NORTH THE PARTY OF	
nitial Application Date: 5.14.2019	Application #
	CU# IARNETT RESIDENTIAL LAND USE APPLICATION C 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits
A RECORDED SURVEY MAP, RECORDED DEED (OR OF	FER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION
wowen Cotes Building Inc	. Mailing Address: 1039 Executive Place Suite 400
ANDOWNER: COLE State: NC Zin:	2830 Contact No: 910.481.0503 Email:
APPLICANT: CATES Building Inc. 1	Mailing Address: 639 Executive Place Suite 400
	28305 Contact No: 910-481-0503 Email: angie @CAVI yess and cates.com
	FowlerPhone # 910-481-0503
PROPERTY LOCATION: Subdivision: Manors	Lexington Pt 2C Lot #: 732 Lot Size: 21 ac
State Road # 34 State Road Name: OLI	mentague Way Map Book & Page: 2011/ 94
Parcel: 09956520 0182 35	PIN: 4545-41-3241.000
Zoning: Flood Zone: No Watershed: No	Deed Book & Page: 3680 / 0394 Power Company*: Central Emc
*New structures with Progress Energy as service provider no	eed to supply premise number from Progress Energy.
PROPOSED USE:	Basement(w/wo bath): Garage: Deck: Crawl Space: Slab: Sl
SFD: (Size 43 x 406) # Bedrooms: 4 # Baths: 4 / (Is the horus room finished? (yes (X) no w/ a closet? () yes () no (if yes-add in with # bedrooms)
(Is the second floor finished?	Basement (w/wo bath) Garage: Site Built Deck: On Frame Off Frame () yes () no Any other site built additions? () yes () no x) # Bedrooms: Garage: (site built?) Deck: (site built?)
Duplex: (Sizex) No. Buildings:	
☐ Home Occupation: # Rooms:Use:	Hours of Operation:#Employees:
☐ Addition/Accessory/Other: (Sizex) 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 Check	clist) Existing Septic Tank (Complete Checklist) County Sewer
Does owner of this tract of land, own land that contains a m	nanufactured home within five hundred feet (500') of tract listed above? () yes (🗶) no
Does the property contain any easements whether undergr	round or overhead () yes (\swarrow) no
Structures (existing or proposed): Single family dwellings:	Proposed Manufactured Homes: Other (specify):
Required Residential Property Line Setbacks:	Comments:
Front Minimum 35 Actual 36	
Rear 2531'7'	
Closest Side 5' 11.4	
Sidestreet/corner lot	
Nearest Building	

Page 1 of 2
APPLICATION CONTINUES ON BACK

on same lot

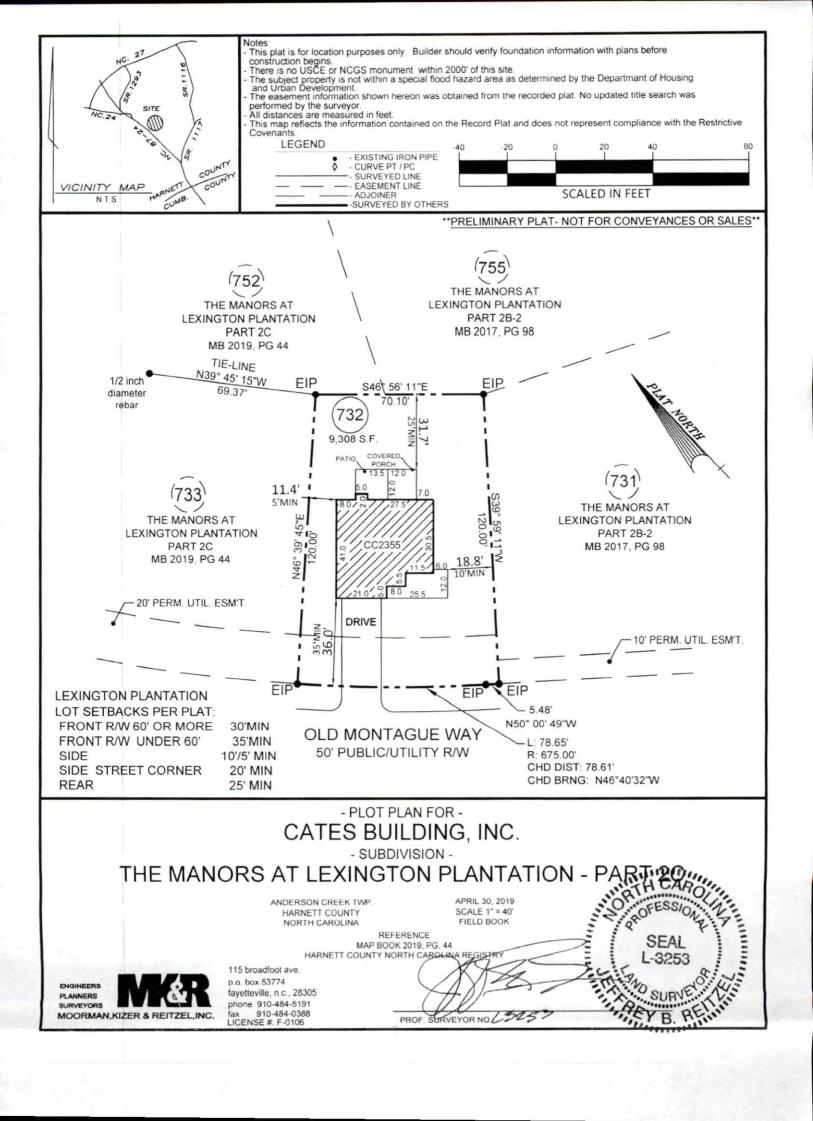
Residential Land Use Application

03/11

PECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:
f 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. 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 whereor 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**



Each section below to be filled out by whomever performing work Must be owner or licensed contractor Address company name & phone must match Harnett County Central Permitting
PO Box 65 Lillington NC 27546
910 893 7525 Fax 910 893 2793 www harnett org/permits

Application for Residential Building and Trades Permit

phone must match	
Owners Name (Ates Building Inc	Date 5.14.2019
Site Address 34 Old Montague Way, Cameron	1.10 28326 Phone 910-481-0503
Directions to job site from Lillington	,
Subdivision Manars @ Lexington Plantation 2	C Lot 732
Description of Proposed Work Single Family Dwelling	9 # of Bedrooms 4
Heated SF 2355, Unheated SF 853 Finished Bonus Room?	no Crawl Space Slab
CAtes Building, INC	
Building Contractor's Company Name	910-481-0503 Telephone
639 Executive Place, Suite 400 Fagettevill Address NC 28305	le angie @ cavinessand cates. con
Address NC 28305	Email Address
3885/	
License # <u>Electrical Contractor Informat</u>	ion
Description of Work Service Size	Amps T-PoleYesNo
Electrical Contro TArheel Electric	910-303-2334 Telephone
DO BOY 1158 States and 110 1029 1	
4 PO. BOX 458 Stedman NC 2839/	Email Address
Address 22985-4	
License #	
Mechanical/HVAC Contractor Info	rmation
Description of Work	919-550-7711
Mechanical Contractor's Company Name	Telephone
5212 US HWY	
Address	Email Address
29077	
License # Plumbing Contractor Informat	tion
Description of Work	# Baths
Vance Johnson Plumbing Plumbing Contractor's Company Name	910-424-6712
	Telephone
3242 mid Pines Dr. Fayetteville NC 2830	Email Address
Address	Littali Address
7756 - PI License #	
/ Insulation Contractor Informa	The state of the s
Cumberland Insulation 4205 Clinton Road	910-484-7118
Insulation Contractor's Company Name & Address Faue Heville, NC 28312	Telephone

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 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 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 Company or Name Sign w/Title Date 5-14-1

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 1032757

Filed on: 04/24/2019

Print & Post

Contractors:

project.

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.kersnc.com) Address: 19 W. Hargett St., Suite 507 /

Raleigh, NC 27601 Phone: 888-690-7384 Fax: 913-489-5231

Email: support@liensnc.com (mailto support@lensn

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 732 Manors at Lexington PIN 9595-41-3291.000 Deed book 3680 Page 394-395 34 Old Montague Way Cameron, NC 28326 Harnett County

Property Type

1-2 Family Dwelling

Date of First Furnishing

04/30/2019

View Comments (0)

Technical Support Hotline: (888) 690-7384

https://apps.liensnc.com/scr/appointment/details.html?entryNumber=1032757&printable=