

Initial Application Date:\_\_\_\_

initial Application Date:	Application #
COHAITY OF HARAIM	. CU#
Central Permitting 420 McKinney Pkwy, Lillington, NC 275	TT RESIDENTIAL LAND USE APPLICATION 546 Phone: (910) 893-7525 ext:1 Fax: (910) 893-2793 www.harnett.org/permits
LANDOWNER: VAMES TO GOLD STORE AND S	TT RESIDENTIAL LAND USE APPLICATION 546 Phone: (910) 893-7525 ext:1 Fax: (910) 893-2793 www.harnett.org/permits  D PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION**  COLUMN TO THE WAS LAST TO BINCH CONTROL TO BINCH CON
APPLICANT*: IVANS A Army AMASON Mailing	Address: 10 Brooks Course In
*Please fill out applicant information if different than landowner	22 COMPACTING TO BE TO BE TO STATE EMAIL: CALIN JOHN SOLVE COLING to
ADDRESS: Hillbilly Lane Costs	PIN: 0691-00-3986,000
Zoning: 16-30 Flood: 1914 Watershed: 1334 Setbacks - Front: 35' Back: 25' Side: 10' Corne	Deed Book / Page: 7166 : 0438
PROPOSED USE: * There	are 5 hadroma
TOTAL HTD SQFE 20' GARAGE SQ FT MA (Is the bonus roo	nent(w/wo bath): Garage: Deck: Crawl Space: Slab: Monolithic Slab:
Modular: (Size x ) # Bedrooms # Baths Bas	sement (w/wo bath) Garage: Site Built Deck: On Frame Off Frame iished? () yes () no Any other site built additions? () yes () no
Manufactured Home:SWDWTW (Sizex_	) # Badirooms:Garage:(site built?) Deck:(site built?)
Duplex: (Sizex) No. Buildings:No	b. Bedrooms Per Unit:TOTAL HTD SQ FT
Uoxloo workshop, 15x10' 27x12' Craft barn  Addition/Accessory/Other: (Size 12 x 12) Use: Storage	Hours of Operation:#Employees:
TOTAL HITD SQ FIL 3, 80 % GARAGE DOX SOLL	ruled (576 1/2)
New Well (	(# of dwellings using well) *Must have operable water before final
(Complete Environmental Haalth Charlette Relocat	The second of the centre will copy them that the
oes the property contain any easements whether underground or over	rhead ( ) yes ( ) no
ructures (existing or proposed): Single family dwellings:	Manufactured Homes: Na Other (specify): low lains
permits are granted I agree to conform to all ordinances and laws of the lereby state that foregoing statements are accurate and correct to the l	ne State of North Carolina regulating such work and the specifications of plans submitted.
Signature of Owner or Owner's Agen	than applicable information about the subject property, including but not limited the deasements, etc. The county or its employees are not responsible for any
incorrect or missing information	nead easements, etc. The county or its employees are not responsible for any 1 that is contained within these applications.*** 1 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)

All property irons must be made visible. Place "pink property flags" on each corne iron of lot. All property lines must

Environmental Health New Septic System

	be clearly flag	ged approximately every 50 feet between corners.				
0	Place "orange buildings, swi	e house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks, out myting 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.				
		nickly wooded, Environmental Health requires that you clean out the undergrowth to allow the soil evaluation				
		ed. Inspectors should be able to walk freely around site. Do not grade property.				
0	All lots to be	addressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred for				
	failure to und	over outlet lid, mark house corners and property lines, etc. once lot confirmed ready.				
	Environment	al Health Existing Tank Inspections				
		instructions for placing flags and card on property.				
		spection by removing soil over <b>outlet end</b> of tank as diagram indicates, and lift lid straight up ( <i>if possible</i> )				
	and then <b>put</b> l	id back in place. (Unless inspection is for a septic tank in a mobile home park)				
9	DO NOT LEAV	E LIDS OFF OF SEPTIC TANK				
		"MORE INFORMATION MAY BE REQUIRED TO COMPLETE ANY INSPECTION"				
SEPTIC		MONDELL AND INCOME. TO COMPLETE AND INSPECTION				
If applying	g for authorizat	ion to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.				
{}} Ac	cepted	{} Innovative {} Conventional {} Any				
{}} Al	ternative	{}} Other				
Γhe appli question.	cant shall notify If the answer is	the local health department upon submittal of this application if any of the following apply to the property in supplicant MUST ATTACH SUPPORTING DOCUMENTATION:				
}YES	(V) NO	Does the site contain any Jurisdictional Wetlands?				
}YES	{V} NO	Do you plan to have an <u>irrigation system</u> now or in the future?				
}YES	{ <u>//</u> } NO	Does or will the building contain any drains? Please explain				
}}YES	NO 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		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	{ <u>√</u> } NO	Does the site contain any existing water, cable, phone or underground electric lines?				

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.

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



\* Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license.

Application # \_\_\_\_\_

Harnett County Central Permitting
420 McKinney Pkwy Lillington, NC 27546
PO Box 65 Lillington, NC 27546
910-893-7525 ext. 1 Fax 910-893-2793 www.harnett.org/permits

### Application for Residential Building and Trades Permit

Owner's Name: Travis and Amy Johnson	Data 7/19/22
Site Address: Hillbilly Road/no address yet b/c it is a wooded	
Subdivision: n/a Lot n/a Description of Proposed Work: stick	
is cleared Total Job Cost <u>\$12,000.00 to move the house with tr</u>	ne mover, \$15,000.00 with Duke energy to left
lines, \$12,000.00 to clean the land with Walkers in Buies Cree	<u>k</u>
General Contractor Inf	formation
Home owner Travis Johnson will do the punch sheet list that is	s needed before we move it 910-890-0432
	Telephone
10 Birch Grove Lane, Coats, NC 27521	oldschooljoco@gamil.com
Address	Email Address
n/a HEATED SQ FT 2,016	GARAGE SQ FT <u>n/a</u>
License #	£ 4:
Description of Work <u>basic handy man things only</u> Servi	<u>tormation</u> ice Size: Amps T-Pole: Yes No.
Home owner Travis Johnson, Electrician	
Electrical Contractor's Company Name	Telephone
10 Birch Grove Lane, Coats, NC 27521	oldschooljoco@gamil.com
Address	Email Address
n/a	
License #	
Mechanical/HVAC Contracto	
Description of Work <u>basic work like run new lines under the</u>	house
Home owner Travis Johnson	910-890-0432
Mechanical Contractor's Company Name	Telephone
10 Birch Grove Lane, Coats, NC 27521 Address	oldschooljoco@gamil.com
	Email Address
n/a License #	
Plumbing Contractor Info	ormation
Description of Work connect new sink in kitchen # Baths 2	
Home owner Travis Johnson	
Plumbing Contractor's Company Name	<u>910-890-0432</u> Telephone
10 Birch Grove Lane, Coats, NC 27521	oldschooljoco@gamil.com
Address	Email Address
n/a	
icense #	
Insulation Contractor Info	<u>ormation</u>
Home owner Travis Johnson	910-890-0432
nsulation Contractor's Company Name & Address	Telephone

	*	



# \*NOTE: General Contractor / owner must fill out and sign the second page of this application.

I hereby certify that I have the authority to make necessary application, that the application is correct and that the construction will conform to the regulations in the Building, Electrical, Plumbing and Mechanical codes, and the Harnett County Zoning Ordinance. I state the information on the above contractors is correct as known to me and that by signing below I have obtained all subcontractors

permission to obtain these permits and if any changes occur including listed contractors, site plan, number of bedrooms, building and trade plans, Environmental Health permit changes or proposed use changes, I certify it is my responsibility to notify the Harnett County Central Permitting Department of any and all changes. EXPIRED PERMIT FEES - 6 Months to 2 years permit re-issue fee is \$150.00. After 2 years re-issue fee is as per current fee schedule. Signature of Owner/Contractor/Officer(s) of Corporation Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the: General Contractor \_\_\_\_ Owner \_\_\_\_\_ Officer/Agent of the Contractor or Owner Do hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit: Has three (3) or more employees and has obtained workers' compensation insurance to cover them. Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them. Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance covering themselves. Has no more than two (2) employees and no subcontractors. While working on the project for which this permit is sought it is understood that the Central Permitting Department issuing the permit may require certificates of coverage of worker's compensation insurance prior to issuance of the permit and at any time during the permitted work from any person, firm or corporation carrying out the work. Sign w/Title:



\* Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license. Application #

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PO Box 65 Lillington, NC 27546
910-893-7525 ext. 1 Fax 910-893-2793 www.harnett.org/permits

### Application for Residential Building and Trades Permit

Owner's Name:	Frank "Travis" and Amy Jo	hnson	Date _	7/18/22
Site Address: 42 Hillbilly	Lane Coats NC 27521 P	hone <u>910-8</u>	90-4185 (Amy)	
Subdivision: n/a Lot n/a	Description of Proposed Work: sti	ck built house	e will be moved t	o this location after it
<u>is cleared</u> Total Job Cost	\$24,200.00 to move the house with	the mover, S	\$10,000 <u>.00</u> with	Duke energy to left
lines, \$6,500.00 to clean	the land with Walkers in Bules Cre	ek		
	General Contractor	Information		
Home owner Travis John	nson will do the punch sheet list the	at is needed b	pefore we move	it 910-890-0432 Telephone
10 Birch Grove Lane, Co	eats, NC 27521		oldschooljoco@	<u>gamil.com</u>
Address			Email Address	
n/a	HEATED SQ FT 2,016	GARAG	BE SQ FT <u>n/a</u>	
License #	Electrical Contracto	r Information	1	
Description of Workb	pasic handy man things only S			Pole:YesNo
Home owner Travis J	ohnson, Electrician	910-89	0-0432	
Electrical Contractor's Co			Telephone	
	ats, NC 27521	<u>.</u>	oldschooljoco@	ngamil.com
Address			Email Address	
n/a				
License #	Mechanical/HVAC Contr	actor Informa	ation	
Description of Work h	pasic work like run new lines under			
Home owner Travis John			0-890-0432	
Mechanical Contractor's			Telephone	
10 Birch Grove Lane, (		oldsch	ooljoco@gamil.c	om
Address	5000, 110 21021	<u>_0,000;</u>	Email Address	
n/a				
License #				
	Plumbing Contracto	r Information	<u>1</u>	
Description of Work conn	<u>ect new sink in kitchen</u> # Baths <u>2</u>			
Home owner Travis John			910-890	<u>-0432</u>
Plumbing Contractor's Co	ompany Name		Telephone	
	ne, Coats, NC 27521		oldschooljoco@	<u>gamil.com</u>
Address			Email Address	
n/a License #				
LICENSE #	Insulation Contracto	r Informatio	<u>n</u>	
Home owner Travis John	son		910-890	-043 <u>2</u>
	ompany Name & Address		Telephone	

July 11, 2022

To whom it may concern:

Amy Mercado Johnson and I, Angela Brandy LeQuire, have been in communication and Amy has voiced intentions of buying the 11.34 acre tract listed on Deed BK 766, p438 that belonged to James & Joyce Rollins (both deceased). The will is on file with Harnett County. The parcel ID is 070691 0151 03. If you have any questions or concerns, please feel free to contact me at 919-820-0306.

Thank you,

Angela Brandy LeQuire

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# NORTH CAROLINA GENERAL WARRANTY DEED

\$125.00
07-0691-0151-03
Kathryn Johnston Tart, PLLC, 1300 S Main St, Lillington, North Carolina 27546
Kathryn Johnston Tart
Lot#1 Stephanie Rollins Map #2019-162
No title search nor tax advice given.

THIS GENERAL WARRANTY DEED ("Deed") is made on the / d + h day of October 2022, by and between:

GRANTOR	GRANTEE	
Angela Brandy Lequire, Trustee for the Hillbilly Lane Trust; Sharon Lee Rollins, unmarried Life Estate Holder	Amy Mercado Johnson and husband, Frank Travis Johnson	
106 E Caxton Court Clayton, North Carolina 27527	42 Hillbilly Lane Coats, North Carolina 27521	

Enter in the appropriate block for each Grantor and Grantee their name, mailing address, and, if appropriate, state of organization and character of entity, e.g. North Carolina or other corporation, LLC, or partnership. Grantor and Grantee includes the above parties and their respective heirs, successors, and assigns, whether singular, plural, masculine, feminine or neuter, as required by context.

FOR VALUABLE CONSIDERATION paid by Grantee, the receipt and legal sufficiency of which is acknowledged, Grantor by this Deed does hereby grant, bargain, sell and convey to Grantee, in fee simple, all that certain lot, parcel of land or condominium unit in the City of \_\_\_\_\_\_, Grove Township, Harnett County, North Carolina and more particularly described as follows (the "Property"):

BEING all of that 11.34 acre tract more or less, together with easements of record showing on that survey for "Angela Brandy Lequire" drawn by Bennet Surveys, Inc. on December 21, 2001 and recorded in the Harnett County Register of Deeds, Harnett County, North Carolina in Map Book #2002 at Page 51.

All Control of the Co
All or a portion of the Property was acquired by Grantor by instrument recorded in Book page
All or a portion of the Property $\square$ includes or $\square$ does not include the primary residence of a Grantor.
A map showing the Property is recorded in Plat Book page
TO HAVE AND TO HOLD the Property and all privileges and appurtenances thereto belonging to Grantee in feesimple. Grantor covenants with Grantee that Grantor is seized of the Property in fee simple, Grantor has the right to convey the Property in fee simple, title to the Property is marketable and free and clear of all encumbrances, and Grantor shall warrant and defend the title against the lawful claims of all persons whomsoever, other than the following exceptions:
<ul><li>a) Easements, roadways, and rights-of-way of record.</li><li>b) Easements visible by an inspection of the premises.</li><li>c) Taxes due and owing therefor.</li></ul>
IN WITNESS WHEREOF, Grantor has duly executed this North Carolina General Warranty Deed, if an entity by its duly authorized representative.
Name: Sharon Lee Rollins  Hillbilly Lane Trust  By: Skela Brandy Lequire  Title: Trustee
STATE OF NORTH CAROLINA, COUNTY OF HARNETT  I, Kathryn J Tart, a Notary of the above state and county of Wake, certify that the following person(s) personally appeared before me on the day of October 2022, each acknowledging to me that he or she signed the foregoing document, in the capacity represented and identified therein (if any): Sharon Lee Rollins
KATHRYN J TART NOTARY PUBLIC  (Official Stal) Wake County North Carolina My Commission Expires ユーターションは
STATE OF NORTH CAROLINA, COUNTY OF HARNETT
I, Kathryn J Tart, a Notary Public of the County of Wake and State of North Carolina, certify that <u>Angela Brandy Lequire</u> , being personally known to me personally appeared before me this day and acknowledged that she is <u>Trustee of Hillbilly Lane Trust</u> and that she, being authorized to do so, voluntarily executed the foregoing as the Trustee of the Trust for the purposes stated therein.  WITNESS my hand and official stamp or seal, this $\frac{14}{100}$ day of October 2022.
WITNESS my hand and official stamp or seal, this 4 day of October 2022.  KATHRYN J TART  (Official Seal)  NOTARY PUBLIC  Wake County  North Carolina  My Commission Expires: 9-08-2026  Page 2 of 2

NC Bar Association Real Property Section Form No. 3  $\odot$  Revised 02/2021 Printed by Agreement with the NC Bar Association

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