

Initial Application Date: 3/17/09

SCANNED  
DATE 3/17/09

Application # 09500 21759

CU# \_\_\_\_\_

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION  
Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 Fax: (910) 893-2793 www.harnett.org/permits

LANDOWNER: Bobby + Wanda Murray Mailing Address: 106 Paul Clayton Circle

City: Coats State: NC Zip: 27521 Home #: 910-892-8378 Contact #:

APPLICANT: Marshall Johnson Const. Inc. Mailing Address: 283 Banner Elk Rd.

City: Benson State: NC Zip: 27504 Home #: 919-884-2064 Contact #: 919-427-7111

\*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Marshall Johnson Phone #: 919-427-7111

PROPERTY LOCATION: Subdivision w/phase or section: Clayton Downs Lot #: 9 Lot Acreage: .62

State Road #: 2003 State Road Name: Melamb Rd Map Book&Page: 014881 0727

Parcel: 070680013715 PIN: 0680-94-2223,000

Zoning: RA-30 Flood Zone: X Watershed: IV Deed Book&Page: 1488 1727 Power Company: Progress Energy

\*New homes with Progress Energy as service provider need to supply premise number \_\_\_\_\_ from Progress Energy.

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: HWY 27 E. to Coats - TR on Melamb Rd. TL on Paul Clayton Circle. 106 is at end of street on right.

PROPOSED USE:

Circle:

- SFD (Size     x    ) # Bedrooms     # Baths     Basement (w/wo bath)     Garage     Deck     Crawl Space / Slab  
(Is the bonus room finished?     w/ a closet     if so add in with # bedrooms)
- Mod (Size     x    ) # Bedrooms     # Baths     Basement (w/wo bath)     Garage     Site Built Deck     ON Frame / OFF  
(Is the second floor finished?     Any other site built additions?    )
- Manufactured Home:     SW     DW     TW (Size     x    ) # Bedrooms     Garage     (site built?    ) Deck     (site built?    )
- Duplex (Size     x    ) No. Buildings     No. Bedrooms/Unit
- Home Occupation # Rooms     Use     Hours of Operation:     #Employees
- Addition/Accessory/Other (Size 16 x 20) Use Sun Room Closets in addition (   ) yes (   ) no (   )

Water Supply: ( County) ( Well (No. dwellings 1)) **MUST** have operable water before final

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

Property owner of this tract of land own land that contains a manufactured home w/in five hundred feet (500') of tract listed above? (   ) YES ( NO

Structures (existing & proposed): Stick Built/Modular  Manufactured Homes     Other (specify) PROPOSED ADDITION

Required Residential Property Line Setbacks:

Comments: \_\_\_\_\_

Front	Minimum	Actual
	<u>35</u>	<u>60.5</u>
Rear	<u>20</u>	<u>73.5</u>
Closest Side	<u>35</u>	<u>24.4</u>
Sidestreet/corner lot	<u>   </u>	<u>   </u>
Nearest Building on same lot	<u>   </u>	<u>   </u>

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]  
Signature of Owner or Owner's Agent

3-17-09  
Date

\*\*This application expires 6 months from the initial date if no permits have been issued\*\*

A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION

Please use Blue or Black Ink ONLY

FOR REGISTRATION REGISTER OF DEEDS  
KIMBERLY S. HARGROVE  
HARNETT COUNTY, NC  
2001 APR 12 09:50:02 PM  
BK: 1488 PG: 727-729 FEE: \$18.00  
NC REVENUE STAMP: \$285.00  
INSTRUMENT # 200105587

Excise Tax \$0.00

Recording Time, Book and Page

Tax Dist No. \_\_\_\_\_ Parcel Identifier No. \_\_\_\_\_  
County on the \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_  
by \_\_\_\_\_

Mail after recording to R. Daniel Rizzo, P. O. Box 966, Dunn, NC 28335

This instrument was prepared by R. Daniel Rizzo, Attorney at Law

Base Description for the Index LT 9, CLAYTON DOWNS

### NORTH CAROLINA GENERAL WARRANTY DEED

THIS DEED made this 12th day of April, 2001, by and between

GRANTOR

GRANTEE

Barnes J. Clayton, divorced

Bobby Murray and wife,  
Wanda Murray

343 McLamb Road  
Coats, NC 27521

106 Paul Clayton Circle  
Coats, NC 27521

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 City of \_\_\_\_\_ n/a \_\_\_\_\_ Grove Township, Harnett County, North Carolina and more particularly described as follows:

Being all of Lot Number 9 of Clayton Downs as shown on that map entitled "Clayton Downs, Property of Barnes Clayton and H. Dempsey Hardy" prepared by Piedmont Surveying dated May 7, 1993, and recorded in Plat Book F, Page 480A, Harnett County Registry, and being the same property as shown on that map recorded in Plat Book F, Page 493B.

For history of title see will of Dempsey Hardy filed April 10, 2001 in the Office of Clerk of Court of Harnett County and Deed recorded in Book \_\_\_\_\_ Page \_\_\_\_\_ Harnett County Registry.

HARNETT COUNTY TAX ID #
01-0000-0137-15
4-12-01 BY Am

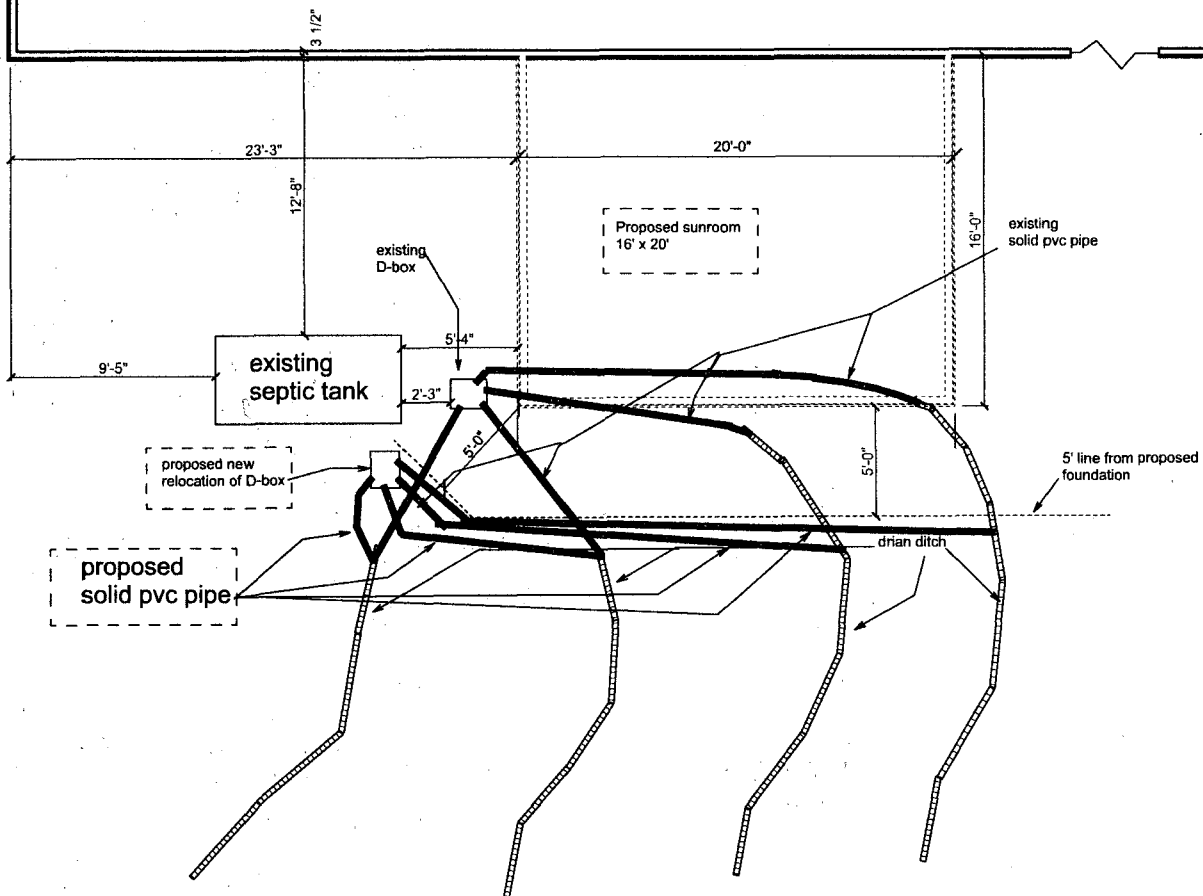


Proposed addition for  
Bobby and Wanda Murray  
106 Paul Clayton Cr.  
Coats, NC 27521

Existing house

28'-0 5/8"

28'-0 5/8"





NAME: MARSHALL JOHNSON

APPLICATION #: \_\_\_\_\_

**\*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)

910-893-7525 option 1

CONFIRMATION # \_\_\_\_\_

**Environmental Health New Septic System** Code 800

- 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.**
- Call No Cuts to locate utility lines prior to scheduling inspection. 800-632-4949 (This is a free service)
- After preparing proposed site call the voice permitting system at 910-893-7525 option 1 to schedule and use code 800 (after selecting notification permit if multiple permits exist) for Environmental Health inspection. **Please note confirmation number given at end of recording for proof of request.**

- Use Click2Gov or IVR to verify results. Once approved, proceed to Central Permitting for permits.

**Environmental Health Existing Tank Inspections** Code 800

- Follow above instructions for placing flags and card on property.
- Prepare for inspection by removing soil over door as diagram indicates. Loosen trap door cover. (Unless inspection is for a septic tank in a mobile home park)
- After preparing trapdoor call the voice permitting system at 910-893-7525 option 1 & select notification permit if multiple permits, then use code 800 for Environmental Health inspection. **Please note confirmation number given at end of recording for proof of request.**
- Use Click2Gov or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.

**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.**

  
 \_\_\_\_\_  
**PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)**

3-17-09  
 \_\_\_\_\_  
**DATE**