Initial Application Date: 0-12-14

Application # _	1450033936	

CU#

Central Permitting

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION 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: Jarrod Lee Moneill Mailing Address: 2825 Hally Springs Ch Rd
City: 130000000 State: NC zip: 2005 Contact No: 919-499 3109 Email: 3 Mcneil 10314@ youhoo
APPLICANT*: Mailing Address:
City: State: Zip: Contact No: Email:
CONTACT NAME APPLYING IN OFFICE:Phone #
PROPERTY LOCATION: Subdivision: Riverland Est. Lot #: 16 Lot Size: 68AC
State Road # 180 State Road Name: 1 Y ev Gotwin RG Map Book & Page: 2003/989 Parcel: 07 0588 0140 16 PIN: 0587-79-2816-000
Zoning Flood Zone: Watershed: Deed Book & Page: 3018 / 420 Power Company*:
New structures with Progress Energy as service provider need to supply premise number from Progress Energy.
PROPOSED USE:
Monolithic SFD: (Sizex) # 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)
w) 20x16 added on end of home
Mod: (Size 40 x 60) # Bedrooms 3 # Baths 2 Basement (w/wo bath) 0 Garage: 1 Site Built Deck: 1 On Frame Off Frame (Is the second floor finished? (_) yes (1) no Any other site built additions? (_) yes (1) no
Manufactured Home:SWDWTW (Sizex) # Bedrooms: Garage:(site built?) Deck:(site built?)
Duplex: (Sizex) No. Buildings:No. Bedrooms Per Unit:
Home Occupation: # Rooms: Use: Hours of Operation: #Employees:
Addition/Accessory/Other: (Sizex) Use: Closets in addition? () yes () no
Nater 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: Other (specify):
Required Residential Property Line Setbacks: Comments:
Front Minimum Actual 50
Rear 162
Closest Side 12
Sidestreet/corner lot
Nearest Building

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		17			

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:		
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		orland restrict to the control of th
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		P. G. P. A. C. A. C. B. C.
permits are granted I agree to conform to all ordinances and laws of the State of North Card hereby state that foregoing statements are accurate and correct to the best of my knowledge	olina regulating such work and the specifications of e. Permit subject to revocation if false information is $6-12-14$	plans submitted. s provided.
Signature of Owner or Owner's Agent	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

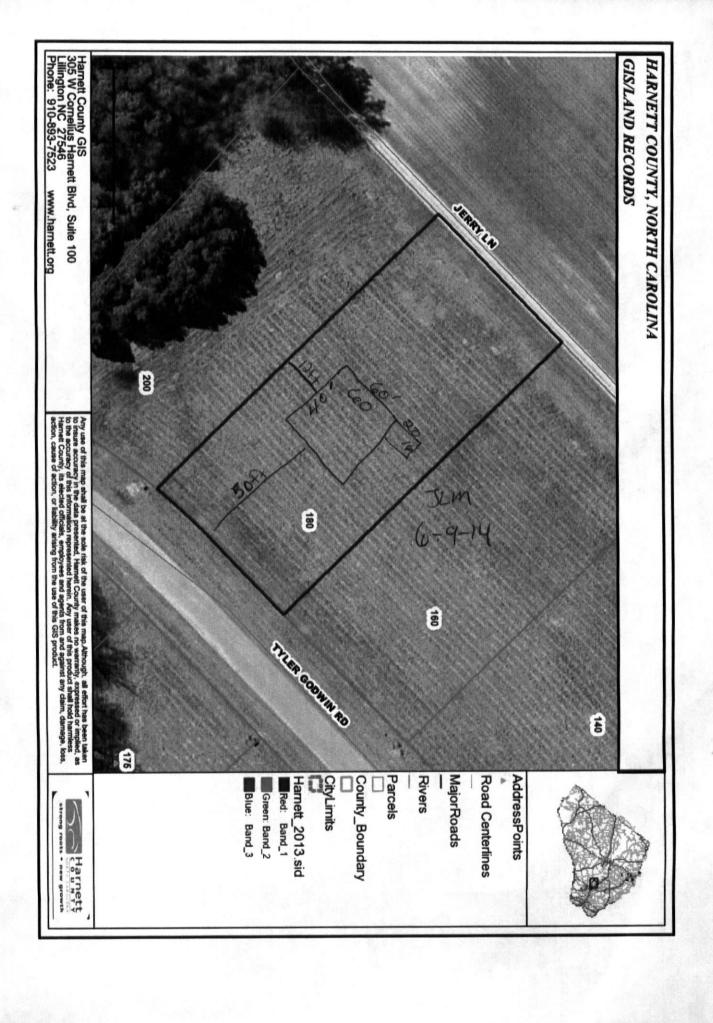
•			
NAME:			
INAMIE.	 	 	-

APPI	ICA	TION	#:
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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 8 00 All property irons must be made v isible. Place "pink p roperty flags" o n each corner i ron 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
 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. <u>Do not grade property.</u> 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.
 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 En vironmental 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 Cod e 800
Follow above instructions for placing flags and card on property. Place of the straight up (if the s
 Prepare for inspection by removing soil over <u>over outlet end</u> as diagram indicates, and lift lid straight up (if possible) and then close back down. (Unless inspection is for a septic tank in a mobile home park)
 After uncovering outlet end call the voice permitting system at 910-893-7525 option 1 & select notification permit if
multiple permits, then u se code 800 for Environmental Health ins pection. 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.
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
{ } 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 $\{_J\}$ NO Does the site contain any Jurisdictional Wetlands?
{}}YES {_{} \subseteq} NO Do you plan to have an <u>irrigation system</u> 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
{}}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) DATE
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED) DATE

10/10





Town of Erwin Zoning Application & Permit

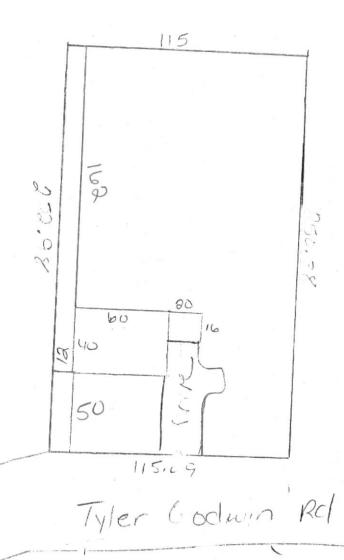
Planning & Inspections Department

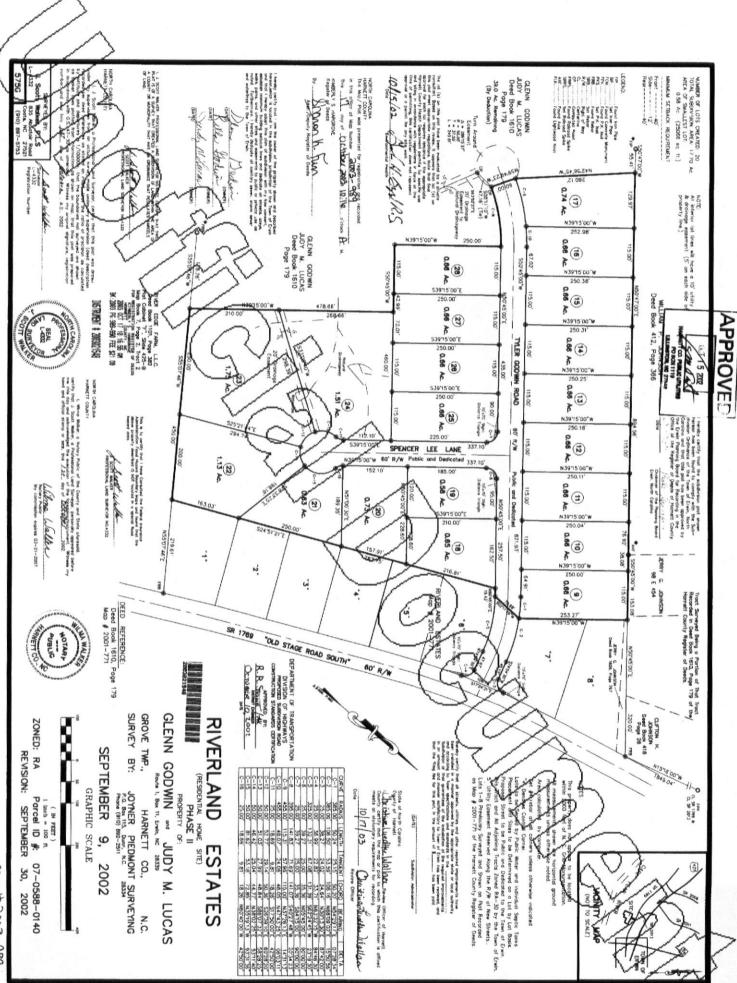
Permit #
Permit # 2014-037

Rev Jan2013

Each application should be submitted with an attached plot/site plan with the proposed use/structure showing lot

imensions. Name of Applicant	Jarrod Le	e moneill	Property Owner	Jarrod Lee	mcneill
Home Address	Dan M	springe Ch Rd	Home Address		prings ChRd
City, State, Zip	Broadway,		City, State, Zip	Broadway,	
Telephone	919-499-3	,	Telephone	919-449-3	
Email		14 @ yahoo.com			3146) yahoo,com
Address of Proposed	d Property /	80 TYLER G	Godwin Rd		
Parcel Identification	Number(s) (PIN)	0.587-79-	2816.000 Estim	ated Project Cost	140.00
What is the applican the proposed use of			vew single fami	Mas	lular e (20×16')
Description of any pro to the building or prop		s 1760) sq f+ +	garage	
What was the Previo		ect property?	vacant		
Does the Property A			yes		
Number of dwelling		e property already	0		
Property / Parcel Siz				06	
MUST circle one that a	applies to property	Existing/Proposed	Septic System County/City Sewe	Or	
		Hyisting/Pronosec	i County/City Sewe	r	
nswers, statements, and and belief. The undersi- oplication. Upon issua- egulations, and the law	rty owner, or duly at d other information gning party understance of this permit, the or of the State of Nor	wner/Applicant M uthorized agent/repre herewith submitted a ands that any incorrec he undersigning part th Carolina regulatin	Tust Read and Sign esentative thereof cert are in all respects true ct information submit y agrees to conform to g such work and to the	ifies that this applica and correct to the be- ted may result in the o all applicable town as specifications of pla	st of their knowledg revocation of this ordinances, zoning ans herein submitted
he undersigned proper names, statements, and belief. The undersign pplication. Upon issuance gulations, and the law he undersigning party of this application as ap	rty owner, or duly at d other information gning party understance of this permit, the es of the State of Nor authorizes the Town proved.	wner/Applicant M uthorized agent/repre herewith submitted a ands that any incorrec he undersigning part th Carolina regulatin	tust Read and Sign esentative thereof cert are in all respects true ct information submit y agrees to conform to g such work and to the this request and cond	ifies that this applica and correct to the be- ted may result in the o all applicable town as specifications of pla	st of their knowledg revocation of this ordinances, zoning ans herein submitted to ensure compliance
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nswers, statements, and belief. The undersipplication. Upon issuate gulations, and the law the undersigning party of this application as appl	rty owner, or duly at d other information gning party understance of this permit, the sof the State of Nor authorizes the Towner of the state of Nor authorizes the State of Nor authori	wher/Applicant Muthorized agent/representation and that any incorrect the undersigning party the Carolina regulating nof Erwin to review the Signature of Owner of Carolina Permits Requires Coning Permit Status See Paid: \$50	resentative thereof cert are in all respects true to information submit agrees to conform to g such work and to the this request and conduct or Representative The conditional of the conduction of the Paid: 12 12 14 15 15 15 15 15 15 15	ifies that this applica and correct to the bested may result in the coall applicable town as specifications of plucts a site inspection to the best of	st of their knowledge revocation of this ordinances, zoning ans herein submitted to ensure compliance of the submitted and the submitted of th





map # 2003-989

HARNETT COUNTY TAX ID # 070588 0140 16 & 17

05-30-2014 BY: SB

namen county, No

Electronically Recorded

2014 May 30 01:30 PM NC Rev Stamp: \$ 30.00 Book: 3218 Page: 420 Fee: \$ 26.00

Instrument Number: 2014007108

180 Tyler Godwin

Parcel #070588 0140 16 & 07 0588 0140 1 Excise Tax: _{30.00}	Recording Time, Book & Page:
Prepared by: HAYES, WILLIAMS, TURNER & DAUGHTRY, P.A. 804 West Broad Street Dunn, North Carolina 28334 File: 2014 Misc	Mail after recording to: Grantees

NORTH CAROLINA GENERAL WARRANTY DEED NO TITLE CERTIFICATION

This deed made this 30 day of May, 2014, by and between:

GRANTOR:	GRANTEE:
WILLIAM L. DAUGHTRY and wife, PARRISH H. DAUGHTRY 801 West Cumberland Street Dunn, North Carolina 28334	JARROD LEE McNEILL 2825 Holly Springs Church Rd. Broadway, NC 27505

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 Grantee, the receipt of which is hereby acknowledged, has bargained and sold, and by these presents doth grant, bargain, sell and convey unto the Grantee, in fee simple, all that certain tract or parcel of land lying and being in the Grove Township, Harnett County, North Carolina, and more particularly described as follows:

BEING all of Lots 16 and 17, Riverland Estates, Phase II, as shown on plat entitled "Riverland Estates, Phase II," dated September 9, 2002, and recorded in Map Book 2003, Page 989, Harnett County Registry, to which plat reference is hereby made for a more particular description and is incorporated by reference as if fully set forth herein.

This property is conveyed subject to those protective covenants recorded in Deed Book 2066, Page 517 and re-recorded in Deed Book 2488, Pages 381-391 and amended in Deed Book 3093, Pages 53-57, Harnett County Registry.



RLI Insurance Company P.O. Box 3967 Peoria IL 61612-3967 Phone: (309)692-1000 Fax: (309)683-1610

POWER OF ATTORNEY

RLI Insurance Company

Bond No. __LSM0714993

Know All Men by These Presents:

That the	RLI Insurance Company	, a corp	oration organized and	existing under the la	ws of the State of
Illing	ois, and authorized and	licensed to do business	s in all states and the D	District of Columbia	does hereby make,
constitute and ap	point: Wendy Hole	<u>der</u> in	the City of	Sanford	, State of
North Care	olina, as Attorney In F	act, with full	power and authority h	ereby conferred upo	n him/her to sign,
execute, acknow	ledge and deliver for and on its bel	nalf as Surety, in gener	al, any and all bonds,	undertakings, and re	cognizances in an
	exceed Ten Milli		Dollars (\$10,000,000,00	_) for any single
_	pecifically for the following describ				
 Principal:	EJ Womack DBA Raven Rock	Mobile Home Movers	<u> </u>	· · · · · ·	-
Obligee:	County of Harnett				
Type Bond:	Modular Building, Setup and Ir	istallation Contractor			
	\$ 5,000.00				
Effective Date:	March 2, 2015				
Tha	RLI Insurance Company	further co	ertifies that the follo	wing is a true and	exact copy of a
Pasalution adont	ted by the Board of Directors of	RLI Insu	rance Company	, and nov	v in force to-wit:
corporate seal	Powers of Attorney or other of may be printed by facsimile."		•		
IN WITNESS W	VHEREOF, theRL	Insurance Company	a l day of N	Annah 2014	to be executed by
itsVice	e President with its corpora	ate seal affixed this	2nd day of	<u>//arch</u>	· .
ATTEST:		MANCE CONTINUE OF THE PROPERTY	RLI Insurance Co	mpany	•
(June)	and Con	SEAL		70	L
Cynthia S. Dohm	Assistant Secre	tary The LINOIS	Roy C. Die		Vice President
On this 2nd	day of March, 2015 be	fore me, a Notary Publ	ic, personally appeared	d Roy C	Die
and	Cynthia S. Dohm, who be	eing by me duly sworn	, acknowledged that the	iey signed the above	Power of Attorney
as	Vice President	and	Assistant Secretary wledged said instrume	, respe	ervery, or the said irv act and deed of
said corporation	RLI Insurance Company	, and acknow	wieugeu saiu iiisiium	one to be me volunte	,
	. –	1	OFFICIAL SEAL"		
	assissine M. Dockel	NOTARY PUBLIC JACO	QUELINE M. BOCKLER		
Jacqueline M. Bo		y Public (LINOS) сомм	IISSION EXPIRES 01/14/18		

NORTH CAROLINA MODULAR BUILDING

SET-UP CONTRA	CTOR LICENSE BOND	#	LSM0714993
WE,EJ Womack DBA Rave	en Rock Mobile Home Movers	<u>. </u>	
as principal, located at	NC HWY 87 Sanford, NC 2	7332	
and RLI Insurance Company (su	rety) of	P.O. Box 396	7
Peonia, IL 61612-3967 Illinois and duly licensed to transact a sur	(aggress) a corporation in	corporated und	er the laws of the State of
bound to the and duly licensed to transact a sur	rnett	ortii Carolilla as	/city or county inspection
bound to the County of Ha department) in the sum of	Five Thousand, and 00/100		(city or county inspection
(\$ 5,000.00) dollars for which payment we bind ourselves	s and our legal representative	s jointly and se	verally.
THE CONDITION OF THIS OBLIGATION IS SUCH, that where installation of the modular building described herein;	eas the principal has entered i	nto a contract f	or the set-up and
NOW, THEREFORE, if the principal and all his agents and em with the regulations of the North Carolina State Building Code gov and void; otherwise, it shall be in full force and effect.	ployees shall set-up and insta erning installation of modular	all said modular buildings, then	building in compliance this obligation shall be null
It is expressly provided that:			
 This bond is executed by the said principal and surety to en building. 	able the principal to set-up on	e North Carolin	The second secon
This bond is in full force and effect as to the above State Bucarolina labeled modular building at the following address: Street	ilding Code obligations of the		e set-up of one North
City Erwin	21 GOGWIII ING	, No	orth Carolina
This bond will remain in full force and effect for one year follouilding.	lowing the issuance of the cer	tificate of comp	liance for the modular
4. The bond must remain on file with theCounty	y of Harnett (cit	y or county ins	pection dept.).
The owner of the modular building described in paragraph 2 covered by this bond may, in addition to any other remedy t recovery of damages sustained by him.	2, who sustains any loss or da hat he may have, bring an act	mage by reaso tion in his own t	n of any act or omission name on this bond for the
It is further understood and agreed that his bond shall be operated in the liable for successive claims in excess of the bound in Witness Whereof, the above bounden parties have executed this day of, the name at	nd amount, regardless of the r s instrument under their sevel	number of clain	ns made against the bond.
these presents duly signed to be its undersigned representative, p	ursuant to authority of its gove	erning body.	ng hereto anixed and
	EJ Womack DBA Raven Roo	ck Mobile Home	e Movers
	Trasique	nature of Principa	1
	RLI Insurance Company	POHAL P	
	Surety by	(signature	
	Title	Argingu H Fal	<u></u>
	Address	Peoria, IL 6161	
	N.C. Resident Agent		owen incurance Agency Inc
Power of Attorney Attached	3	00 Carthage St inford, NC 2733	
•		Address	R3200507-9

R3200507-50,0

P.O. BOX 65 LILLINGTON, NC 27546 For Inspections Call: (910) 893-7525 Fax: (910) 893-2793 Bldq Insp scheduled before 2pm available next business day. Application Number 14-50033936 Date 3/09/15 Subdivision Name RIVERLAND ESTS II Property Zoning ERWIN Owner Contractor OWNER MCNEILL JARROD L 180 TYLER GODWIN RD BROADWAY NC 27505 Applicant -----MCNEILL JARROD LEE 2825 HOLLY SPRINGS CHURCH RD BROADWAY NC 27505 (919) 499-3109 Structure Information 000 000 40X60 3BDR MOD W/ 20X16 GARAGE Flood Zone FLOOD ZONE X Other struct info # BEDROOMS .00 SEPTIC - EXISTING? NEW TANK WATER SUPPLY COUNTY ______ Permit LAND USE PERMIT Additional desc . . 40X60 3BDR MOD Phone Access Code . 1075985 Issue Date . . . 3/09/15 Valuation Expiration Date . . 9/05/15 Permit MODULAR PERMIT Additional desc . . Phone Access Code . 1075605
Issue Date . . . 3/09/15
Expiration Date . . 3/08/16 Valuation 114382

Special Notes and Comments

T/S: 06/12/2014 02:32 PM JBROCK ---OLD STAGE RD SOUTH TO TYLER GODWIN RD

HARNETT COUNTY CENTRAL PERMITTING

Permit type	LAND USE PERMIT
999 818 999 820	Z818 PZ*ZONING INSPECTION/
Permit type	MODULAR PERMIT
10 101 20 103 20 814 30-40 119 40-50 425 40-50 125 40-50 325 40-50 225 50-60 131 50-60 429 50-60 329 50-60 229	B101 R*BLDG FOOTING / TEMP SVC POLE B103 R*BLDG FOUND & TEMP SVC POLE A814 ADDRESS CONFIRMATION B119 R*MOD MARRIAGE WALL R425 FOUR TRADE ROUGH IN R125 ONE TRADE ROUGH IN R325 THREE TRADE ROUGH IN R225 TWO TRADE ROUGH IN R131 ONE TRADE FINAL R429 FOUR TRADE FINAL R329 THREE TRADE FINAL R329 TWO TRADE FINAL R229 TWO TRADE FINAL R244 ENVIR. OPERATIONS PERMIT

09/09/11 Att: Jeniffer

Application #

14-50033936

Each section below to be filled out by whomever performing work Must be owner or iccensed contractor. Address company name & phone must match. Harnett County Central Permitting
PO Box 65 Lillington NC 27546
910 893 7525 Fax 910 893 2793 www harnett org/permits

Application for Residential Building and Trades Permit

phone must match	مرا ما م		
Owners Name Jarrod Mcneill	Date @ 3 3 15		
Site Address 180 Tyler Godwin Rd	Phone		
Directions to job site from Lillington			
Subdivision	Lot		
Description of Proposed Work OFF Frame modular	# of Bedrooms _3		
Heated SF Unheated SF Finished Bonus Room? _	Crawl Space Slab		
General Contractor information	***		
Kowen Kock MH Movers	919-775-3600 Telephone		
Building Contractor's Company Name 3335 NC Hum 87 5 Sancard NC			
Address	N / A Email Address		
3400	,		
License #			
Description of Work Hook OP Electrical Contractor Information Service Size	On Amne T-Pole Ves No.		
	910-947-2707		
Electrical Contractor's Company Name	Telephone		
3700 Huse 15-501 Carthage NC	NIA		
Address	Email Address		
17702			
License #	motham		
Mechanical/HVAC Contractor Infor	manon.		
Description of Work Hook UP Heat pum P	910-947-2207		
Mechanical Contractor's Company Name	Telephone		
3700 Huzy 15-501 Cartrage NC	NIA		
Address	Email Address		
23549			
License #			
Description of Work Hook W Witey Dewy	<u>on</u>		
	Mr. Battle		
Corolina Air Inc	Telephone		
Plumbing Contractor's Company Name 2700 H1011 15-501- Contract NC-	A)/A		
3700 HWY 15-501- Cartrage NC	Email Address		
20173			
License #			
Insulation Contractor Information			
Translation Contractor & Company Name & Address	Telephone		

*NOTE General Contractor 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 - B 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. Date			
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			
Company or Name Karren Rock MH Mareks			
Sign W/Title 04 Pasident Date 3/3/15			