

contract the track	
Application #	
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* Each section below to be filled out by whomever performing work. Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license. 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

Owner's Name: Caviness Land Development	Date: 04/07/2021
	Phone: 910-339-6330
Subdivision: Forest Oaks Phs 5	Lot: 309
Description of Proposed Work: New Home - Residential	Total Job Cost: \$177,540.00
General Contractor Inform	ation
Caviness Land Development	910-339-6330
Building Contractor's Company Name	Telephone
1041 B Robeson St Fayetteville, NC 28305	cynthia@cavinessland.com
Address	Email Address
37485 HEATED SQ FT 3145 GARAGE	ESQFT 414
License #	
Possible of Work New Home Position of Work New Home	nation
Description of Work New Home - Residential Service S	part of the Table 14 April 14 April 14
Southern Pride Electric Electrical Contractor's Company Name	910-750-9436
	Telephone
370 Slapout Road, Mt Olive NC 28365 Address	southernpride.mp@gmail.com Email Address
34726 License #	
Mechanical/HVAC Contractor In	formation
Description of Work New Home - Residential	
Carolina Comfort Air	910-339-2374
Mechanical Contractor's Company Name	Telephone
701 N Clinton Ave, Dunn NC 28334	relephone
Address	Email Address
29077	Email Address
License #	
Plumbing Contractor Information	ation
Description of Work New Home - Residential	# Baths
Shawn Glover	919-868-0959
Plumbing Contractor's Company Name	Telephone
304 Quail Hollow, Sanford NC 27332	**************************************
Address	Email Address
23160	
License #	
Insulation Contractor Informa	ation
Cumberland Insulation 4205 Clinton Rd Fayetteville NC 28312	910-484-7118
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.

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.	onths to 2 years permit re	-issue fee is \$150.00. After 2 years re-i	ssue fee			
o de per carrette de contendio.						
Signature of Owner/Contractor/C	rbs	04/07/2021				
Signature of Owner/Contractor/C	officer(s) of Corporation	Date	-			
Affidavit The undersigned applicant being		pensation N.C.G.S. 87-14				
General Contractor	OwnerX	Officer/Agent of the Contractor or Owne	ır			
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.						
X 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.						
Sign w/Title: Cracaba	officer/agent	Date: 04/07/	2021			



Initial Application Date:			Application #	
			CU#	
Central Permitting		RNETT RESIDENTIAL LAND U 27546 Phone: (910) 893-7	JSE APPLICATION 525 ext:2 Fax: (910) 893-2793	www.harnett.org/permits
A RECORDED SUR	VEY MAP, RECORDED DEED (OR OFFE	ER TO PURCHASE) & SITE PLAN A	RE REQUIRED WHEN SUBMITTING A LA	AND USE APPLICATION
LANDOWNER:		Mailing Address:_		
City:	State: Zip:	Contact No:	Email:	
APPLICANT*: Caviness	Land Development Mai	iling Address: 1041 B Ro	beson St	
City: Fayetteville *Please fill out applicant informati	State: NC Zip: 28	3305 Contact No: <u>910-339</u>	9-6330 Email:	
ADDRESS: 658 Ange	el Oak Dr (Lot 309)	05°	16-07-9521	
	Watershed:			
Setbacks – Front: 26.01	Back: 11.65 Side: 84.48 (Corner: 78'55		
PROPOSED USE:				
□ SFD: (Size 48 x 56) # Bedrooms: 5 # Baths: 3 Ba	asement(w/wo bath):_na_ Gara	age: X Deck: Crawl Space:	Monolithic Slab: X
) no w/ a closet? () yes () no	
□ Modular: (Size v	\# Redrooms # Raths	Pasament (w/wo both)	Garage: Site Built Deck:	On Frame Off Frame
			Any other site built additions? (
☐ Manufactured Home:	_SWDWTW (Size	_x) # Bedrooms:	Garage:(site built?) Deck:	(site built?)
☐ Duplex: (Sizex) No. Buildings:	_ No. Bedrooms Per Unit:	TOTAL HTD S	QFT
☐ Home Occupation: # Roo	ms:Use:	Hours of Ope	eration:	#Employees:
☐ Addition/Accessory/Other	: (Sizex) Use:		Closets in ac	ddition?() yes () no
	GARAGE			,,
	5545550 TO			
Water Supply: X County) *Must have operable	
Sewage Supply: New Se (Complete Envi	ironmental Health Checklist on oth	elocation Existing Septic		
Does owner of this tract of land	, own land that contains a manufa	ctured home within five hundre	ed feet (500') of tract listed above?	() yes (<u>X</u>) no
Does the property contain any	easements whether underground of	or overhead (X) yes () r	0	
Structures (existing or proposed	i): Single family dwellings:	Manufactured Horn	nes: Other (spec	ify):
If permits are granted I agree to I hereby state that foregoing sta	tements are accurate and correct	to the best of my knowledge.	a regulating such work and the spe Permit subject to revocation if false	ecifications of plans submitted. information is provided.
	Signature of Owner of Owner's	ba	04/07/2021	
It is the owner/applicants r to: boundary information	esponsibility to provide the cou , house location, underground o	onty with any applicable information or overhead easements, etc. mation that is contained with	Date mation about the subject proper The county or its employees are hin these applications. ermits have not been issued**	ty, including but not limited not responsible for any

APPLICATION CONTINUES ON BACK

strong roots · new growth

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 1437365

Filed on: 04/07/2021 Initially filed by: cavland

Designated Lien Agent

Project Property

Print & Post

Contractors:

project.

Please post this notice on the Job Site.

Scan this image with your smart phone to view this filing. You can then

Suppliers and Subcontractors:

file a Notice to Lien Agent for this

Investors Title Insurance Company

Online: www.liensnc.com/http://www.lenve.com/ Address: 223 S. West Street, Suite 900 /

Rafeigh, NC 27603 Phone: 888-690-7384 Fax: 913-489-5231

Email: support@liensnc.com (mailto supportellance com)

Forest Oaks phs5 lot 309 658 Angel Oak Dr Bunnlevel, NC 28323 Harnett County

1-2 Family Dwelling

Owner Information

Date of First Furnishing

janine Lightner 1041B Robeson Street Fayetteville, NC 28305 United States Email: janine@cavinessland.com Phone: 910-339-6330

Property Type

04/07/2021

View Comments (0)

Technical Support Hotline: (888) 690-7384