

Initial Application Date: 10/10/18

Application # BRES1810-0034

CU# _____

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 Fax: (910) 893-2793 www.harnett.org/permits

Current LANDOWNER: James Peterkin Mailing Address: P.O. Box 826

City: Ceats State: NC Zip: 27521 Home #: _____ Contact #: _____

APPLICANT: MARK CRAFT Mailing Address: 2117 HWY 70 EAST

City: BARNER State: NC Zip: 27529 Home #: 919 792 2200 Contact #: _____

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Mark Craft Phone #: 919-902-0351

PROPERTY LOCATION: Subdivision w/phase or section: 126 Delaney Court Lot #: 3 Lot Acreage: .59

State Road #: _____ State Road Name: Dunn, NC 28334 Map Book&Page: 2007 / 525

Parcel: 021537-0110 25 PIN: 1507-38-4961.000

Zoning: ERWIN Flood Zone: X Watershed: _____ Deed Book&Page: 3396, 796 Power Company*: _____

*New homes with Progress Energy as service provider need to supply premise number _____ from Progress Energy.

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 401 South To 421 South Then Turn Left On Red Hill Church Rd. Then Left On Suggs Rd. Then Right On Delaney Court Lot Down On Right.

PROPOSED USE:

- SFD (Size x) # Bedrooms # Baths Basement (w/wo bath) Garage Deck Circle: Crawl Space / Slab
- (Is the bonus room finished? w/ a closet if so add in with # bedrooms)
- Mod (Size x) # Bedrooms # Baths Basement (w/wo bath) Garage Site Built Deck ON Frame / OFF
- (Is the second floor finished? Any other site built additions?)
- Manufactured Home: SW DW TW (Size 28 x 56) # Bedrooms 3 Garage (site built?) Deck (site built?)
- Duplex (Size x) No. Buildings No. Bedrooms/Unit
- Home Occupation # Rooms Use Hours of Operation: #Employees
- Addition/Accessory/Other (Size x) Use Closets in addition yes no

Water Supply: County Well (No. dwellings) **MUST** have operable water before final

Sewage Supply: New Septic Tank (Complete Checklist) Existing Septic Tank (Complete Checklist) County Sewer

Property owner of this tract of land own land that contains a manufactured home w/in five hundred feet (500') of tract listed above? YES NO

Structures (existing & proposed): Stick Built/Modular Manufactured Homes Other (specify)

Required Residential Property Line Setbacks:		Comments:
Front	Minimum _____ Actual <u>50'</u>	_____
Rear	_____ <u>10'</u>	_____
Closest Side	_____ <u>73'</u>	_____
Sidestreet/corner lot	_____	_____
Nearest Building on same lot	_____	_____

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.

Signature of Owner or Owner's Agent [Signature]

Date 10/20/18

****This application expires 6 months from the initial date if no permits have been issued****

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

Please use Blue or Black Ink ONLY

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

This application to be filled out when applying for a septic system inspection.

County Health Department Application for Improvement Permit and/or Authorization to Construct

IF THE INFORMATION IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT PERMIT OR AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration depending upon documentation submitted. (Complete site plan = 60 months; Complete plat = without expiration)

Environmental Health New Septic System

- **All property irons must be made visible.** Place "pink property flags" on each corner iron of lot. All property lines must be clearly flagged approximately every 50 feet between corners.
- Place "orange house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks, out buildings, swimming pools, etc. Place flags per site plan developed at/for Central Permitting.
- Place orange Environmental Health card in location that is easily viewed from road to assist in locating property.
- If property is thickly wooded, Environmental Health requires that you clean out the **undergrowth** to allow the soil evaluation to be performed. Inspectors should be able to walk freely around site. **Do not grade property.**
- **All lots to be addressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred for failure to uncover outlet lid, mark house corners and property lines, etc. once lot confirmed ready.**

Environmental Health Existing Tank Inspections

- Follow above instructions for placing flags and card on property.
- Prepare for inspection by removing soil over **outlet end** of tank as diagram indicates, and lift lid straight up (*if possible*) and then **put lid back in place.** (Unless inspection is for a septic tank in a mobile home park)
- **DO NOT LEAVE LIDS OFF OF SEPTIC TANK**

"MORE INFORMATION MAY BE REQUIRED TO COMPLETE ANY INSPECTION"

SEPTIC

If applying for authorization to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.

- Accepted Innovative Conventional Any
 Alternative Other _____

The applicant shall notify the local health department upon submittal of this application if any of the following apply to the property in question. If the answer is "yes", applicant **MUST ATTACH SUPPORTING DOCUMENTATION**:

- YES NO Does the site contain any Jurisdictional Wetlands?
- YES NO Do you plan to have an irrigation system now or in the future?
- YES NO Does or will the building contain any drains? Please explain. _____
- YES NO Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
- YES NO Is any wastewater going to be generated on the site other than domestic sewage?
- YES NO Is the site subject to approval by any other Public Agency?
- YES NO Are there any Easements or Right of Ways on this property?
- YES NO Does the site contain any existing water, cable, phone or underground electric lines?

If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service.

I Have Read This Application And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And State Officials Are Granted Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules. I Understand That I Am Solely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making The Site Accessible So That A Complete Site Evaluation Can Be Performed.

Initial Application Date: _____

Application # _____

CU# _____

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits

****A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION****

LANDOWNER: _____ Mailing Address: _____

City: _____ State: _____ Zip: _____ Contact No: _____ Email: _____

APPLICANT*: _____ Mailing Address: _____

City: _____ State: _____ Zip: _____ Contact No: _____ Email: _____

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: _____ Phone # _____

ADDRESS: _____ PIN: _____

DEED OR OTP: _____

PROPOSED USE:

SFD: (Size _____ x _____) # Bedrooms: _____ # Baths: _____ Basement(w/wo bath): Garage: Deck: Crawl Space: Slab: Monolithic Slab:
(Is the bonus room finished? yes no w/ a closet? yes no (if yes add in with # bedrooms)

Mod: (Size _____ x _____) # Bedrooms _____ # Baths _____ Basement (w/wo bath) Garage: Site Built Deck: On Frame Off Frame
(Is the second floor finished? yes no Any other site built additions? yes no

Manufactured Home: SW DW TW (Size _____ x _____) # Bedrooms: _____ Garage: (site built? Deck: site built?

Duplex: (Size _____ x _____) No. Buildings: _____ No. Bedrooms Per Unit: _____

Home Occupation: # Rooms: _____ Use: _____ Hours of Operation: _____ #Employees: _____

Addition/Accessory/Other: (Size _____ x _____) Use: _____ Closets in addition? yes no

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)

Does owner of this tract of land, own land that contains a manufactured home within five hundred feet (500') of tract listed above? yes no

Does the property contain any easements whether underground or overhead yes no

Structures (existing or proposed): Single family dwellings: _____ Manufactured Homes: _____ Other (specify): _____

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.

Signature of Owner or 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*

APPLICATION CONTINUES ON BACK

strong roots • new growth

Harnett County Department of Public Health

Well Construction Permit Application

If the information in the application for a Well Construction Permit is *falsified, changed, or the site is altered*, then the Well Construction Permit shall become *invalid*.

APPLICANT INFORMATION

MARK CRAFT (GREENFIELD) (919) 772-2120
Applicant/Owner Phone Number
2117 HWY 70 EAST, GARNER NC 27529
Street Address, City, State, Zip Code

The Applicant must submit a Site Plan. The Site Plan is a map/drawing of the property and must show:

1. existing and/or proposed property lines and easements with dimensions;
2. the location of the facility and appurtenance;
3. the location for the proposed well;
4. the location of existing or proposed sewer lines and/or sewage disposal systems within 100 feet of the proposed well;
5. the location of any existing wells within 100 feet of the property; surface water bodies;
6. above ground and/or underground storage tanks;
7. and any other known sources of contamination within 100 feet of the proposed well site.

The Applicant shall notify the Harnett County Health Director through or by way of the Harnett County Division of Environmental Health if any of the following occur prior to well construction:

1. there is a relocation of the proposed facility;
2. there is a change in the intended use of the facility;
3. there is a need for installing the waste water system in an area other than indicated on the well permit; or
4. there are landscape changed that affect site drainage.

Contact information: Environmental Health Division - 910-893-7547

PROPERTY INFORMATION

Proposed use of well

Single-Family Multifamily Church Restaurant Business Irrigation

Street Address 126 DELANEY CRT Subdivision/Lot # _____
Parcel # _____ PIN # _____

Directions to the Site

I have thoroughly read and completed this Application and certify that the information provided herein is true, complete and correct to the best of my knowledge and is given in good faith. Representatives of the Harnett County Health Department and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable rules.

I understand that I am solely responsible for the proper identification and labeling of all property lines, underground utility lines, and making the site accessible so that a well can be properly constructed according to the permit.

Mark Craft
Property Owner's or Owner's Legal Representative Signature Required

10 OCT 2018
Date



Town of Erwin
Zoning Application & Permit
 Planning & Inspections Department

Permit #

Rev Sep2014

Each application should be submitted with an attached plot/site plan with the proposed use/structure showing lot shape, existing and proposed buildings, parking and loading areas, access drives and front, rear, and side yard dimensions.

Name of Applicant	MARK CRAFT / ERENTIA	Property Owner	
Home Address	2117 HWY 70 EAST	Home Address	
City, State, Zip	SARASOTA NC	City, State, Zip	
Telephone	(919) 772-2220	Telephone	
Email	gabe@erentia.com	Email	

Address of Proposed Property	126 Delaney Ct		
Parcel Identification Number(s) (PIN)	1507-38-4961.000	Estimated Project Cost	
What is the applicant requesting to build / what is the proposed use of the subject property? Be specific.	Manufactured Class A home on single lot		
Description of any proposed improvements to the building or property			
What was the Previous Use of the subject property?	Vacant		
Does the Property Access DOT road?	yes		
Number of dwelling/structures on the property already		Property/Parcel size	.59
Floodplain SFHA	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Watershed	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
		Wetlands	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
MUST circle one that applies to property	Existing/Proposed <u>Septic System</u> Or Existing/Proposed County/City Sewer		

Owner/Applicant Must Read and Sign

The undersigned property owner, or duly authorized agent/representative thereof certifies that this application and the forgoing answers, statements, and other information herewith submitted are in all respects true and correct to the best of their knowledge and belief. The undersigning party understands that any incorrect information submitted may result in the revocation of this application. Upon issuance of this permit, the undersigning party agrees to conform to all applicable town ordinances, zoning regulations, and the laws of the State of North Carolina regulating such work and to the specifications of plans herein submitted. The undersigning party authorizes the Town of Erwin to review this request and conduct a site inspection to ensure compliance to this application as approved.

MARK CRAFT	<i>Mark Craft</i>	10 OCT 2018
Print Name	Signature of Owner or Representative	Date

For Office Use

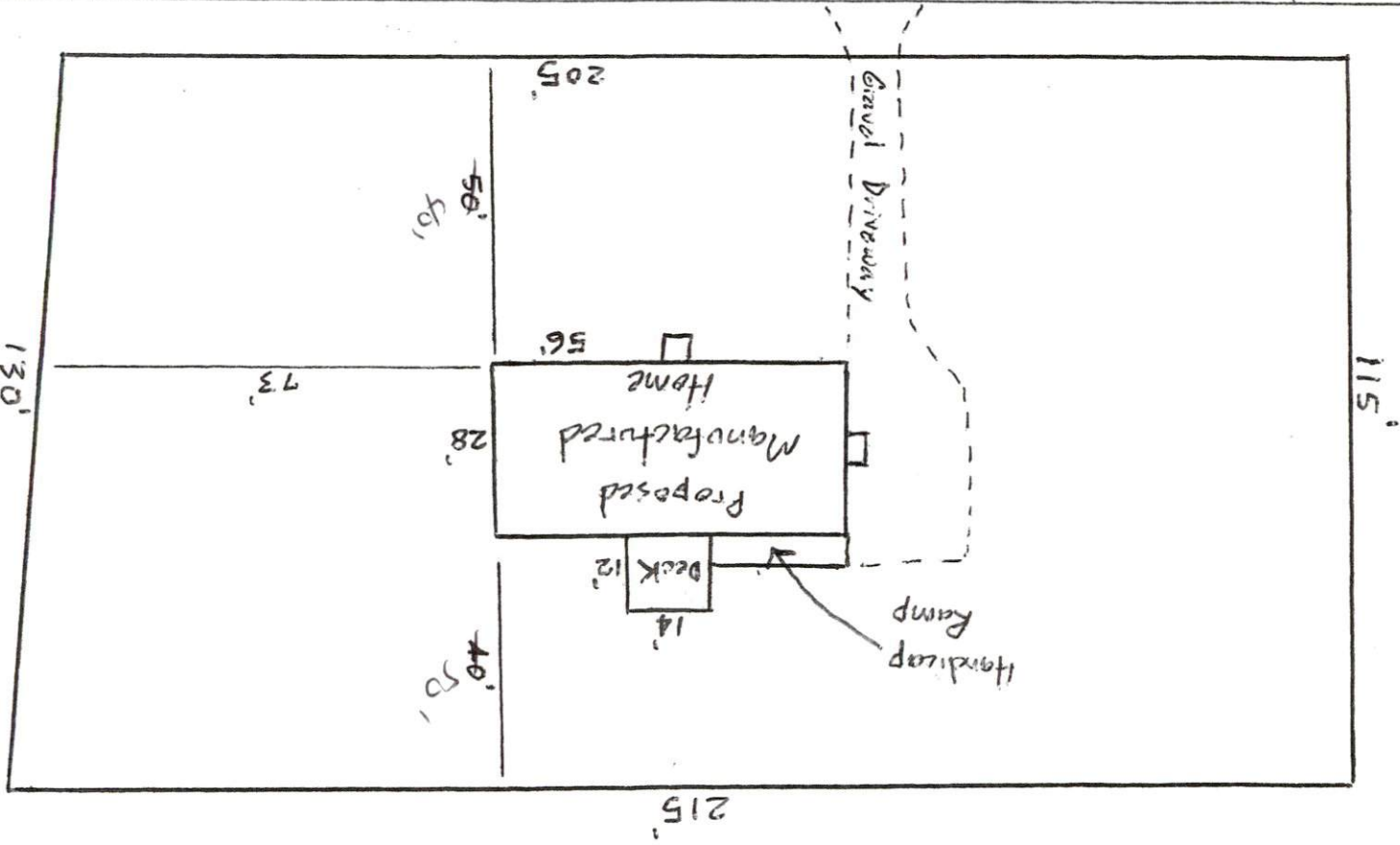
Zoning District		Existing Nonconforming Uses or Features	
Front Yard Setback	40'	Other Permits Required	<input type="checkbox"/> Conditional Use <input type="checkbox"/> Building <input type="checkbox"/> Fire Marshal <input checked="" type="checkbox"/> Other
Side Yard Setback	12'	Requires Town Zoning Inspection(s)	<input type="checkbox"/> Foundation <input checked="" type="checkbox"/> Prior to C. of O.
Rear Yard Setback	40'	Zoning Permit Status	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied
		Fee Paid: 60	Date Paid: _____ Staff Initials: _____

Comments	Need approval for septic tank and class A Manufactured Home
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Signature of Town Representative: <i>Drew Boudle</i>	Date Approved/Denied: 10/10/18
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126 Delaney Court
Dunn, NC 28334

1" = 30'



Delaney Court

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
Telephone Number: 910-893-7525 Fax 910-893-2793 www.harnett.org

Application for Manufactured Home Set-Up Permit
(Please fill out each part completely)

Part I - Owner Information:

Home Owner Information (To be completed by owner of the manufactured home)

Name: Beverly Thornton Address: 4725 Guy Road

City: Clayton State: NC Zip: 27520 Daytime Phone: (919) 553-8427

Landowner Information (To be completed by landowner, if different than above) (Current Owner)

Name: James Peterkin Address: PO Box 826

City: Coats State: NC Zip: 27521 Daytime Phone: ()

Part II - Contractor Information (To be completed by Contractors or Homeowner, if applicable.)

Name, address, & phone must match information on license)

A. Set-Up Contractor Company Name: JMB SERVICES State Lic# 32512

Phone: 919-669-7043 Address: 105 ASPEN CIRCLE

City: CLAYTON State: NC Zip: 27520

Setup Signature: [Signature]

B. Electrical Contractor Company Name: GLENN'S SERVICE CO., INC State Lic# 12810L

Phone: 919-779-0849 Address: WOODS BRACK PENNY RD.

City: RALEIGH State: NC Zip: 27603

Electrician's Signature: [Signature]

C. Mechanical Contractor Company Name: GLENN'S SERVICE CO. State Lic# 12327H3

Phone: 919-779-0849 Address: WOODS BRACK PENNY RD

City: RALEIGH State: NC Zip: 27603

HVAC Signature: [Signature]

D. Plumbing Contractor Company Name: PRIORITY PLUMBING State Lic# 18550

Phone: 919-422-4935 Address: P.O. BOX 204

City: WILLOW SPRING State: NC Zip: 27592

Plumber's Signature: [Signature]

Part III - Manufactured Home Information

Model Year: 2019 Size: 28 X 56 # of Bedrooms 3

Community: Waltz Crossing Lot Number: #3

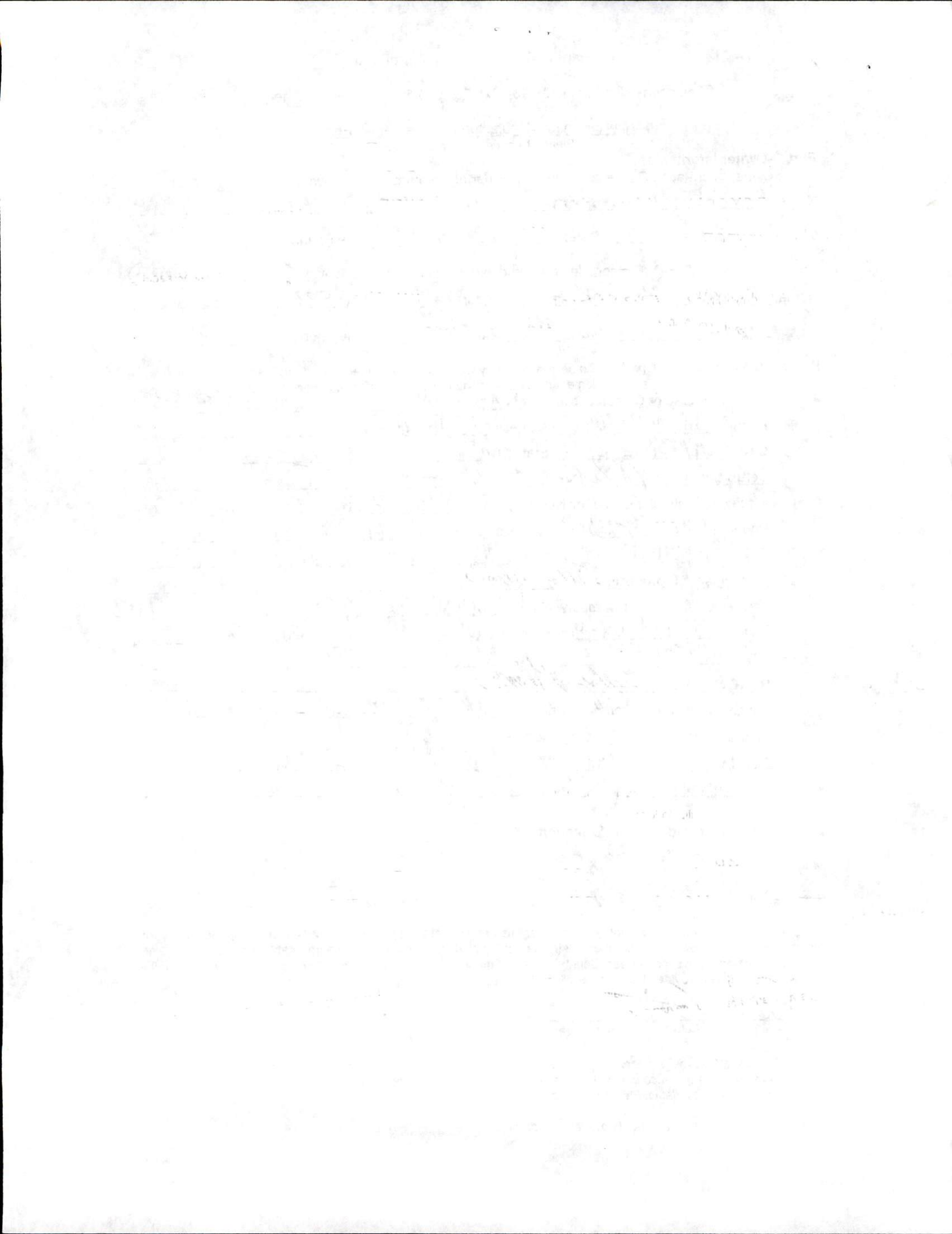
I hereby certify that I have the authority to apply for this permit, that the application is correct including the contractor information and signatures, and that the construction or installation will conform to the applicable manufactured home set-up requirements, and the Harnett County Zoning Ordinance. I understand that if any item is incorrect or false information has been provided that this permit could be revoked.

[Signature]
Signature of Home Owner or Agent

10 OCT 2018
Date

*Effective July 1, 2004, a County Tax Department Moving Permit must be provided before a Set Up Permit will be issued. It is purchased from the tax office of the county that the home is moved from. If the home is new or from a dealer, we need proof of year on the Form 500 and if available, the serial number.

List of inspections and Egress requirements available upon request.



GREENFIELD HOUSING CENTER

919-772-2220 OFFICE

919-772-0988 FAX

PROPERTY LOCATOR

SALESPERSON: Greg

CUSTOMER(S): Beverly Thornton PHONE #(S): 919-553-8427

Daughter: Tracey Bowen 919-578-0154

NEW ADDRESS: 126 Delaney Court
Dunn, NC 28334

COUNTY: Harnett

BUILDER: Fleetwood

YEAR: 2019

MODEL: 270PU28563U

NOTES TO CONTRACTORS:

SW, DW, OR MOD?: Doublewide

Serial #: _____

HEATED SQ FT: 1,474 Sq. Ft. PERIMETER CURTAINWALL: (CIRCLE ONE) MASONRY VINYL

DIMENSIONS: 28x56

DIRECTIONS TO HOME: From Greenfield Housing Center

Hwy. 70 West To I-40 East To I-95 South To

Exit #73, Turn Right Then Right On Hwy.

421/55. Proceed 4 Miles Then Turn Right On

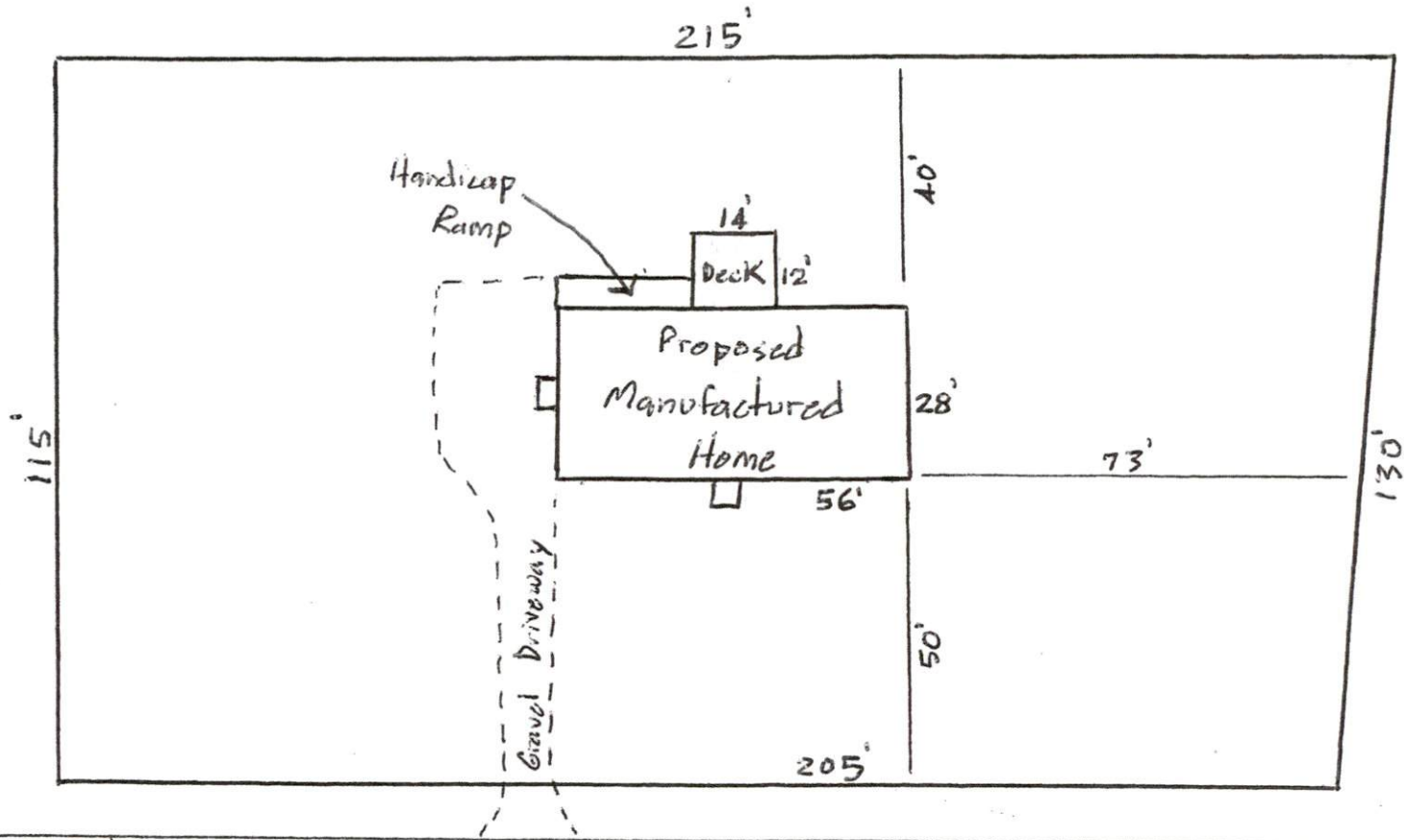
Red Hill Church Rd. Then Left On Suggs Rd.

Then 2nd Right On Delaney Court, Lot Down

On Right.

126 Delaney Court
Dunn, NC 28334

1" = 30'



Delaney Court