

Initial Application Date: 10-20-16

Application # 1650039974

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: Wester Court Mailing Address: 614 Leslie Rd

City: Sayward N.C State: NC Zip: 275 Contact No: 919-868-9307 Email: Jenn8744@Aol.com

APPLICANT: Wester Court Mailing Address: 614 Leslie Rd Sayward NC

City: SAYWARD State: NC Zip: \_\_\_\_\_ Contact No: 919-868-9307 Email: Jenn8744@Aol.com  
\*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Steve Jernigan Phone # 919-868-9307

PROPERTY LOCATION: Subdivision: OXFORD Woods Lot #: 8 Lot Size: .580

State Road # \_\_\_\_\_ State Road Name: old stage Rd Map Book & Page: 2008 1214-216

Parcel: 04-0092-0017-18 PIN: 0082-98-1690

Zoning: RA30 Flood Zone: X Watershed: NA Deed Book & Page: 3440757 Power Company: Duke Energy

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

**PROPOSED USE:**

SFD: (Size 42 x 55) # 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: 1 Manufactured Homes: \_\_\_\_\_ Other (specify): \_\_\_\_\_

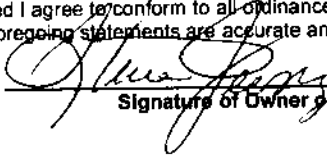
*proposed*  
Comments: \_\_\_\_\_

**Required Residential Property Line Setbacks:**

Front	Minimum	<u>35</u>	Actual	<u>60</u>
Rear		<u>25</u>		<u>106'</u>
Closest Side		<u>10</u>		<u>20</u>
Sidestreet/corner lot		<u>20</u>		<u>—</u>
Nearest Building on same lot		<u>10</u>		<u>—</u>

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 210 thru Angles T, R, M  
old stage rd Sub on R/L

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

10-19-16  
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\*\***

MAP NO. 2008-214

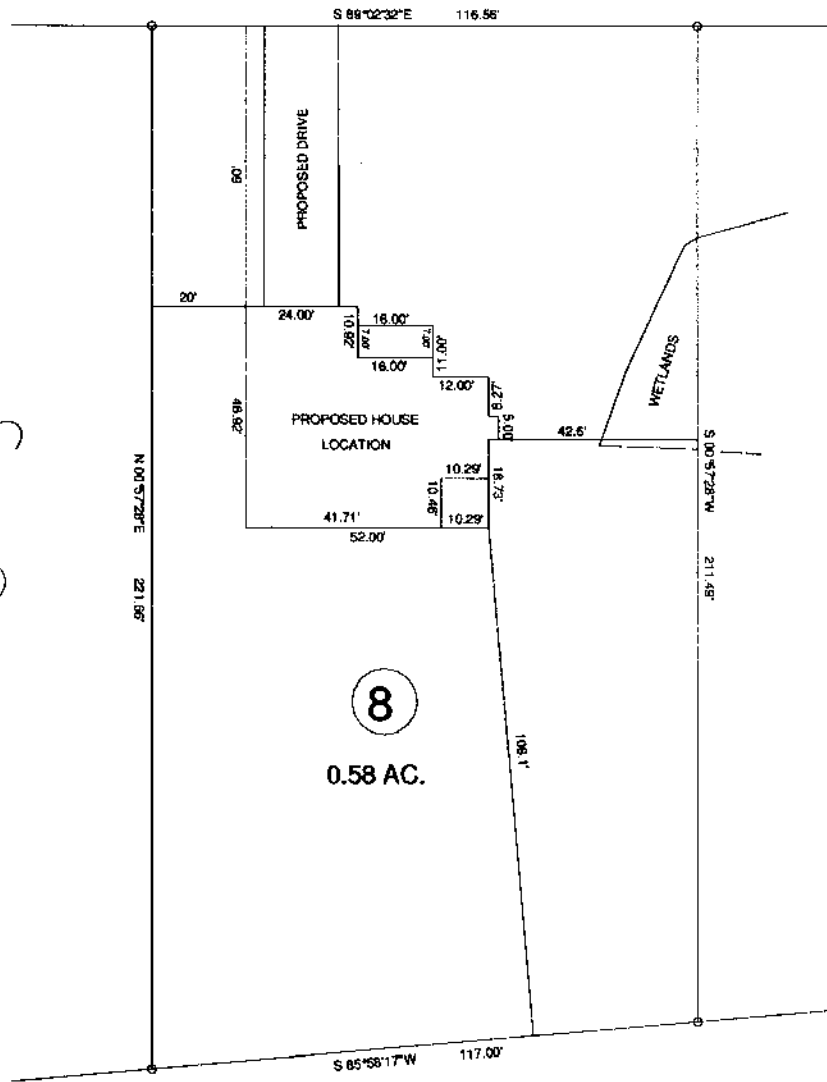
### "OXFORD WOODS DRIVE" 50' R/W

SITE PLAN APPROVAL

DISTRICT RA3C USE SFD

#BEDROOMS 3

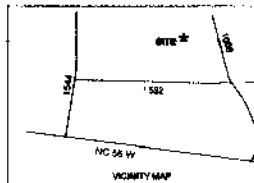
10.20.16 dydulism  
ZONING ADMINISTRATOR



MAP REFERENCE: MAP NO. 2008-214

MINIMUM BUILDING SET BACKS

- FRONT YARD ..... 30'
- REAR YARD ..... 30'
- SIDE YARD ..... 10'
- CORNER LOT SIDE YARD ..... 20'
- MAXIMUM HEIGHT ..... 30'



SURVEY FOR			BENNETT SURVEYS		F-1304
PROPOSED PLOT PLAN - LOT - 8			1662 CLARK RD. J. L. LINGTON, N.C. 27546		
"OXFORD WOODS S/D"			(910) 893-5252		
TOWNSHIP	BLACK RIVER	COUNTY	HARNETT	10' 0 20'	SURVEYED BY:
STATE	NORTH CAROLINA	DATE:	SEPTEMBER 22, 2018	SCALE: 1" = 40'	DRAWN BY: RVB
ZONE	WATERSHED DISTRICT	TAX PARCEL ID#:	PN#	CHECKED & CLOSURE BY:	FIELD BOOK
					DRAWING NO. 16438

NAME: Wesley Carst

APPLICATION #: 14 50039974

**\*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.**

Steve Perry  
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

10-19-11  
DATE

HARNETT COUNTY TAX ID #  
04-0692-0017-18

09-23-2016 BY: CW

Prepared by and mail to: Lynn Matthews, Attorney, 111 Commerce Dr., Dunn, NC 28335

EXCISE TAX: \$62.00  
Parcel ID No.: 040692 0017 18

### NORTH CAROLINA GENERAL WARRANTY DEED

THIS DEED, made this 21<sup>st</sup> day of September, 2016, by and between **CHEYENNE DEVELOPERS, LLC**, a NC Limited Liability Company of P.O. Box 310, Angier, NC 27501, hereinafter called GRANTOR, and **WESTER CONSTRUCTION CO., INC.**, a NC Corporation of 614 Leslie Road, Sanford, NC 27332, hereinafter called GRANTEE.

The designation Grantor and Grantee as used herein shall include said parties, their heirs, successors and assigns, and shall include singular, plural, masculine or feminine as required by context.

#### WITNESSETH:

That the Grantor, for a valuable consideration paid by the Grantee, the receipt of which is hereby acknowledged, has and by these presents does grant, bargain, sell and convey unto the Grantee in fee simple, all that certain lot or parcel of land situated in Black River Township, Harnett County, North Carolina and more particularly described as follows:

***BEING all of Lot 8, of Oxford Woods Subdivision as shown on plat map recorded in Map Book 2008, Pages 214-216, Harnett County Registry.***

***This lot is conveyed subject to the Restrictive Covenants recorded in Book 2485, Page 515 and re-recorded in Book 2501, Page 840, Harnett County Registry.***

Submitted electronically by "Matthews Law Group PC"  
in compliance with North Carolina statutes governing recordable documents  
and the terms of the submitter agreement with the Harnett County Register of Deeds.

Prepared by and mail to: Lynn Matthews, Attorney, 111 Commerce Dr., Dunn, NC 28335

EXCISE TAX: \$62.00  
Parcel ID No.: 040692 0017 18

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All or a portion of that property herein conveyed does not include the primary residence of a Grantor. (N.C. Gen. Stat. §105-317.2).

The property hereinabove described was acquired by Grantor by instrument in Book 2468, Page 344 and Book 2468, Page 352 Harnett County Registry.

TO HAVE AND TO HOLD the aforesaid lot or parcel of land and all privileges and appurtenances thereto belonging to the Grantee in fee simple.

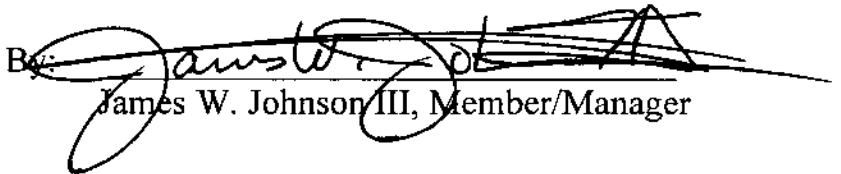
And the Grantor covenants with the Grantee, that Grantor is seized of the premises in fee simple, has the right to convey the same in fee simple, that title is marketable and free and clear of all encumbrances, and that Grantor will warrant and defend the title against the lawful claims of all persons whomsoever except for the exceptions hereinafter stated.

Title to the property hereinabove described is subject to the following exceptions:

1. General utility easements of record.
2. Easements, restrictions and rights of way of record.
3. Such facts as an environmental study on the subject property by an environmental engineer would reveal.
4. Such facts as would be disclosed by a current survey of the real property described herein.
5. 2017 ad valorem taxes which are not yet due and payable.

IN WITNESS WHEREOF, the Grantor has hereunto set its hand and seal, the day and year first above written.

**CHEYENNE DEVELOPERS, LLC**  
A NC Limited Liability Company

By:   
James W. Johnson III, Member/Manager

Harnett County Central Permitting  
PO Box 85 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 Wester Coast Date 10-19-16  
Site Address 195 Oxford Woods Dr. Phone 919-868-9307  
Directions to job site from Lillington 210 thru Anger T.R on old Stage  
Sub on Right

Subdivision OXFORD Woods Lot 8  
Description of Proposed Work New Home # of Bedrooms 3  
Heated SF 1691 Unheated SF \_\_\_\_\_ Finished Bonus Room? Yes Crawl Space \_\_\_\_\_ Slab

**General Contractor Information**

Wester Construction Telephone 919-499-3946  
Building Contractor's Company Name  
614 Leslie Rd Sanford N.C. Email Address \_\_\_\_\_  
Address  
59595  
License # \_\_\_\_\_

**Electrical Contractor Information**

Description of Work New Home Service Size 200 Amps T-Pole  Yes  No  
Wester + Pace Electric Telephone 919 499 3946  
Electrical Contractor's Company Name  
614 Leslie Rd Sanford N.C. Email Address \_\_\_\_\_  
Address  
12007 U  
License # \_\_\_\_\_

**Mechanical/HVAC Contractor Information**

Description of Work New Home  
Cool Springs Services Telephone 919-258-0415  
Mechanical Contractor's Company Name  
2200 Cool Springs Rd Email Address \_\_\_\_\_  
Address  
11542  
License # \_\_\_\_\_

**Plumbing Contractor Information**

Description of Work New Home # Baths 2  
Curtis Faircloth Plumbing Telephone 910-531-3111  
Plumbing Contractor's Company Name  
5056 Elizabeth Town Hwy Roseboro N.C. Email Address \_\_\_\_\_  
Address  
7269  
License # \_\_\_\_\_

**Insulation Contractor Information**

INSULATING INC Telephone 919-772-9050  
Insulation Contractor's Company Name & Address

\*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

Steve Jerniga  
Signature of Owner/Contractor/Officer(s) of Corporation

10-19-16  
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 Wooden Construction

Sign w/Title Steve Jerniga Date 10-19-16

## LIEN AGENT INFORMATION

Effective April 1, 2013

In accordance with North Carolina General Assembly Session Law 2012-158, Inspection Departments are not allowed to issue any permit where the project cost is \$30,000 or more unless the application is for improvements to an existing dwelling that the applicant uses as a residence OR the property owner has designated a lien agent and provided the inspections office with the information below:

Name of Lien Agent Investors Title Insurance Company

Mailing address of Agent 19 W. Hargett St. Suite 507  
Raleigh, N.C. 27501

Physical address of Agent 19 W. Hargett St. Suite 507  
Raleigh, N.C. 27501

Telephone 1-888-690-7384 Fax 1-919-794-5664

Email Support@lensnc.com

The information will be attached to the permit record and a copy provided to the applicant. The applicant is required to post a copy on the construction site.

Excerpt from North Carolina G.S. 160A-417:

“(Effective April 1, 2013) No permit shall be issued pursuant to subdivision (1) of subsection (a) of this section where the cost of the work is thirty thousand dollars (\$30,000) or more, other than for improvements to an existing single-family residential dwelling unit as defined in G.S. 87-15.5(7) that the applicant uses as a residence, unless the name, physical and mailing address, telephone number, facsimile number, and electronic mail address of the lien agent designated by the owner pursuant to G.S. 44A-11.1(a) is conspicuously set forth in the permit or in an attachment thereto. The building permit may contain the lien agent’s electronic mail address. The lien agent information for each permit issued pursuant to this subsection shall be maintained by the inspection department in the same manner and in the same location in which it maintains its record of building permits issued.”

Plan Box # D6

Date 10.20.16

Job Name Nesler Cmst

App # 39974

Valuation 134,688 Heated SQ Feet 1403

Garage 565  
= \_\_\_\_\_

**Inspections for SFD/SFA**

Crawl \_\_\_\_\_

Slab ✓

Mono \_\_\_\_\_

Basement \_\_\_\_\_

Footing	Footing	Plum Under Slab	Footing
Foundation	Foundation	Ele. Under Slab	Foundation
Address	Address	Address	Waterproofing
Open Floor	Slab	Mono Slab	Plum Under slab
Rough In	Rough In	Rough In	Address
Insulation	Insulation	Insulation	Slab
Final	Final	Final	Open Floor
			Rough In
			Insulation
			Final

Foundation Survey \_\_\_\_\_

Envir. Health new

Other \_\_\_\_\_  
\_\_\_\_\_

**Additions / Other**

Footing \_\_\_\_\_

Foundation \_\_\_\_\_

Slab \_\_\_\_\_

Mono \_\_\_\_\_

Open Floor \_\_\_\_\_

Rough In \_\_\_\_\_

Insulation \_\_\_\_\_

Final \_\_\_\_\_

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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Application Number . . . . . 16-50039974 Date 12/08/16  
Property Address . . . . . 195 OXFORD WOODS DR  
PARCEL NUMBER . . . . . 04-0692- - -0017- -18-  
Tenant nbr, name . . . . . CONF#019146 - LB-111816  
Application type description CP NEW RESIDENTIAL (SFD)  
Subdivision Name . . . . . OXFORD WOODS  
Property Zoning . . . . . RES/AGRI DIST - RA-30

Owner

-----

WESTER CONSTRUCTION INC  
614 LESLIE RD  
SANFORD NC 27332

Contractor

-----

WESTER CONSTRUCTION CO INC  
546 LESLIE RD  
SANFORD NC 27332  
(919) 499-5389

Applicant

-----

WESTER CONSTRUCTION #8  
614 LESLIE RD  
SANFORD NC 27332  
(919) 868-9307

--- Structure Information 000 000 42X55 3 BR ATT GARAGE/PORCH 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 . . . . . 1163757  
Issue Date . . . . . 12/08/16 Valuation . . . . . 0  
Expiration Date . . . . . 12/08/17

Special Notes and Comments

T/S: 10/20/2016 12:49 PM DJOHNSON --  
OXFORD WOODS LOT 8  
195 OXFORD WOODS DR  
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

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HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

LILLINGTON, NC 27546

For Inspections Call: (910) 893-7525 Fax: (910) 893-2793

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Page 2  
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 Application description . . . CP NEW RESIDENTIAL (SFD)  
 Subdivision Name . . . . . OXFORD WOODS  
 Property Zoning . . . . . RES/AGRI DIST - RA-30

Permit . . . . . BLDG,MECH,ELEC,PLB,INSU PERMIT

Additional desc . . .  
 Phone Access Code . . . 1163757

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	_____	___/___/___
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	_____	___/___/___