Site plan attached- Harnett County GIS.

1/29/2024

GIS shows that there use to be a trailer / mobile home at the same location as we are putting ours. Power/ water and septic is located here and just want to tie into that.

Application is in mine and my son's name Mason Liggett Our mailing address now is 3208 US Hwy 64 W Apex NC 27523. We are putting the mobile home at 645 Milton Welch Rd Sanford NC Sanford NC 27332 and moving in once all is completed.

I understand since we are the owners we can be listed as the GC and self-perform plumbing and electrical.

Please let me know how to pay the required fees for all. Can you take payment by phone? Also do we need to have anything posted on site and how to we get that?

Thank you

Dena Liggett Wilkins



Initial Application Date:_	:Application #	
Central Permitting		
**A RECORDED SU	SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND U	ww.narnett.org/permits
LANDOWNER: Deno	a: Don Wilkins Mailing Address: 3208 us 64 w	SE APPLICATION
City: Apex	State: AIC Zip: 27523 Contact No: Email:Email:	k is 0 = 16)
APPLICANT*: Denal	Wilking : Mason Ligget Mailing Address: 3208 us 64 west	gnail.
City:Apex *Please fill out applicant inform	State: AC Zip: 27523 Contact No: Email: State as	abure
ADDRESS: 645	5 Milton Welch Rd 27332 PIN: 9567-92-5378	1,52,532
Zoning: K M JOM Flood	od: Watershed: Deed Book / Page: \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	Y
Setbacks – Front: 35	Back: 100 + Side: 15 + Corner: 15 NA	, i
PROPOSED USE:	, , , ,	
	Basement(w/wo bath): Garage: Deckty A Crawl Space: MS GARAGE SQ FT (Is the bonus room finished? () yes () no w/ a closet? () yes () no (if ye	s add in with # bedrooms
	_x) # Bedrooms # Baths Basement (w/wo bath) Garage: Site Built Deck: On Fr (Is the second floor finished? () yes () no Any other site built additions? () yes SWDWTW (Size/x>\(\) # Bedrooms: 2 Garage:(site built?) Deck:(s	s () no
☐ Duplex: (Sizex_	No. Buildings: No. Bedrooms Per Unit: TOTAL HTD SQ FT	
☐ Home Occupation: # R	Rooms:Use:Hours of Operation:#E	mployees:
	ther: (Sizex) Use: Closets in addition	
TOTAL HTD SQ FT	GARAGE	! () yes () no
Complete F	New Well (# of dwellings using well) *Must have operable water (Need to Complete New Well Application at the same time as New Tank) v Septic Tank Expansion Relocation Existing Septic Tank County Sewer Environmental Health Checklist on other side of application if Septic) and, own land that contains a manufactured home within five hundred feet (500') of tract listed above? () y	
Does the property contain an	any easements whether underground or overhead () yes () no	03 (
Structures (existing or propos	osed): Single family dwellings: Manufactured Homes: Other (specify):	
f permits are granted Lagree	ee to conform to all ordinances and laws of the State of North Carolina regulating such work and the specificat g statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false inform	tions of plans submitted.
***It is the owner/applicant	Signature of Owner or Owner's Agent 29/2024	
to: boundary information	Its responsibility to provide the county with any applicable information about the subject property, including 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**	luding but not limited sponsible for any

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)

П	<u>Environmental</u>	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

CEDTIC

"MORE INFORMATION MAY BE REQUIRED TO COMPLETE ANY INSPECTION"

If applying	g for authorizati	ion 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 application. I	ant shall notify f the answer is	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	{_UNO	Do you plan to have an <u>irrigation system</u> now or in the future?				
{_}}YES	(_TNO	Does or will the building contain any drains? Please explain.				
(_C)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? Not sune?				
{_}}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.

Matthew S. Willis Register of Deeds Harnett County, NC Electronically Recorded 12/11/2023 04:42:12 PM

NC Rev Stamp: \$70.00 Book: 4216 Page: 2243 - 2244 (2) Fee: \$26.00

Instrument Number: 2023020553

HARNETT COUNTY TAX ID # 099566 0140 13

12-11-2023 BY: LW

Parcel Identifier No: 9567-92-5378

Revenue: \$ 70.00

Mail after recording to Grantees

This instrument was prepared by Becker Law Offices, PC

Brief Description for the index

Lot 12, Knoll Brook Estates

NORTH CAROLINA GENERAL WARRANTY DEED

THIS DEED made DCCCMbCV 10, 2023, by and between

GRANTOR

GRANTEE

JAMES R. WESTER and spouse, MARSHA L. WESTER

DENA WILKINS and spouse, JON WILKINS

269 Lancashire Run Smithfield, NC 27577

645 Milton Welch Rd. Sanford, NC 27332

Enter in appropriate block for each party: name, address, and, if appropriate, character of entity, e.g., corporation or partnership.

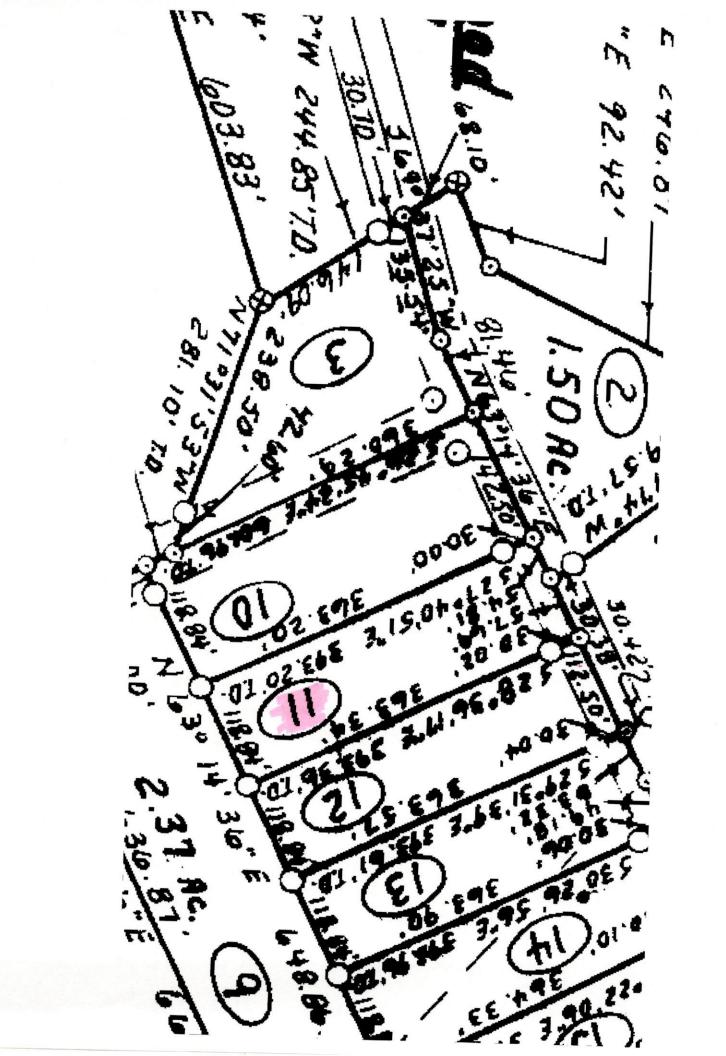
The designation Grantor and Grantee as used herein shall include said parties, their heirs, successors, and assigns, and shall include singular, plural, masculine, feminine or neuter as required by context.

WITNESSETH, that the Grantor, for a valuable consideration paid by the Grantee, the receipt of which is hereby acknowledged, has and by these presents does grant, bargain, sell and convey unto the Grantee in fee simple, all that certain lot or parcel of land situated in the Johnsonville Township, Harnett County, North Carolina and more particularly described as follows:

BEING all of Lot 12, Knoll Brook Estates as shown in Plat Cabinet F, Slide 479-B, Harnett County Registry.

The property herein abov	e described was acquired by Grantor by instrument recorded in Book 1514, Pages 684-687.				
All or a portion of the pro	operty herein conveyed includes orX does not include the primary residence of a Grantor.				
A map showing the above	e described property is recorded in Plat Cabinet F, Slide 479-B.				
	LD the aforesaid lot or parcel of land and all privileges and appurtenances thereto belonging to the Grantee				
And the Grantor covenant fee simple, that title is ma the lawful claims of all per	is with the Grantee, that Grantor is seized of the premises in fee simple, has the right to convey the same in arketable and free and clear of all encumbrances, and that Grantor will warrant and defend the title against rsons whomsoever except for the exceptions hereinafter stated.				
Title to the property herein	itle to the property hereinabove described is subject to the following exceptions:				
Ad valorem taxes for the c covenants, conditions or re	current year (prorated through the date of Settlement); utility easements and unviolated estrictions that do not materially affect the value of the Property.				
IN WITNESS WHEREOF, corporate name by its duly a above written.	the Grantor has hereunto set his hand and seal, or if corporate, has caused this instrument to be signed in its authorized officers and its seal to be hereunto affixed by authority of its Board of Directors, the day and year first JAMES R. WESTER (SEAL) MARSHAL. WESTER				
	I, the undersigned, a Notary Public of the County and State aforesaid, certify that JAMES R. WESTER and MARSHA L. WESTER, Grantors, either personally known to me or proven by satisfactory evidence (said evidence being NOOL) personally appeared before me this day and acknowledged the voluntary execution of the foregoing instrument. Witness my hand and official stamp or seal, this O day of OCCONOCO , 2023. Notary's name printed: ASAII STONION My commission expires: 117 2024				
ASHLI STANTON NOTARY PUBLIC WAKE COUNTY, N.C.					







PC#FSlide. 479B

Application #_

Harnett County Central Permitting

420 McKinney Pkwy Lillington, NC 27546 PO Box 65 Lillington, NC 27546

Telephone Number: 910-893-7525 ext. 1 Fax 910-893-2793 www.harnett.org/permits

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

Part I Home	-Owner Information: Owner Information (To be comp	pleted by owne	•	. ,,	ed home	
Name	E Dena Wilkins Mason	Ligge # A	ddress:	3208 Us	Hwy 64 V	v
City: _	Apex State	: NC Zip	275	23_Daytin	ne Phone:	919- <u>855-4165</u>)
Lando	wner Information (To be complete	ted by landow	ner, if dif	ferent than	above) -	Land address
Name	wner Information (To be completed)	1 Masur	ddress:	645	im: 1-	ton Welch Rd
City: _	Sanfad State	: <u>Nc</u> zip	:273	32 Daytir	ne Phone	:919-855-416
Part II	- Contractor Information (To b	e completed by	Contracto	ors or Home	owner if a	pplicable
A.	Name	address & nh	none must	match infor	mantin	license)
	Set-Up Contractor Company I Phone: 252-820-47	759 Add	SC Trans	Oort Booker D	ain . Dd	
	City: Norlina	Objection N	1C -:	Nooker D	airy Rd	
	City: Norlina	_ State:	Zip:	27563	_ Email:	wkbrdr3@gmail.com
B.	Setup Signature Republic 19					State Lic# <u>46282</u>
D .	Electrical Contractor Compar	ly Name: 🔼	wher			
	Phone:	_ Address: _				
	City:	_ State:	Zip: _		_ Email: _	
_	Electrician's Signature:					State Lic#
C.	Mechanical Contractor Compa	any Name:				
	Phone:	_ Address: _				
	City:	_ State:	Zip: _		Email:	
	HVAC Signature:	4			State Lic	#
D.	Plumbing Contractor Compan	y Name:	wn er	-		
	Phone:	_ Address:				
	City:	State:	Zip:		Fmail:	
	Plumber's Signature:					State Liett
						otate Lic#
Part III	 Manufactured Home Informa 	tion				
Model Y	/ear: 1995 Size: 14 x 7	O Com	nlete & f	follow zon	ina critor	ia chaot
						ia srieet
raik iva	ame: N/A	——————————————————————————————————————	Lot N	umber:	MA	
hereby	certify that I have the authority to	apply for this p	ermit, tha	t the applica	ation is co	rrect including the contractor
set-up	equirements, and the Harnett Cour	nty Zoning Ordi	inanco I	will conform	to the ap	plicable manufactured home
nformati	on has been provided that this permi	it could be revo	ked.	understand	inatira	ny item is incorrect or false
	Da Welfais				1/20	12024
	Signature of Home Owner or Ag	ent			Date /	100

^{*}Effective July 1, 2004, a County <u>Tax Department Moving Permit</u> 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.