



Initial Application Date: 5-17-19

Application # Sign 1905-0003
DRB # _____ CU # _____

COMMERCIAL

COUNTY OF HARNETT LAND USE APPLICATION

Central Permitting (Physical) 108 E. Front Street, Lillington, NC 27546 (Mailing) PO Box 65 Lillington NC 27546 Phone: (910) 893-7525 opt # 2 Fax: (910) 893-2793 www.harnett.org/permits

LANDOWNER: Westminster Properties Mailing Address: 2720 N Church Rd

City: Greensboro State: NC Zip: 27405 Contact # N/A Email: N/A

APPLICANT*: Melissa Venable Mailing Address: 5603 W Friendly Ave Suite B #245

City: Greensboro State: NC Zip: 27410 Contact # 828-335-2101 Email: signcodeinfo@gmail.com

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Melissa Venable Phone # _____

Address: 56 Sweet Lane Spring Lake NC 28390 PIN: _____

Deed Book Page: _____ / _____

PROPOSED USE:

- Multi-Family Dwelling No. Units: _____ No. Bedrooms/Unit: _____
- Business Sq. Ft. Retail Space: _____ Type: _____ # Employees: _____ Hours of Operation: _____
- Daycare # Preschoolers: _____ # Afterschoolers: _____ # Employees: _____ Hours of Operation: _____
- Industry Sq. Ft.: _____ Type: _____ # Employees: _____ Hours of Operation: _____
- Church Seating Capacity: _____ # Bathrooms: _____ Kitchen: _____

Accessory/Addition/Other (Size 6 x 8) Use: Monument Sign

Water Supply: County Existing Well New Well (# of dwellings using well _____) *Must have operable water before final (Need to Complete New Well Application at the same time as New Tank)

Sewage Supply: New Septic Tank Expansion Relocation Existing Septic Tank County Sewer (Complete Environmental Health Checklist on other side of application if Septic)

Comments: Install (1) nonilluminated monument sign and (2) wayfinding signs per plans

If 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. I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

Melissa Venable
Signature of Owner or Owner's Agent

5-20-19
Date

****This application expires 6 months from the initial date if permits have not been issued****

RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION

*****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 must be filled out by whoever is performing the work. Must be owner or licensed contractor. Address, company name & phone must match information on state license.

Application # _____
Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

COMMERCIAL

Application for Building and Trades Permit

Owner's Name: Westminster Properties Date: 5-17-19

Site Address: 56 Sweet Lane Phone: 336-+375-1550

Description of Proposed Work: Install (1) nonilluminated monument sign and (2) Wayfinding sign non illumina

General Contractor Information: Building Cost \$ 8500

Allen Industries 828-335-2101

Building Contractor's Company Name Telephone

6434 Burnt Poplar Rd Greensboro NC 27409 signcodeinfo@gmail.com

Address Email Address

SP-ES-07282

Signature of Owner/Contractor/Officer(s) of Corporation License #

Electrical Contractor Information: Electrical Cost \$ _____

Description of Work _____ Service Size: _____ Amps #T-Poles _____

Electrical Contractor's Company Name Telephone

Address Email Address

Signature of Owner/Contractor/Officer(s) of Corporation License #

Mechanical Contractor Information: Mechanical Cost \$ _____

Description of Work _____ # Units _____

Mechanical Contractor's Company Name Telephone

Address Email Address

Signature of Owner/Contractor/Officer(s) of Corporation License #

Plumbing Contractor Information: Plumbing Cost \$ _____

Description of Work _____ # Baths _____

Plumbing Contractor's Company Name Telephone

Address Email Address

Signature of Owner/Contractor/Officer(s) of Corporation License #

Insulation Contractor Information

Insulation Contractor's Company Name & Address Telephone

***NOTE: General Contractor must fill out and sign the second page of this application**

Sprinkler Contractor Information

Sprinkler Contractor's Company Name _____	Telephone _____
Address _____	Email Address _____
Signature of Officer(s) of Corporation _____	License # _____

Fire Alarm Contractor Information

Fire Alarm Contractor's Company Name _____	Telephone _____
Address _____	Email Address _____
Signature of Officer(s) of Corporation _____	License # _____

Driveway Access - NC Department of Transportation Driveway Access/Permit? Yes No

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 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 charged at full price per current fee schedule.

<i>Melissa Venable</i> _____	5-17-19 _____
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 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: <i>Melissa Venable</i> <i>Agent</i> _____	Date: 5-17-19 _____
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Office/Laundry Room

Brookside Hills Apartments

Existing Entrance Sign -
Remove & replace
with new aluminum
monument.

Westminster - Brookside Hills Apartments
56 Sweet Lane
Spring Lake, NC 28390

Scope of Work

Remove & replace existing entrance sign
with new aluminum monument sign.

Install (2) .125" aluminum wall signs onto
Office/Laundry room.

Custom Non-Illuminated Monument



FRONT VIEW

Scale: 3/4"=1'-0"

GENERAL SPECIFICATIONS

D/F Fabricated .090" Aluminum Cabinet w/ Fabricated Angle Skirt. .080" Aluminum Cladding. Non-Illuminated. First Surface Opaque Graphics and Text. .080" Aluminum Skirt.

Project Colors:

- Paint To Match SW Satin Black
- Paint & Vinyl To Match SW 0052 Pearl Grey

NOTE: FOR ILLUSTRATION ONLY.
SUBJECT TO CHANGE PENDING
FINAL REVIEW & APPROVAL
PRIOR TO PRODUCTION.

END VIEW

Brookside Hills Rage Italic Letter Font

A P A R T M E N T S Arial Bold Letter Font

56 Sweet Lane Times New Roman Letter Font

TYPOGRAPHY

Client Review Status	Notes	Date / Description	Project Information
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Allen Industries
www.allenindustries.com
Signs and Image Solutions
Corporate Headquarters
6434 Burnt Poplar Road, Greensboro, NC 27409
Phone 800-967-2553 336-668-2791 Fax 336-668-7875

Custom Office & Laundry Wall Signs



Front View

Scale: 1" = 1'-0"

- QUANTITY:** 2 SINGLE SIDED WALL MOUNT SIGNS (1 OF EACH LAYOUT SHOWN)
- .090 FLAT ALUMINUM PANEL W/ FIRST SURFACE OPAQUE VINYL GRAPHICS
 - SIGN IS NON-ILLUMINATED
 - GRAPHICS AS SHOWN
 - SIGN TO HAVE CLEAR ACRYLIC POLYURETHANE FINISH SATIN
 - SIGN TO BE MOUNTED AS REQUIRED FOR WALL CONDITIONS

Project Colors:

- Paint To Match SW Satin Black
- Paint & Vinyl To Match SW 0052 Pearl Grey

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