



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: Ronald C. Jones Mailing Address: 504 Greenfield Drive

City: Dunn State: NC Zip: 28334 Contact No: 919-931-9258 Email: \_\_\_\_\_

APPLICANT\*: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Contact No: \_\_\_\_\_ Email: \_\_\_\_\_

\*Please fill out applicant information if different than landowner

ADDRESS: 51 Shadow Creek PIN: 0580-79-8650-000

Zoning: F-1 Flood: \_\_\_\_\_ Watershed: \_\_\_\_\_ Deed Book / Page: 3725-618

Setbacks - Front: 25.74 Back: 32.51 Side: 54.16 Corner: 69.91

**PROPOSED USE:**

SFD: (Size 28 x 76) # Bedrooms: \_\_\_\_\_ # Baths: \_\_\_\_\_ Basement(w/wo bath): \_\_\_\_\_ Garage: \_\_\_\_\_ Deck: \_\_\_\_\_ Crawl Space: \_\_\_\_\_ Slab: \_\_\_\_\_ 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 28 x 76) # Bedrooms: 3 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: 1 proposed Other (specify): Dunn

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.

Charles E. [Signature]  
Signature of Owner or Owner's Agent

8/19/19  
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**

**\*\*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.

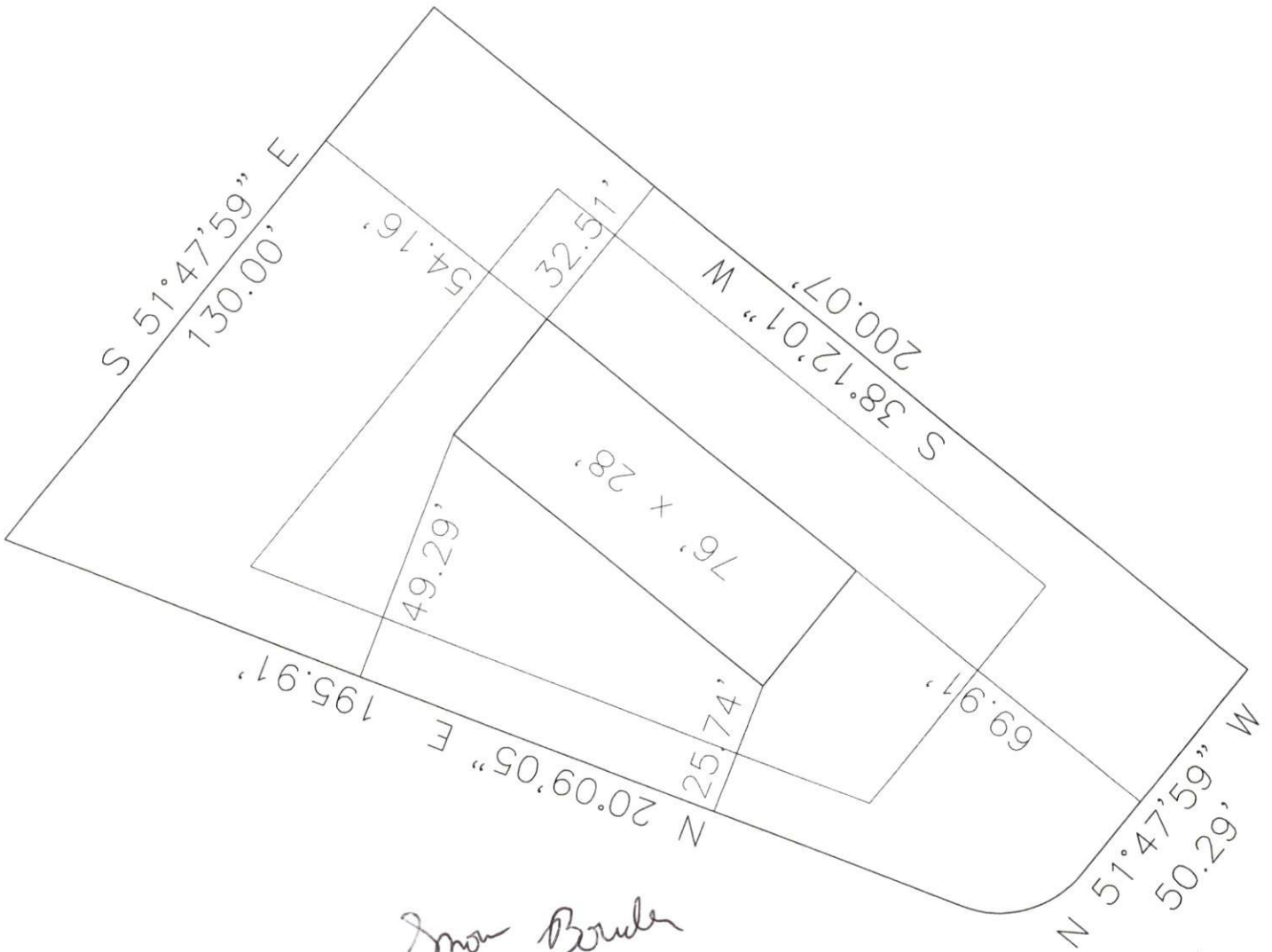
**I Have Read This Application And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And State Officials Are Granted Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules. I Understand That I Am Solely Responsible 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.**

Charlie

910-

824 -

1695



Snow Boulder

msB

8/7/19



TOWN OF ERWIN  
**Zoning Application & Permit**  
 Planning & Inspections Department

Permit #

Rev Sep 2014

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.

For Ronald Jones

Name of Applicant	Charles Page	Property Owner	Riverside Fm LLC
Home Address	79 Green Forest Cr.	Home Address	PO Box 1254
City, State, Zip	Dunn NC 28334	City, State, Zip	Dunn NC 28334
Telephone	910-897-3157	Telephone	
Email		Email	

PJV  
 0586-  
 79-  
 8650  
 -MSB  
 7/30/19

Address of Proposed Property	135 Shadow Creek Ln S1 Shadow Creek Ln		
Parcel Identification Number(s) (PIN)	0586-79-7354	Estimated Project Cost	
What is the applicant requesting to build / what is the proposed use of the subject property? Be specific.	New Manufactured Class A Home on an individual 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	0	Property/Parcel size	.47
Floodplain SFHA Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Watershed Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Wetlands Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
<b>MUST</b> circle one that applies to property	Existing/Proposed Septic System Or Existing/Proposed County/City Sewer		

MSB  
 7/30/19

**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.

Print Name	Charles E. Page Jr.	Signature of Owner or Representative	<i>Charles E. Page Jr.</i>	Date	5/14/19
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**For Office Use**

Zoning District	RO
Front Yard Setback	40'
Side Yard Setback	12'
Rear Yard Setback	40'

Existing Nonconforming Uses or Features	
Other Permits Required	Conditional Use <input type="checkbox"/> Building <input type="checkbox"/> Fire Marshal <input type="checkbox"/> Other <input type="checkbox"/>
Requires Town Zoning Inspection(s)	Foundation <input checked="" type="checkbox"/> Prior to C. of O. <input checked="" type="checkbox"/>
Zoning Permit Status	Approved <input checked="" type="checkbox"/> Denied <input type="checkbox"/>
Fee Paid: 60	Date Paid: 5/14/19 Staff Initials: MSB

Comments	New Manufactured Class A home on individual lot	
Signature of Town Representative:	<i>Shirley Bunch</i>	Date Approved/Denied: 5/14/19

**PAID**

\* in 500 year flood plain  
 Lot 3/Jones

astur  
 - NC DEPT OF TRANSPORTATION  
 MAY 14 2019  
 DRIVEWAY PERMIT  
 TOWN OF ERWIN

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: Konald Jones Address: 504 Greenfield Drive  
City: Dunn State: NC Zip: 28334 Daytime Phone: ( 919 ) 931-9258

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

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ 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: State Int Movers  
Phone: 919-422-8623 Address: 1085-A Aquilla Road  
City: Benson State: NC Zip: 27504  
State Lic# 2859 Email: \_\_\_\_\_
- B. **Electrical Contractor** Company Name: Mabry Electric Service Inc  
Phone: 919-639-4837 Address: 731 Mabry Road  
City: Angier State: NC Zip: 27501  
State Lic# 150774 Email: \_\_\_\_\_
- C. **Mechanical Contractor** Company Name: Spell Mechanical  
Phone: 910-525-5976 Address: P.O. Box 93  
City: Autryville State: NC Zip: 28318  
State Lic# 10574 Email: \_\_\_\_\_
- D. **Plumbing Contractor** Company Name: Priority Plumbing  
Phone: 919-639-7200 Address: P.O. Box 254  
City: Willow Springs State: NC Zip: 27592  
State Lic# 18550P-1 Email: \_\_\_\_\_

**Part III – Manufactured Home Information**

Model Year: 2019 Size: 28 X 76 **Complete & follow zoning criteria sheet**

Park Name: \_\_\_\_\_ Lot Number: \_\_\_\_\_

I hereby certify that I have the authority to apply for this permit, that the application is correct including the contractor information and have obtained their permission to purchase these permits on their behalf, 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.

Charles E. [Signature]  
Signature of Home Owner or Agent

8/19/19  
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 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. Progress Energy customers must provide Premise Number.*

1346493

# SALES AGREEMENT

DATE: 8/6/2019  
 BUYER(S): Ronald Craig Jones

ADDRESS: 504 GREENFIELD DR DUNN NC 28334  
 DELIVERY ADDRESS: 51 SHADOW CREEK LN ERWIN NC 28339  
 TELEPHONE: \_\_\_\_\_ SALES PERSON FULL NAME: Catherine Long

**BASE PRICE:** \$123,084.00  
 State Tax: \$2,923.25  
 Local Tax: \$0.00

**1. CASH PRICE** \$126,007.25  
 LAND PURCHASE \$12,500.00  
 TITLE FEES \$52.00  
 FILING FEES \$90.00

**2. TOTAL PACKAGE PRICE** \$138,649.25  
 Trade Allowance N/A  
 Less Amount Owed N/A  
 Trade Equity N/A  
 Cash Down Payment \$26,705.00

**3. LESS ALL CREDITS** \$26,705.00

**4. REMAINING BALANCE** \$111,944.25

Location	Type of Insulation	Thickness	R-Value
Floors	Fiberglass	7.00	R22
Exterior	Fiberglass	3.50	R11
Ceilings	Blown Fiberglass	8.80	R33

*This insulation information was furnished by the Manufacturer and is disclosed in compliance with the Federal Trade Commission Rule 16CRF, SECTION 460.16.*

Make: CMH Model: 29NOW28764ZH19  
 Year: 2019 Length: 76 Width: 28 Stock#: RSO  
 Serial No.: OHC029056NCAB New  Used

**TRADE:** Make: N/A Model: N/A  
 Year: N/A Length: N/A Width: N/A Title #: \_\_\_\_\_  
 Serial No.: \_\_\_\_\_

Amount owed will be paid by:  Buyer  Seller  
 Owed to: \_\_\_\_\_

**OPTIONS:** 14 Seer heat pump installed, plumb water up to 75 ft. and sewer up to 20 ft. connections, wire panel box to home for power, 2 sets wood steps with stoops, pier and perimeter footers, brick skirting wall, 7350 water sewer tap allowance,

**SELLER RESPONSIBILITIES:** Delivery and setup to county code, contractor permits

**BUYER RESPONSIBILITIES:** zoning permit, apply for water and sewer with Harnett County, crush and run driveway.

*May not meet local codes and standards. New homes meet Federal Manufactured Home Standards.*

**I UNDERSTAND THAT I HAVE THE RIGHT TO CANCEL THIS PURCHASE BEFORE MIDNIGHT OF THE THIRD BUSINESS DAY AFTER THE DATE THAT I HAVE SIGNED THIS AGREEMENT. I UNDERSTAND THAT THIS CANCELLATION MUST BE IN WRITING. IF I CANCEL THE PURCHASE AFTER THE THREE-DAY PERIOD, I UNDERSTAND THAT THE DEALER MAY NOT HAVE ANY OBLIGATION TO GIVE ME BACK ALL THE MONEY THAT I PAID THE DEALER. I UNDERSTAND ANY CHANGE TO THE TERMS OF THE PURCHASE AGREEMENT BY THE DEALER WILL CANCEL THIS AGREEMENT. ESTIMATED RATE OF FINANCING 10.09% NUMBER OF YEARS 23 ESTIMATED MONTHLY PAYMENTS \$1,101.33**

Buyer(s) agree: (1) that the terms and conditions on page two are part of this agreement; (2) to purchase the above home including the options; (3) that they acknowledge receiving a completed copy of this agreement; (4) that all promises and representations made are listed on this agreement; and (5) that there are no other agreements, written or verbal, unless evidenced in writing and signed by the parties.

<b>SELLER:</b>	<b>BUYER:</b>
	<u>Ronald Craig Jones</u>
<u>8/6/2019</u>	<u>8/6/2019</u>
CMH Homes, Inc. d/b/a -	Signature of: Ronald Craig Jones
<u>CHARLIE PAGE</u>	
CLAYTON HOMES DUNN, NC 2001 W CUMBERLAND ST DUNN NC 28334	Signature of:
	Signature of:
	Signature of:

