 months or without expiration ete plat = without expiration) CONFIRMATION # perty flags" on each corner iron of lot. All property ween corners. osed structure. Also flag driveways, garages, decks, developed at/for Central Permitting. Isily viewed from road to assist in locating property. Ithat you clean out the undergrowth to allow the soil is freely around site. Do not grade property. Infirmation. \$25.00 return trip fee may be incurred property lines, etc. once lot confirmed ready. In at 910-893-7525 option 1 to schedule and use code st) for Environmental Health inspection. Please note
 Envir Fi P D A if gi 	conmental Homeology ollow above in repare for in cossible) and to NOT LEAVI fter uncovering multiple per iven at end o	paith Existing Tank Instructions for placing spection by removing then put IId back In put IId back IId back In put IId back IId ba	Inspections Code 800 g flags and card on prope g soil over outlet end of place. (Unless inspection C TANK e voice permitting system 800 for Environmental his request.	
SEPTIC If applying {_} Acc	g for authorizat	ion to construct please inc	dicate desired system type(s): { \(\bigseleft \) Conventional	can be ranked in order of preference, must choose one. {}} Any
The applic question.	ant shall notif	y the local health departs "yes", applicant MUS	T ATTACH SUPPORTIN	application if any of the following apply to the property in IG DOCUMENTATION :
/ES {}YES {}YES	$\{X \}$ NO $\{X \}$ NO	Do you plan to have a	any Jurisdictional Wetlands an <u>irrigation system</u> now or ling contain any <u>drains</u> ? Ple	in the future?
{}YES {}YES {}YES	$\{X\}$ NO $\{X\}$ NO	Is any wastewater goi	· -	or Wastewater Systems on this property? te other than domestic sewage? Agency?

		the local health department upon submittal of this application if any of the following apply to the property "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:
/ES	$\{\underline{X}\}$ NO	Does the site contain any Jurisdictional Wetlands?
{}}YES	$\{\underline{X}\}$ NO	Do you plan to have an <u>irrigation system</u> now or in the future?
{_}}YES	{ ∑ } №	Does or will the building contain any drains? Please explain.
{}}YES	$\{X\}$ NO	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
{}}YES	$\{X\}$ NO	Is any wastewater going to be generated on the site other than domestic sewage?
{_}}YES	{ ⅓ } NO	Is the site subject to approval by any other Public Agency?
{}}YES	{\(\frac{1}{2}\)} NO	Are there any Easements or Right of Ways on this property?
{}}YES	$\{X\}$ 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)

DATE

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	Date		
Site Address			
Directions to job site from Lillington			
Subdivision	Lot		
Description of Proposed Work	# of Bedro	oms	
Heated SF Unheated SF Finished Bonus Room? General Contractor Information			
Weaver Homes Inc.	410-603	-2100	
Weaver Homes Inc. Building Contractor's Company Name 350 WAGONER Dr. Fayetkulle, W 28303 Address	CUB 1971 @ Email Address	qmail.com	
Description of Work New Construction Service Size	1	,	
Description of Work VC Size Size			
Im Pope Electric Electrical Contractor's Company Name	9/0 -890 Telephone	7060	
409 Chatansti Surface, NC 27330	relephone		
Address	Email Address		
21326	Email / todiooc		
License # Mechanical/HVAC Contractor Inform	ation		
Description of Work New Construction	010 000	(1) 4 1	
Central Air, INC	919-398	-7281	
Mechanical Contractor's Company Name	Telephone		
POB 175 FOU CAKS NC 27524	Frank Address	<u> </u>	
Address 28699	Email Address		
License #			
Plumbing Contractor Information	<u>n</u>		
Description of Work New Construction	_# Baths		
Description of Work New Construction Sanic Johnson Plumbing Plumbing Contractor's Company Name 614 Byrd Rd. Bun Haul, NC 28323	910-814	-7705	
Plumbing Contractor's Company Name	Telephone		
614 Byrd Rd. Bun level, NC 28323			
Address	Email Address		
21649			
License #			
Insulation Contractor Information	010 - 77	0-1974	
Insulation, Inc.			
Insulation Contractor's Company Name & Address	Telephone		

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** Officer/Agent of the Contractor or Owner 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

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



Legal Description:

LOT#3 RAVEN RIDGE S/D MAP#2015-109

Harnett County GIS

PID: 050633 0001 03

PIN: 0633-21-2632.000

REID:

Subdivision: 2015-109 Deeded Acreage: 2.45 ac Total Acreage: 2.39 ac

Account Number: 1500018070 Name 1: MINTON JASON ALAN Name 2: MINTON MEGAN NICOLE

Owner Address 1: 98 REGAL CREST DR

Owner Address 2: Owner Address 3:

City, State, Zip: FUQUAY VARINA, NC, 27526

Building Count: 0 Township Code: 05 Fire Code: FR30

Property Address: RIVER RD Parcel Building Value: \$0 Parcel Obxf Value: \$0 Parcel Land Value: \$33000 Parcel Obxf Value: \$0 Parcel Deferred Value: \$0 Total Assessed Value: \$33000 Total Market Value: \$33000

Tax Data Last Modified:

Calculated Land Units / Type: 0, ac

Neighborhood: 00501 Actual Year Built:

TotalAcutalAreaHeated: Sq/Ft Sale Month and Year: 1 / 2016

Sale Price: \$41000

Deed Book & Page: 3367-0121

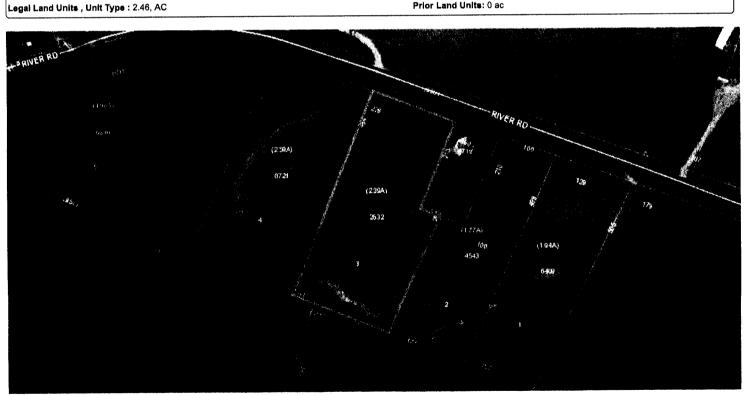
Deed Date:

Plat Book & Page: 2015-109 Instrument Type: WD Vacant or Improved: QualifiedCode: Q Transfer or Split: T

Prior Building Value: \$0 Prior Obxf Value: \$0 Prior Land Value: \$0 Prior Special Land Value: \$0

Prior Deferred Value: \$0 Prior Assessed Value: \$0

Prior Land Units: 0 ac



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 16-50038338 Date 4/18/16 Subdivision Name Property Zoning RES/AGRI DIST - RA-30 Contractor Owner ______ MINTON JASON A & MEGAN N WEAVER DEVELOPMENT CO INC 98 REGAL CREST DRIVE PO BOX 53786 FUQUAY VARINA NC 27526 FAYETTEVILLE NC 28305 (910) 433-0888 Applicant WEAVER HOMES INC (919) 606-4696 Structure 350 WAGONER DR FAYETTEVILLE Structure Information 000 000 56X52 3BDR CRAWL W/ GARAGE & DECK Flood Zone FLOOD ZONE X Other struct info # BEDROOMS 3000000.00 PROPOSED USE SFD SEPTIC - EXISTING? NEW TANK
WATER SUPPLY COUNTY WATER SUPPLY Permit BLDG, MECH, ELEC, PLB, INSU PERMIT Additional desc . .

Phone Access Code . 1135409
Issue Date . . . 4/18/16 Valuation . . . 0
Expiration Date . . 4/18/17

HARNETT COUNTY CENTRAL PERMITTING

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.

Page Date 4/18/16 Application Number 16-50038338 Subdivision Name Property Zoning RES/AGRI DIST - RA-30

Permit BLDG, MECH, ELEC, PLB, INSU PERMIT

Additional desc . .

Phone Access Code . 1135409

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
10 20 20-30 30-999 40-50 40-60 40-60 40-60	101 103 814 105 129 425 125 325 225	B101 B103 A814 B105 I129 R425 R125 R325 R225	R*BLDG FOOTING / TEMP SVC POLE R*BLDG FOUND & TEMP SVC POLE ADDRESS CONFIRMATION R*OPEN FLOOR R*INSULATION INSPECTION FOUR TRADE ROUGH IN ONE TRADE ROUGH IN THREE TRADE ROUGH IN TWO TRADE ROUGH IN		
50-60 50-60	429 131	R429 R131	FOUR TRADE FINAL ONE TRADE FINAL		
50-60	329	R329	THREE TRADE FINAL		-',',-
50-60	229	R229	TWO TRADE FINAL		//
50-60	209	E209	R*ELEC TEMP POWER CERT		_/_/_
999		H824	ENVIR. OPERATIONS PERMIT		

Lindsey Bennett

From:

Dustin Blackwell <cdb1971@gmail.com>

Sent:

Monday, April 18, 2016 9:11 AM

To:

Lindsey Bennett

Subject:

Fwd: LiensNC Notice of Appointment of Lien Agent - Address: 789 River Road, Fuquay

Varina, 27526

Dustin

Begin forwarded message:

From: LiensNC Support < donotreply@liensnc.com>

Date: April 18, 2016 at 9:11:06 AM EDT

To: Undisclosed recipients:;

Subject: LiensNC Notice of Appointment of Lien Agent - Address: 789 River Road, Fuquay

Varina, 27526

A(n) Appointment of Lien Agent was filed on April 18, 2016, 09:11:01 AM using the North Carolina Online Lien Agent System (LiensNC). Details of this filing include:

Project Property

Lot 3 Raven Ridge 789 River Road Fuquay Varina, NC 27526 Harnett County

Entry Number: 451748 (entry search, view related filings)

Date of Filing: April 18, 2016, 09:11:01 AM

Lien Agent

First American Title Insurance Company

• Online: www.liensnc.com

• Address: 19 W. Hargett St., Suite 507 / Raleigh, NC 27601

Phone: 888-690-7384Fax: 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

Design Professionals

Date of First Furnishing

April 21, 2016

Click to view full filing details

Scan for instant access on your mobile phone



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