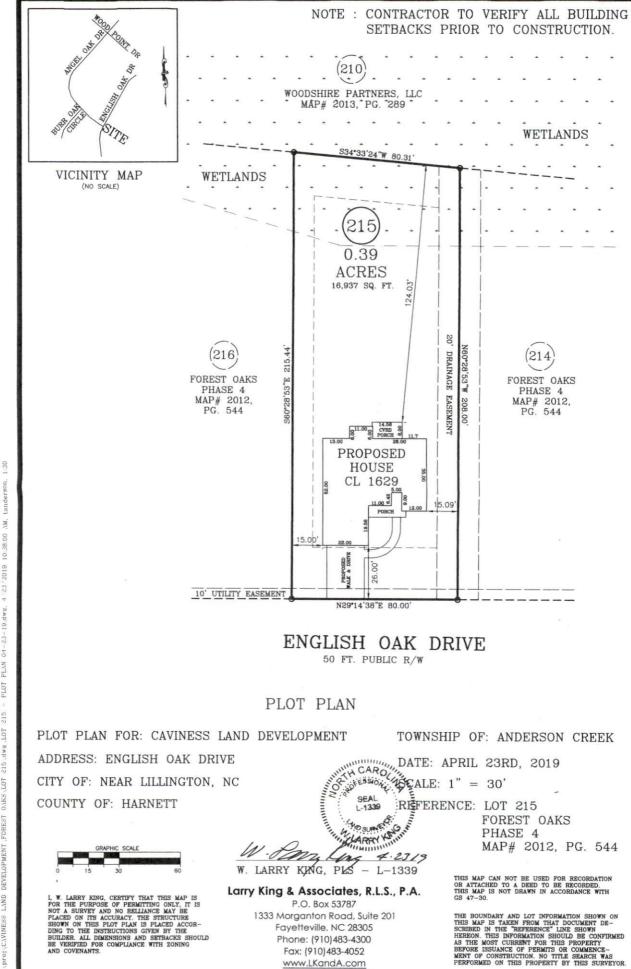


Initial Application Date:	5/6/19		Application #	Andrew Services	
Central Permitting	COUNTY OF HARNE 108 E. Front Street, Lillington, NC 275	TT RESIDENTIAL LAND USE 46 Phone: (910) 893-7525		www.harnett.org/permits	
**A RECORDED SI	URVEY MAP, RECORDED DEED (OR OFFER TO				
LANDOWNER. Cavine	ess Land Development	10	41R Robeson Street	D USE APPLICATION"	
city: Fayetteville	NC - 283	Mailing Address: 10	6330 insite		
	state: NC _ Zip: 283	Contact No: 910.339.	Email: Janir	ie@cavinessiand.com	
APPLICANT*: SAME	Mailing	Address:			
City:					
	State: Zip: Zip:	Contact No:	Email:		
CONTACT NAME APPLY	ING IN OFFICE: Tony Fofi/Janine	e Lightner	Phone # 910.237.28	332 / 910.339.6330	
ADDRESS:					
DEED OR OTP: Gentra	ot to purchase included				
PROPOSED USE:					
SFD: (Size 50 x 6	(Is the bonus room finished? () yes	nent(w/wo bath): Garage:	Deck: Crawl Space: Deck: Crawl Space: One of the second in with # br	Slab: Monolithic Slab: Slab: Slab:	
Mod: (Sizex) # Bedrooms # Baths Basen (Is the second floor finished? () yes	nent (w/wo bath) Garage:	Site Built Deck: On Fit additions? () yes () no	rame Off Frame	
Manufactured Home:			age: site built? Deck:	site built?	
Duplex: (Sizex) No. Buildings; N	lo. Bedrooms Per Unit:			
	Rooms:Use:			_#Employees:	
Addition/Accessory/Ot	ther: (Sizex) Use:	3	Closets in add	lition? (yes (no	
Sewage Supply: New (Complete F	ntyExisting WellNew We (Need to v Septic TankExpansionRelo Environmental Health Checklist on other sland, own land that contains a manufacture.	cationExisting Septic Tan	nk County Sewer	9	
Does the property contain a	any easements whether underground or o	verhead () yes () no			
	osed): Single family dwellings:		Other (specifi	LA.	
If permits are granted I agre I hereby state that foregoing	ee to conform to all ordinances and laws of	of the State of North Carolina re			
	janine Lightner Cyr Signature of Owner or Owner's A	thia Jacobs	5/6/19	ntormation is provided.	
	tion, house location, underground or o incorrect or missing informa *This application expires 6 month	with any applicable informative head easements, etc. The	Date ation about the subject property a county or its employees are n	, including but not limited out responsible for any	

strong roots • new growth



Phone: (910)483-4300 Fax: (910)483-4052 www.LKandA.com NC Firm License C-0887

I'M. 10:38:00 PLOT 215 LOT LOT FOREST DEVELOPMENT LAND



Application #

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 information on license.

Application for Residential Building and Trades Permit

Owner's Name: Caviness Land Development	Date: 5/6/19
Site Address: 216 English Oak Drive	Phone: 910-339-6330
Subdivision: Forest Oaks	Lot: 215
Description of Proposed Work: New Home - Residential Constru	
General Contractor Infor	
Caviness Land Development	910-339-6330
Building Contractor's Company Name	Telephone
1041 B Robeson Street, Fayetteville NC 28305	
Address	Email Address
37485	
License #	
Electrical Contractor Info	rmation
	e Size:Amps T-Pole: X Yes No
Southern Pride Electric	910-750-9436
Electrical Contractor's Company Name	Telephone
370 Slapout Road, Mt. Olive NC 28365	southernpride.mp@gmail.com
Address 24726	Email Address
License # Mechanical/HVAC Contractor	Information
Description of Work New Residential HVAC	
Carolina Comfort Air	910-339-2374
Mechanical Contractor's Company Name	Telephone
701 N Clinton Ave, Dunn NC 28334	marie@carolinacomfortair.com
Address	Email Address
29077	
License #	
Plumbing Contractor Info	
Description of Work New Residential Plumbing	# Baths 2
Shawn Glover	919-868-0959
Plumbing Contractor's Company Name	Telephone
304 Quail Hollow, Sanford, NC 27332	aloverplumbinging @rocketo
Address	aloverplumbinging @rocketh
23160	
License #	
Insulation Contractor Info	
Tricity Insulation, 334 East Mountain Dr, Fay NC 28305	910-486-8855
Insulation Contractor's Company Name & Address	Telephone

*NOTE: General Contractor / owner 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.

Cynthia Jacobs	5/6/19
Signature of Owner/Contractor/Officer(s) of Corporation	Date
Affidavit for Worker's Compe	ensation N.C.G.S. 87-14
The undersigned applicant being the:	
General Contractor Owner O	Officer/Agent of the Contractor or Owner
Do hereby confirm under penalties of perjury that the perso set forth in the permit:	n(s), firm(s) or corporation(s) performing the work
Has three (3) or more employees and has obtained	workers' compensation insurance to cover them.
Has one (1) or more subcontractors(s) and has obta	ined workers' compensation insurance to cover
Has one (1) or more subcontractors(s) who has their covering themselves.	own policy of workers' compensation insurance
Has no more than two (2) employees and no subcor	ntractors.
While working on the project for which this permit is sought Department issuing the permit may require certificates of co to issuance of the permit and at any time during the permitt carrying out the work.	overage of worker's compensation insurance prior
Sign w/Title: Cynthia Jacobs	Date: <u>5/6/19</u>

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 1038745

Filed on: 05/06/2019 Initially filed by: cavland

Designated Lien Agent

Investors 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

Janine Lightner 1041B Robeson Street Fayetteville, NC 28305 United States

Email: janine@cavinessland.com

Phone: 910-339-6330

Project Property

Forest Oaks Lot #215 216 English Oak Drive Bunnlevel, NC 28323 Harnett County

Property Type

1-2 Family Dwelling

Date of First Furnishing

05/06/2019

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 project.

View Comments (0)

Technical Support Hotline: (888) 690-7384