

Initial Application Date: 4-19-16

Application # 1650038524

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: HARNETT Land Group LLC Mailing Address: P.O. Box 591
City: MAMERS State: NC Zip: 27552 Contact No: 910-893-3331 Email: _____

APPLICANT: Cates Building Inc Mailing Address: 639 Executive Place Suite 400
City: Fayetteville State: NC Zip: 28305 Contact No: 910-481-0503 Email: angie@CAVINESS and cates.com
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Angie Fowler Phone # 910-481-0503

PROPERTY LOCATION: Subdivision: Tingen Pointe Lot #: 174 Lot Size: .39
State Road # 685 State Road Name: Juno DR Map Book & Page: 2014, 179
Parcel: 03957601008886 PIN: 9597-32-5753.000
Zoning: RA2008 Flood Zone: X Watershed: NA Deed Book & Page: 2257, 94 Power Company*: Duke

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

PROPOSED USE:

SFD: (Size 39 x 38) # Bedrooms: 3 # Baths: 2.5 Basement(w/wo bath): NO Garage: 2 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: 1 Proposed Manufactured Homes: _____ Other (specify): _____

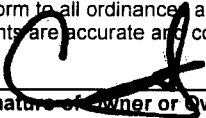
Required Residential Property Line Setbacks:

Front Minimum 35 Actual 36
Rear 25 92
Closest Side 10 23.3
Sidestreet/corner lot _____
Nearest Building on same lot _____

Comments: _____

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.

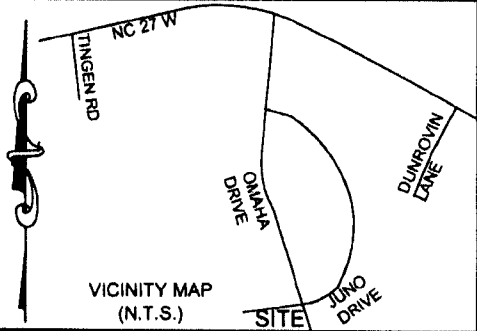


Signature of Owner or Owner's Agent

4-19-16
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



- Notes:
- This plat is for location purposes only. Builder should verify foundation information with plans before construction begins.
 - There is no USCE or NCGS monument within 2000' of this site.
 - The subject property is not within a special flood hazard area as determined by the Department of Housing and Urban Development.
 - The easement information shown hereon was obtained from the recorded plat. No updated title search was performed by the surveyor.
 - All distances are measured in feet.

LEGEND

- EXISTING IRON PIPE
- CURVE PT / PC
- SURVEYED LINE
- LINE NOT SURVEYED
- ADJOINER

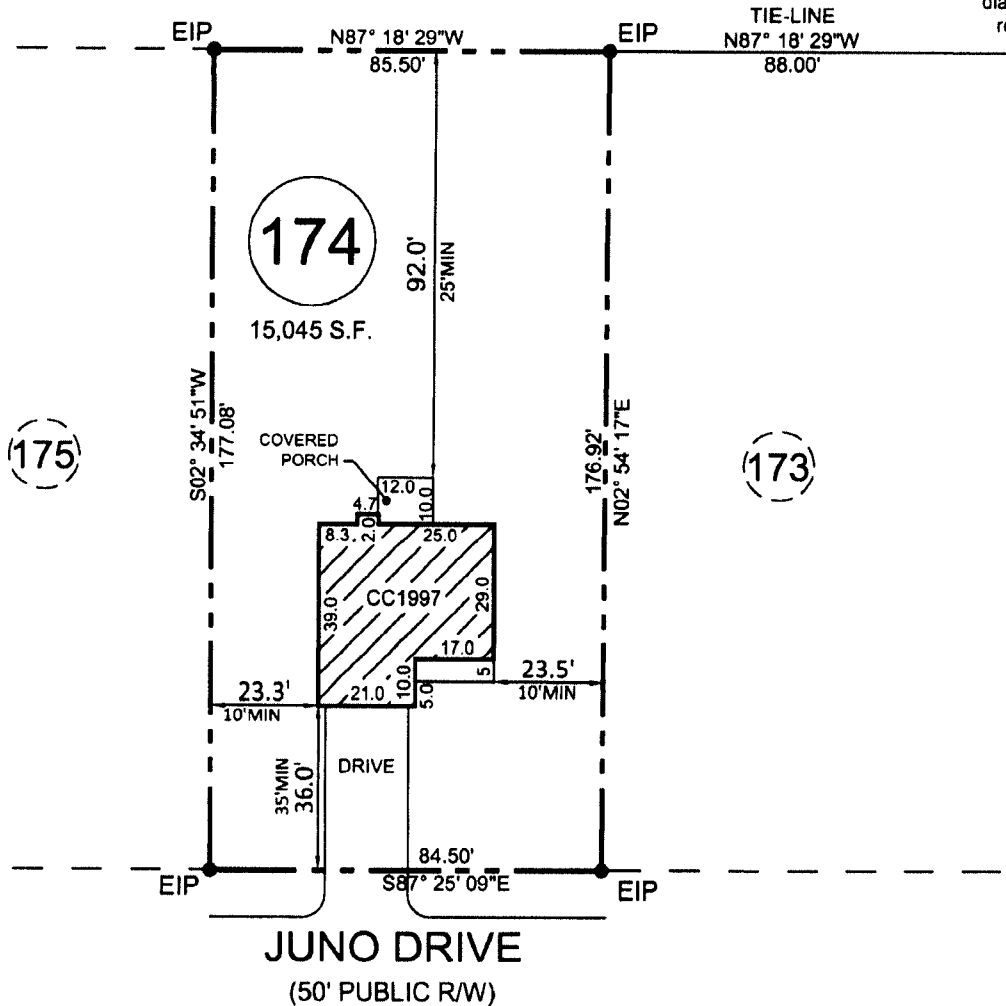


SCALED IN FEET

"PRELIMINARY PLAT - NOT FOR CONVEYANCES OR SALES"

MOORE, MELVIN RAY
DB. 1076, PG. 827
TAX PIN# 9597-32-7416

1/2 inch
diameter
rebar



- PLOT PLAN FOR -
CATES BUILDING, INC
- SUBDIVISION -
TINGEN POINTE SUBDIVISION, PHASE 6

BARBECUE TWP.
HARNETT COUNTY
NORTH CAROLINA

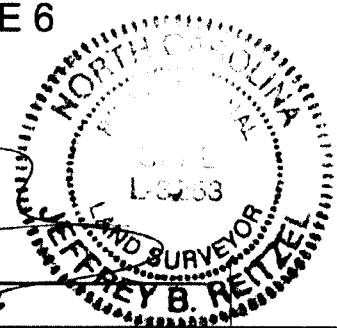
APRIL 14, 2016
SCALE 1" = 40'
FIELD BOOK:

REFERENCE
PLAT BOOK 2014, PAGE 179
HARNETT COUNTY NORTH CAROLINA REGISTRY



115 broadfoot ave.
p.o. box 53774
layetteville, n.c., 28305
phone 910-484-5191
fax 910-484-0388
LICENSE #: F-0106

[Signature]
PROF. SURVEYOR NO. L 9254



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 1

CONFIRMATION # _____

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)

DATE

SOUTHEASTERN SOIL & ENVIRONMENTAL ASSOC., INC.

PROPOSED SUBSURFACE WASTE DISPOSAL SYSTEM DETAIL SHEET

SUBDIVISION: TINGEN PT
 INITIAL SYSTEM: APPROVED 25% REDUCTION

LOT 174
 REPAIR APPROVED 25% REDUCTION

DISTRIBUTION: SERIAL

DISTRIBUTION SERIAL

BENCHMARK: 100.0

LOCATION FC 173/174

NO. BEDROOMS: 3

LTAR 0.35 GPD/FT²

LINE	FLAG COLOR	ELEVATION	LENGTH
1	Y	102.25	40'
2	P	101.58	50'
3	Y	101.34	90'
4	P	100.42	90'
5A	Y	99.67	15'
			<u>265'</u>
5B	Y	99.67	75'
6	P	99.34	90'
7	Y	98.84	65'
8	P	98.08	35'
9	Y	97.25	25'
			<u>290'</u>

Initial system

BY M FAUER

DATE 04/2016

TYPICAL PROFILE

THERE SHALL BE NO GRADING,
 CUTTING, LOGGING OR OTHER SOIL
 DISTURBANCE IN SEPTIC AREA

0-10 LS (Vt, long)
10-43 SCL. Am (F, stick)
cr 2 > 43"
INSTAL AT 13-24"

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 Cates Building Inc Date 5-9-13
Site Address 685 Juno Drive Phone 910-481-0503
Directions to job site from Lillington _____

Subdivision Tingen Pointe Lot 174
Description of Proposed Work Single Family Dwelling # of Bedrooms 3
Heated SF 1997 Unheated SF 502 Finished Bonus Room? N/A Crawl Space _____ Slab X

General Contractor Information

Cates Building, Inc 910-481-0503
Building Contractor's Company Name Telephone
639 Executive Place, Suite 400 Fayetteville angie@carinessandcates.com
Address NC 28305 Email Address
38851
License #

Electrical Contractor Information

Description of Work _____ Service Size _____ Amps T-Pole _____ Yes _____ No
Tarheel Electric 910-303-2334
Electrical Contractor's Company Name Telephone
PO Box 458 Stedman NC 28391
Address Email Address
22985-4
License #

Mechanical/HVAC Contractor Information

Description of Work _____
Carolina Comfort Air, Inc 919-550-7711
Mechanical Contractor's Company Name Telephone
5212 US Hwy
Address Email Address
29077
License #

Plumbing Contractor Information

Description of Work _____ # Baths _____
Vance Johnson Plumbing 910-424-6712
Plumbing Contractor's Company Name Telephone
3242 mid Pines Dr. Fayetteville NC 28306
Address Email Address
7756-P1
License #

Insulation Contractor Information

Cumberland Insulation 4205 Clinton Road 910-484-7118
Insulation Contractor's Company Name & Address Telephone
Fayetteville, NC 28312

*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

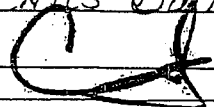
Has one (1) or more subcontractors(s) and has obtained workers compensation insurance to cover them

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 Cates Building Inc

Sign w/Title 

Date 4-19-16

DO NOT REMOVE!**Details: Appointment of Lien Agent**

Entry #: 676479

Filed on: 06/26/2017

Initially filed by: CatesBuildingInc

Designated Lien Agent

Investors Title Insurance Company

Online: www.liensnc.comAddress: 19 W. Hargett St., Suite 507 / Raleigh, NC
27601

Phone: 888-690-7384

Fax: 913-489-5231

Email: support@liensnc.com**Project Property**Lot 174 in Tingen Pointe Parcel # 03957601 0088
86 Deed book 3455 page 969-973
685 Juno Drive
Broadway, NC 27505
Harnett County**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**Owner Information**Cates Building Inc
639 Executive Place, Suite 400
Fayetteville, NC 28305
United States
Email: angie@cavinessandcates.com
Phone: 910-481-0503**Property Type**

1-2 Family Dwelling

Date of First Furnishing

07/21/2017

View Comments (0)

Technical Support Hotline: (888) 690-7384