

Initial Application Date:

COUNTY		0.0
ORTH CAROLINA	4	BRES1810-0042
	Application #	DKC21010 00 100

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				
LANDOWNED MISTIANNE () A CODE Mailing Address: 1885 Mabry Rd				
City: Angler state: NZip: 2750 contact No: 919.333.9015 Email: ncchic78@				
gma/1.com				
APPLICANT*: Mailing Address:				
City: State: Zip: Contact No: Email: *Please fill out applicant information if different than landowner				
CONTACT NAME APPLYING IN OFFICE: MISTIANNE Jacobs Phone #				
ADDRESS: 1877 Mabry Rd PIN: 0081-19-4960,000				
DEED OR OTP:				
PROPOSED USE:				
SFD: (Sizex) # Bedrooms:# Baths:Basement(w/wo bath):Garage:Deck:Crawl Space:Slab:S				
(Is the bonus room finished? () yes () no w/ a closet? () yes () no (if yes add in with # bedrooms)				
☐ Mod: (Sizex) # 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 Dew TW (Size 22 x 44) # Bedrooms: 3 Garage: site built? Deck: site built?				
Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit:				
Home Occupation: # Rooms: Use: Hours of Operation: #Employees:				
Addition/Accessory/Other: (Sizex) Use: Closets in addition? () yes () no				
Water Supply:CountyExisting 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				
Does the property contain any easements whether underground or overhead (V) yes (_) no fower Line Case Went				
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. ***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



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 <u>undergrowth</u> 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

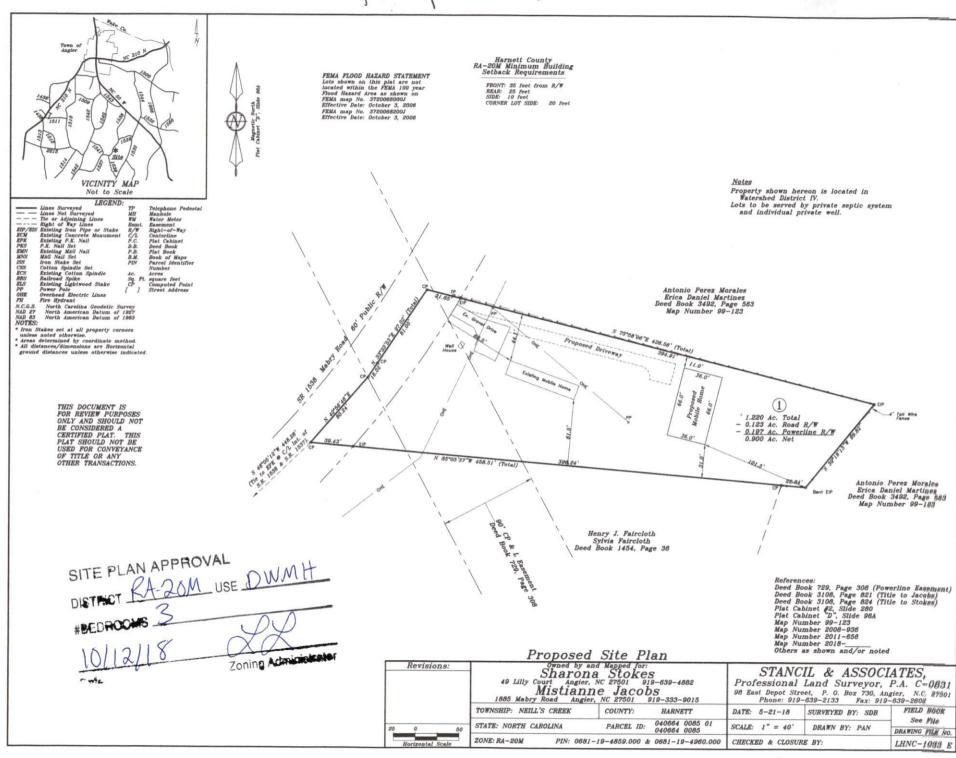
- Follow above instructions for placing flags and card on property.
- Prepare for inspection by removing soil over **outlet end** of tank as diagram indicates, and lift lid straight up (*if possible*) and then **put lid back in place**. (Unless inspection is for a septic tank in a mobile home park)
-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

		"MORE INFORMATION MAY BE REQUIRED TO COMPLETE ANY INSPECTION"		
SEPTIC				
If applying	for authorization	on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.		
{}} Acce	epted	{}} Innovative {} Conventional {} Any		
{}} Alte	rnative	{}} Other		
		the local health department upon submittal of this application if any of the following apply to the property in "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:		
{_}}YES	{ ✓ } NO	Does the site contain any Jurisdictional Wetlands?		
$\{_\}$ YES	NO	Do you plan to have an <u>irrigation system</u> now or in the future?		
{}}YES	{ ∨ } NO	Does or will the building contain any drains? Please explain.		
{}}YES	(V) 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	{ <u>_</u> }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.

strong roots • new growth

Proposed



Date: 10 2/18

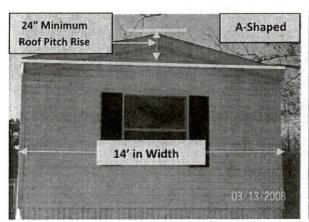
Application#_____

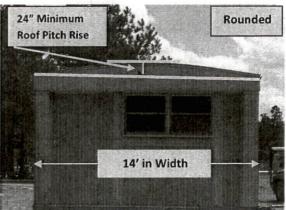
PROCEDURES AND GUIDELINES FOR MANUFACTURED HOME INSPECTIONS

RA-20R & RA- 20M Certification Criteria

I, Mishame Loub, understand that because I'm located in a RA-20R or RA-20M Zoning District and wish to place a manufactured home in this district I must meet the following criteria, verified by zoning inspection approval, before I will be issued a certificate of occupancy for this home.

1. The home must have a pitched roof, for a manufactured home, whether A-shaped or rounded, which has a minimum rise (measured at the center of the home) of twelve (12) inches for every seven (7) feet of total width of the home. (Example: A home measuring fourteen (14 ft.) in width must have a twenty four (24) inch rise as measured from the center of the roofline to the baseline of the roof.) (See Illustrations Below.)

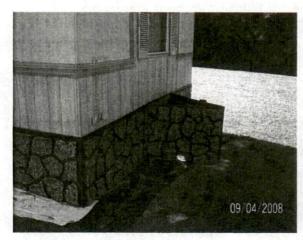




Note: Most Rounded Roofs **Will Not** Meet The Roof Pitch Requirement As Illustrated. The Measurement From The Peak Of The Roof To The Base Line Of The Roof Must Be 12" For Every 7' Of Total Width Of The Home. (Ex: 14' Wide Home = 24" Roof Rise)

Continued.....

- 2. The home must be underpinned, consisting of a brick curtain wall or have galvanized metal sheeting, ABS or PBC plastic color skirting with interlocking edges, installed around the perimeter of the home. Skirting shall be consistent in appearance, in good condition, continuous, permanent, and unpierced except for ventilation and access.
- 3. The homes moving apparatus must be removed, underpinned, or landscaped. (See examples below.)

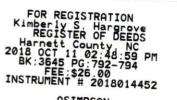




4. The home must have been constructed after July 1st 1976.

Signature of Property Owner / Agent

By signing this form the owner / agent is stating that they have read and understand the information on this form.





NORTH CAROLINA GENERAL WARRANTY DEED

Excise Tax: \$0.00 NO TITLE SEARCH NOR TA	AX ADVICE GIVEN
Parcel Identifier No. <u>040664 0085 01 and 040664 0085</u> Ve of, 20	Verified by County on the day
Mail/Box to: GRANTEE	
This instrument was prepared by: <u>Currie Tee Howell, Attorney, Adar</u> Brief description for the Index: <u>Lot 1, Lot Recombination, Map # 201</u>	
THIS DEED made this 9th day of October, 2018, by and between	Shamiles .
GRANTOR	GRANTEE
Terence Stokes and wife, Sharona Stokes; and Mistianne D. Jacobs, Unmarried 49 Lilly Court Lillington, NC 27546	Sharona Stokes, Married (50% undivided interest) and Mistianne D. Jacobs, Unmarried (50% undivided interest), as Tenants in Common 49 Lilly Court Lillington, NC 27546
Enter in appropriate block for each Grantor and Grantee: name, mail corporation or partnership.	ling address, and, if appropriate, character of entity, e.g.
The designation Grantor and Grantee as used herein shall include said singular, plural, masculine, feminine or neuter as required by context.	
WITNESSETH, that the Grantor, for a valuable consideration paid to has and by these presents does grant, bargain, sell and convey unto a situated in the City of, Neills Creek Township, Harnett County BEING all of Lot 1, containing 1.220 Ac. Total, as shown on m Mapped for: Sharona Stokes and Mistianne Jacobs", recorded	the Grantee in fee simple, all that certain lot or parcel of land ty, North Carolina and more particularly described as follows: map entitled "Lot Recombination Owned by and

The property hereinabove described was acquired by Grantor by instrument recorded in Book 3108 page 824 and Book 3108, Page

All or a portion of the property herein conveyed $\underline{\hspace{1cm}}$ includes or \underline{X} does not include the primary residence of a Grantor.

821

NC Bar Association Form No. 3 © 1976, Revised © 1/1/2010 Printed by Agreement with the NC Bar Association

A map showing the above described property is recorded in Map # 2018-266.

TO HAVE AND TO HOLD the aforesaid lot or parcel of land and all privileges and appurtenances thereto belonging to the Grantee in fee simple.

And the Grantor covenants with the Grantee, that Grantor is seized of the premises in fee simple, has the right to convey the same in fee simple, that title is marketable and free and clear of all encumbrances, and that Grantor will warrant and defend the title against the lawful claims of all persons whomsoever, other than the following exceptions:

This conveyance is expressly made subject to the lien created by all the Grantors' real 2018 Harnett County ad valorem taxes on said tract of land which the Grantee(s) agree to assume and pay in full when due.

Subject to all easements, rights-of-way, covenants and other restrictions as shown on the public record or as would be disclosed by an accurate survey and inspection of the land.

IN WITNESS WHEREOF, the Grantor has duly executed the foregoing as of the day and year first above written.
(SEAL)
Terence Stokes
Margue Atlex (SEAL)
Sharona Stokes
Motulul Caylo (SEAL)
Mistianne Jacobs
Service DV Controlled
State of County or City of and State aforesaid, certify that
Terence Stokes and wife, Sharon Stokes personally appeared before me this day and acknowledged the due execution of the
foregoing instrument for the purposes therein expressed. Witness my hand and Notarial stamp or seal this day of
8/27/23 Moran ANN ANN ANN ANN ANN ANN ANN ANN ANN AN
The things of the terminal of
My Commission Expires: (Affix Seal) Notary Public Notary's Printed or Typed Name
(Affix Seal) Affix Seal Af
My Commission Expires: (Affix Seal) Notary Public County Public Notary's Printed or Typed Name Notary's Printed or Typed Name
THE PROPERTY OF THE PROPERTY O



State of
My Commission Expires: 8 27 23 (Affix Seal) Motary Public County Notary Public County CAROLIMATING CAROLIMATI