

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	
100 0111 0 1 0	Phone: 910-339-6330	
Subdivision: Forest Oaks Phs 5	Lot: 311	
Description of Proposed Work: New Home - Residential	Total Job Cost: \$169,740.00	
General Contractor Informa	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 2977 GARAGE	E SQ FT 426	
License #		
<u>Electrical Contractor Inform</u> Description of Work <u>New Home - Residential</u> Service Si		
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 Info	ormation	
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	1 0001000	
Address	Email Address	
29077		
License #		
Plumbing Contractor Informa	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	tion	
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.

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 Co	04/07/2021						
Signature of Owner/Contractor/Officer(s) of Co	orporation Date						
Affidavit for Worke The undersigned applicant being the:	er's Compensation N.C.G.S. 87-14						
General Contractor Owner	X 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.							
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.							
Department issuing the permit may require certi	nit is sought it is understood that the Central Permitting ifficates of coverage of worker's compensation insurance prior g the permitted work from any person, firm or corporation						
Sign w/Title: Cyacobs officer/a	gent Date: 04/07/2021						



initial Application Date:_		Application #			
			CU#_		
Central Permitting		27546 Phone: (910) 893-7525 ext:2	LICATION		
A RECORDED SU	RVEY MAP, RECORDED DEED (OR OFFE	R TO PURCHASE) & SITE PLAN ARE REQUIR	RED WHEN SUBMITTING A LA	ND USE APPLICATION	
LANDOWNER:		Mailing Address:			
City:	State: Zip:	Contact No:	Email:		
APPLICANT* Cavines	s I and Develonment Mai	ling Address: 1041 B Robeson	St		
city: Fayetteville	State: NC_ Zip: 28	3305 Contact No: 910-339-6330			
1.5	ation if different than landowner (1 of 311)	PIN: 0516-07	-9327		
			002.	CONTRACTOR OF THE STATE OF THE	
	Back: 13.00 Side: 13.00 C	Deed Book / Page:			
	_ Back: 13.00_ Side: 13.00_ C	orner: <u>00.00</u>			
PROPOSED USE:	3			Monolithic	
		s room finished? () yes (_X_) no w/ a			
		Basement (w/wo bath) Garage:			
TOTAL HID SQFT	(Is the second floo	or finished? () yes () no Any oth	er site built additions? (_) yes () no	
☐ Manufactured Home: _	SWDWTW (Size	_x) # Bedrooms: Garage:_	(site built?) Deck:_	(site built?)	
☐ Duplex: (Sizex_) No. Buildings:	_ No. Bedrooms Per Unit:	TOTAL HTD S	Q FT	
☐ Home Occupation: # Ro	ooms:Use:	Hours of Operation:		#Employees:	
☐ Addition/Accessory/Oth	er: (Sizex) Use:		Closets in ad	dition? () yes () no	
TOTAL HTD SQ FT					
Water Supply: X County		Well (# of dwellings using well to Complete New Well Application at the			
Sewage Supply: New S		elocation Existing Septic Tank X		,	
Does owner of this tract of lar	nd, own land that contains a manufac	ctured home within five hundred feet (50	0') of tract listed above? () yes (<u>X_</u>) no	
Does the property contain an	y easements whether underground of	or overhead (X) yes () no			
Structures (existing or propos	sed): Single family dwellings:	Manufactured Homes:	Other (speci	fy):	
permits are granted I agree hereby state that foregoing s	to conform to all ordinances and law	vs of the State of North Carolina regulati to the best of my knowledge. Permit sul	ng such work and the spe	cifications of plans submitted.	
	Cjacol		04/07/2021		

Signature of Owner of Owner's Agent

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**

APPLICATION CONTINUES ON BACK

strong roots · new growth

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 1437401

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

Designated Lien Agent

Project Property

Forest Oaks phs5 lot 311 169 Silk Oak Dr

Bunnlevel, NC 28323 Harnett County

Investors Title Insurance Company

Online: www.liensnc.com was resulted come Address: 223 S. West Street, Suite 900 /

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

Email: Support@liensnc.com (mailto support@lemnc.com)

Property Type

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

04/07/2021

View Comments (0)

Technical Support Hotline: (888) 690-7384

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.