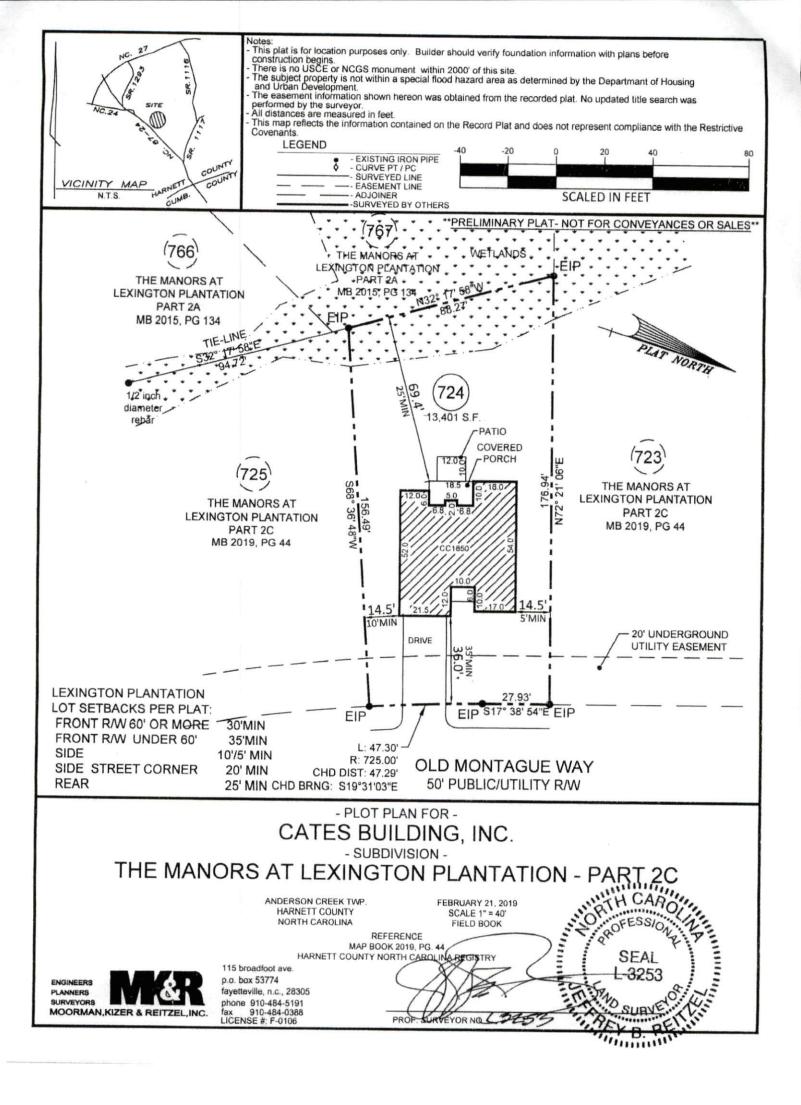
-W-I Application Date:		Applic	cation #	
nitial Application Date:			CU#	
	E. Front Street, Lillington, N	10 27040	Fax: (910) 693-2793 WWW	¥
"A RECORDED SURVEY	MAP, RECORDED DEED (OR O	FFER TO PURCHASE) & SITE PLAN ARE REQUIRED N	WHEN SUBMITTING A LAND USE	APPLICATION"
(atox	Milding	Toc Mailing Address 639 Exc	ecutive Place	Suite 400
city: Fayetteville	State: NC Zip	:2830.5 Contact No: 910-481-0503	_ Email: angie @ co	viness and ca
Palas A	ilia To	Mailing Address: 639 Executive	Place Suite 40	00
City Fauetteville	State: NC Zip	:28305 Contact No: 910-481-0503	Email: angie @CAV	ivess and cate
*Please fill out applicant information i	if different than landowner			
		Fowler P		
PROPERTY LOCATION: Subdi	vision: Manors@	hexington Plantation	Lot #: 124 Lot	Size: 428
State Bood # 101	State Road Name: O	O Montague Wall	Map Book & Page: 🗷	(019/99
0006151	n 1282 19	DIN: 4545.41.(000 1640	
Zoning: RA-201 Flood Zone:	Watershed:	Deed Book & Page 3683 /511-3	Power Company*: Cent	ral Emc
		need to supply premise number	from Prog	ress Energy.
PROPOSED USE:	2 1 8			Monolithic
SFD: (Size 54 x 48'0'	# Bedrooms: 4 # Baths:	Basement(w/wo bath): Garage: 504 De	ck: Crawl Space: S	lab: Slab;X
(1	s the bonus room finished?	(x) yes (_) no w/ a closet? (_) yes (x)	no (If yes-add in with # bedro	ioms)
5 M 4 /2 - 1	# Bodrooms # Baths	Basement (w/wo bath) Garage: Sit	te Built Deck: On Fram	e Off Frame
Mod: (Sizex)	s the second floor finished?	() yes () no Any other site built addition	ns? () yes () no	
				-14- h1112
☐ Manufactured Home:	SWDWTW (Size	x) # Bedrooms: Garage:	_(site built?) Deck:(s	site built?)
□ Dunlex: (Size x) No. Buildings:	No. Bedrooms Per Unit:		
			#	Employees:
☐ Home Occupation: # Room	ns: Use:	Hours of Operation:		
□ Addition/Accessory/Other:	(Sizex) Use:_		Closets in addition	on? () yes () no
Water Supply: X County	Existing Well	New Well (# of dwellings using well) *Must have operable wat	er before final
Sewage Supply: New Se	eptic Tank (Complete Chec	klist) Existing Septic Tank (Complete Complete Comp	hecklist) X County Sew	ver .
Does owner of this tract of land	i, own land that contains a r	manufactured home within five hundred feet (50	0') of tract listed above? ()	yes (X) no
Does the property contain any	easements whether underg	round or overhead () yes (_x_) no		
Structures (existing or propose	d): Single family dwellings:	Proposed Manufactured Homes:	Other (specify):	9
Required Residential Proper	. 4	Comments:		
Front Minimum 35.	Actual 36			
Rear 25	69.4			
Closest Side 5	14.5			
Sidestreet/corner lot_20 '			¥.	
Nearest Building WR	NIA			
on same lot	d Use Application	Page 1 of 2		03/11

Page 1 of 2
APPLICATION CONTINUES ON BACK

CIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:
ermits are granted I agree to conform to all ordinance and laws of the State of North Carolina regulating such work and the specifications of plans submitted ereby 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 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



Harnett County Central Permitting
PO Box 65 Lillington NC 27546
filled out 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 <u>5-9-13</u>				
Site Address 101 OLD Montague way, Comeron n	C2832@hone 910-481-0503				
Directions to job site from Lillington					
	2211				
Subdivision Manars @ Lexington Plantation	Lot				
Description of Proposed Work Single Family Dwelling # of Bedrooms					
Heated SF 2432 Unheated SF 750 Finished Bonus Room? 4					
Catos Building TNC	910-481-0503				
Building Contractor's Company Name	Telephone				
639 Executive Place, Suite 400 fagetteville Address NC 28305	<u>angie</u> @ <u>Caviness and</u> <u>Cates</u> . Co. Email Address				
3885/					
License # Electrical Contractor Information					
Description of Work Service Size	Amps T-PoleYesNo				
Electrical Contro TArheel Electric	910-303-2334 Telephone				
(PO. BOX 458 Stedman N(2839)	PRINCIPLIA				
Address 2985-4	Email Address				
License #					
Mechanical/HVAC Contractor Informa	ation				
Description of Work	010 000 7711				
Mechanical Contractor's Company Name	919-550-7711 Telephone				
5212 US HWY					
Address	Email Address				
29077					
License # Plumbing Contractor Information	to.				
Description of Work	# Baths				
Vance Johnson Plumbing Plumbing Contractor's Company Name	910-424-6712 Telephone				
3242 mid Pines Dr. Fayetteville NC 28306	Email Address				
Address '	Linai Address				
7756 - P1 License #					
Insulation Contractor Information					
Insulation Contractor's Company Name & Address	910-484-7118 Telephone				
FAYETTEVILLE, NC 28312	Тобрионе				

*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 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

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 1016745

Filed on: 03/27/2019

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

Initially filed by: CatesBuildingInc

Designated Lien Agent

Investors Title Insurance Company

Online: www.liensnc.com (http://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

Cates Building Inc 639 Executive Place Suite 400 Fayetteville , NC 28305 United States Email: angie@cavinessandcates.com

Phone: 910-481-0503

Project Property

Lot 724 Manors at Lexington PID 09956520 0282 29 Deed Book 3683 page 511-512 101 Old Montague Way Cameron, NC 28326 Harnett County

Property Type

1-2 Family Dwelling

Date of First Furnishing

03/26/2019

Technical Support Hotline: (888) 690-7384

View Comments (0)