

Initial Application Date: 6/27/16

Application # 1650039039

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 Development Co, Inc. Mailing Address: 350 Wagoner Drive
City: Fayetteville State: NC Zip: 28303 Contact No: 910-630-2100 Email: cdb1971@gmail.com

APPLICANT*: Weaver Homes, Inc. Mailing Address: 350 Wagoner Drive
City: Fayetteville State: NC Zip: 28303 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: Thomas Manor Lot #: 22 Lot Size: .57
State Road # _____ State Road Name: 14 Ringneck Ct. Map Book & Page: 3139/485
Parcel: 130630009624 PIN: 0630-35-0104.000
Zoning: RA-30 Flood Zone: X Watershed: - Deed Book: & Page: 3139/485 Power Company*: Duke

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

PROPOSED USE:

- SFD: (Size 58' x 75') # Bedrooms: 4 # Baths: 2.5 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: proposed Manufactured Homes: _____ Other (specify): _____

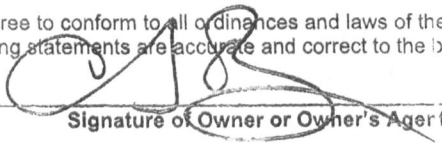
Required Residential Property Line Setbacks:

	Minimum	Actual
Front	35	39
Rear	25	48
Closest Side	10	54
Sidestreet/corner lot	10	54
Nearest Building on same lot		

Comments _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Hwy 421 N. Left on Neil Thomas Road, right on old 421 left into Thoma:

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

6/22/16

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****

NAME: Wesley Jones, Inc

APPLICATION #: 39039

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

[Handwritten Signature]

6/22/16

MAP NO. 2013-279-281



SITE PLAN APPROVAL
 DISTRICT RA30 USE SFD
 #BEDROOMS 4
19 July 16
 ZONING ADMINISTRATOR

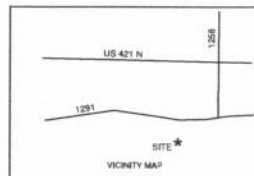
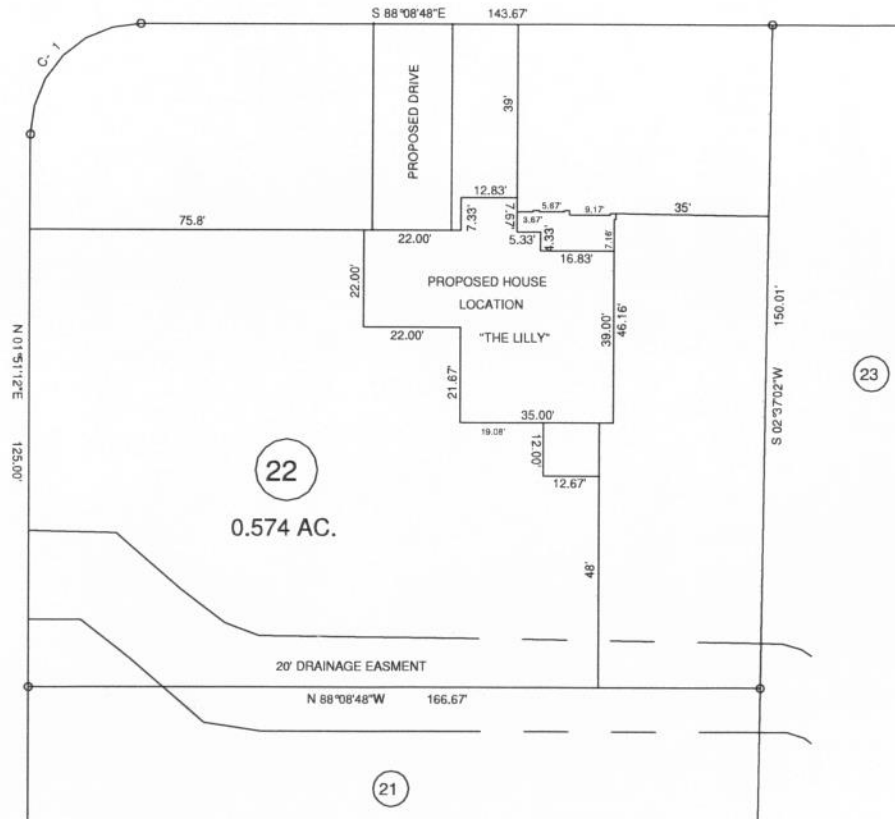
MAP REFERENCE: MAP NO. 2013-279-281

CURVE	RADIUS	LENGTH	CHORD	CH.BEARING
C-1	25.00'	39.27'	35.35'	N 46°51'25"E

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

"WIDGEON WAY" 50' R/W

"RINGNECK CT." 50' R/W



SURVEY FOR				BENNETT SURVEYS		F-1304
PROPOSED PLOT PLAN - LOT - 22				1662 CLARK RD., LILLINGTON, N.C. 27546		
"THOMAS MANOR S/D"				(910) 893-5252		
TOWNSHIP	UPPER LITTLE RIVER	COUNTY	HARNETT	20' 0 40'		FIELD BOOK
STATE	NORTH CAROLINA	DATE:	JULY 18, 2016	SCALE: 1"= 40'		SURVEYED BY:
ZONE	WATERSHED DISTRICT	TAX PARCEL ID#		DRAWN BY: RVB		DRAWING NO.
		PN#		CHECKED & CLOSURE BY:		16265

09/09/11

Application #

39039

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 Homes Inc

Building Contractor's Company Name

350 Wagoner Drive Fayetteville, NC 28303

Address

75971

License #

910-630-2100

Telephone

alb1971@ymail.com

Email Address

Electrical Contractor Information

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

JM Pope Electric

Electrical Contractor's Company Name

409 Chatham St. Sanford, NC 27330

Address

21326

License #

910-890-1060

Telephone

Email Address

Mechanical/HVAC Contractor Information

Description of Work New

Mainstream Mechanical

Mechanical Contractor's Company Name

412 Lazy Branch Dr. Benson, NC 27504

Address

31005

License #

919-291-0450

Telephone

Email Address

Plumbing Contractor Information

Description of Work New # Baths _____

Jamir Johnson Plumbing

Plumbing Contractor's Company Name

614 Byrd Rd. Bunnell, NC 28323

Address

21649

License #

910-814-7705

Telephone

Email Address

Insulation Contractor Information

Insulation, Inc

Insulation Contractor's Company Name & Address

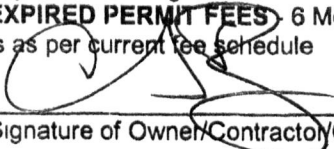
919-770-1974

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

6/22/16
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

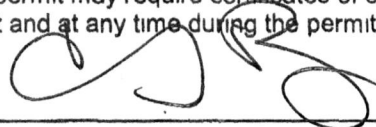
Has three (3) or more employees and has obtained workers compensation insurance to cover them

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 

Sign w/Title _____

Date 6/22/16

Selected Parcels Feature

Parcel Identification

PIN	0630-35-0104.000
[ParcelNumber]	130630 0096 24
[REID]	0066641

Owner Information

[AccountNumber]	1400012728
[Name1]	WEAVER DEVELOPMENT CO INC
[Name2]	
[Address1]	276 WIDGEON WAY
[Address2]	
[Address3]	
[City]	LILLINGTON
[State]	NC
[ZipCode]	27546-0000

Assessment Data

[ParcelBuildingValue]	
[ParcelObxfValue]	
[ParcelLandValue]	30000
[TotalAssessedValue]	30000

Property Information

[StreetDirection]	
[UnitNumber]	
[HouseNumber]	000014
[StreetName]	RINGNECK
[StreetType]	CT
[StreetSuffix]	

Legal Description

[LegalDescription]	LT#22 THOMAS MANOR 0.57AC MAP#2013-279
[LegalLandUnits]	1
[LegalLandType]	LT
GIS Calc Acres	0.57
[PlatBook]	2013
[PlatPage]	279

Structure Data

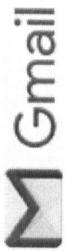
[ActualYearBuilt]	
[TotalAcutalAreaHeated]	

Sales Information

[DeedBook]	03139
[DeedPage]	0485
[DeedDate]	2013-07-14 20:00:00
[SaleYear]	2013
[SalePrice]	200000

Parcel Links

Zoning Overlay	130630 0096 24
Soils Overlay	130630 0096 24
PRC	130630 0096 24



CD Blackwell <cdb1971@gmail.com>

LiensNC Notice of Appointment of Lien Agent - Address: 14 Ringneck Court, Lillington, 27546

1 message

LiensNC Support <donotreply@liensnc.com>

Mon, Aug 1, 2016 at 4:02 PM

A(n) Appointment of Lien Agent was filed on August 01, 2016, 04:02:07 PM using the North Carolina Online Lien Agent System (LiensNC). Details of this filing include:

Project Property

Lot 22 Thomas Manor
14 Ringneck Court
Lillington, NC 27546
Harnett County

16-50039039

Entry Number: 506735 (entry search, view related filings)

Date of Filing: August 01, 2016, 04:02:07 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

Design Professionals

Date of First Furnishing

19-250 3038
P30PE 052-11

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.

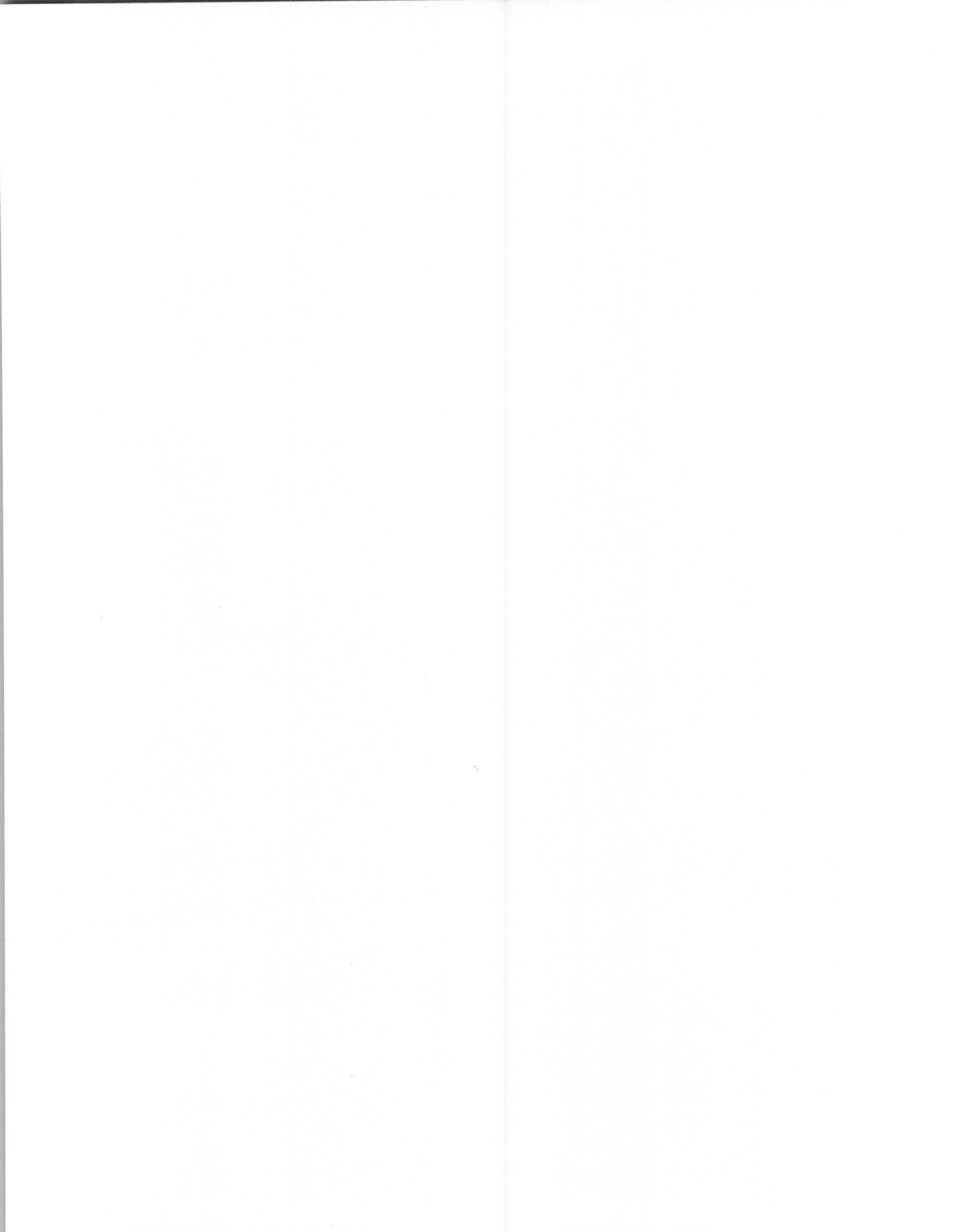
Application Number 16-50039039 Page 2
Property Address 14 RINGNECK CT Date 8/04/16
PARCEL NUMBER 13-0630- - -0096- -24-
Application description . . . CP NEW RESIDENTIAL (SFD)
Subdivision Name THOMAS MANOR 36LOTS
Property Zoning PENDING

Permit BLDG,MECH,ELEC,PLB,INSU PERMIT

Additional desc . . .
Phone Access Code . . . 1149996

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	_____	___/___/___
30	104	B104	R*FOUND & SETBACK VERIF SURVEY	_____	___/___/___
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	_____	___/___/___
50-60	209	E209	R*ELEC TEMP POWER CERT	_____	___/___/___
999		H824	ENVIR. OPERATIONS PERMIT	_____	___/___/___
999		H828	ENVIRO. WELL 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.

Application Number 16-50039039 Date 8/04/16
Property Address 14 RINGNECK CT
PARCEL NUMBER 13-0630- - -0096- -24-
Application type description CP NEW RESIDENTIAL (SFD)
Subdivision Name THOMAS MANOR 36LOTS
Property Zoning PENDING

Owner	Contractor
-----	-----
WEAVER DEVELOPMENT COMPANY INC	WEAVER DEVELOPMENT CO INC
350 WAGNOR DR	PO BOX 53786
FAYETTEVILLE NC 28305	FAYETTEVILLE NC 28305
	(910) 433-0888

Applicant

WEAVER DEVELOPMENT
350 WAGONER DR
FAYETTEVILLE NC 28302
(910) 630-2100

--- Structure Information 000 000 58X75 4BDR W/GARAGE W/DECK CRAWL
Flood Zone FLOOD ZONE X
Other struct info # BEDROOMS 4.00
PROPOSED USE SFD
SEPTIC - EXISTING? NEW
WATER SUPPLY COUNTY

Permit BLDG, MECH, ELEC, PLB, INSU PERMIT
Additional desc
Phone Access Code 1149996
Issue Date 8/04/16 Valuation 0
Expiration Date 8/04/17

Special Notes and Comments
T/S: 06/27/2016 08:48 AM LBENNETT --
HWY 421 N - LEFT ON NEILL THOMAS RD -
RIGHT ON OLD 421 LEFT INTO THOMAS MANOR
XX
PERMIT INCLUDES BLDG, ELEC, MECH, PLUMB
INSULATION AND LAND USE.
XX
Work must conform and comply with the
STATE BUILDING CODE and all other State
and local laws, ordinances & regulations

