

Initial Application Date: 10/7/2019

Application # BRES1910-0052

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: Jean Ross Mailing Address: 64 Grayland Dr.

City: Fuquay Varina State: NC Zip: 27526 Contact No: 919-302-1266 Email: cookie27526@yahoo.com

APPLICANT: Clayton Homes of Raleigh Mailing Address: 3912 Fayetteville Rd.

City: Raleigh State: NC Zip: 27603 Contact No: 919-772-5013 Email: r781@claytonhomes.com

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Maynard Wilkins Phone # 919-772-5013

PROPERTY LOCATION: Subdivision: Grayland Lot #: 3 Lot Size: .49

State Road # _____ State Road Name: Grayland Map Book & Page: _____ / _____

Parcel: 080652 0043 05 PIN: 0652-53-0556.000

Zoning: _____ Flood Zone: _____ Watershed: _____ Deed Book & Page: _____ / _____ Power Company*: _____

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

PROPOSED USE:

SFD: (Size _____ x _____) # 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 68) # 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

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

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 Other (specify): 1 existing shed

Required Residential Property Line Setbacks:

Comments: _____

Front Minimum 35 Actual 71

Rear 25 90

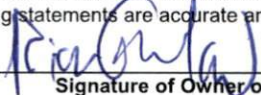
Closest Side 10 11.5

Sidestreet/corner lot 20 N/A

Nearest Building on same lot 6 60'

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 401 N to Right on Ballard Rd to Left on Grayland. Lot on Right

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

10/22/19

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****

Harnett County Central Permitting

PO Box 65 Lillington, NC 27546

Telephone Number: 910-893-7525 Fax 910-893-2793 www.harnett.org/permits

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: Jean Ross Address: 64 Grayland Dr.

City: Froggy Varina State: NC Zip: 27526 Daytime Phone: () _____

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

Name: SAME AS ABOVE 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: KARL CARTER

Phone: 919-422-0428 Address: 248 Woodruf Rd.

City: Selma State: NC Zip: 27576

State Lic# 2612 Email: r781@claytonhomes.com

B. **Electrical Contractor** Company Name: Glenns Service Co.

Phone: 919-779-0849 Address: 6005 Brack Penny Rd.

City: Raleigh State: NC Zip: 27603

State Lic# 12810L Email: r781@claytonhomes.com

C. **Mechanical Contractor** Company Name: Glenns Service Co.

Phone: _____ Address: 6005 Brack Penny Rd.

City: Raleigh State: NC Zip: 27603

State Lic# 12327H3 Email: r781@claytonhomes.com

D. **Plumbing Contractor** Company Name: Priority Plumbing

Phone: 919-422-4935 Address: P.O. Box 264

City: Willow Spring State: NC Zip: 27592

State Lic# 18550P Email: r781@claytonhomes.com

Part III - Manufactured Home Information

Model Year: 2019 Size: 28 x 68

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.

Rina [Signature]
Signature of Home Owner or Agent

10/22/19
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.