

COUNTY OF HARNETT
Building Inspections Department
Planning Services

Certificate of Compliance: _____ Occupancy: X

Certificate issued pursuant to the requirements of North Carolina General Statute 160D-1116 and Harnett County Zoning Ordinances. This certifies at the time of issuance, this structure was in compliance with the various ordinances of the County of Harnett and the North Carolina State Building Codes. For the following:

Use Classification: I-1 Assisted Living Facility

Permit Numbers

Name: Springs at Ballentine

Building: BCOM2302-0007

Electrical: ECOM2307-0001

Address: 40 Rawls Club Rd

Insulation: _____

 Fuquay Varina NC 27526

Plumbing: PCOM2307-0001

Mechanical: MCOM2301-0007

MFG Home: _____

Date: 11/15/2024

Building Official: _____

[Handwritten Signature]