

Reference Modular
10.5.38179 Application # 10.5.38178 (1)

Initial Application Date: 3.8.16

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: Angela L. Nielsen Mailing Address: 135 Bengal Blvd.
City: Barnegat State: N.J. Zip: 08005 Contact No: 732.597.1035 Email: Sojerz28@gmail.com

APPLICANT*: Angela L. Nielsen Mailing Address: 135 Bengal Blvd.
City: Barnegat State: NJ Zip: 08005 Contact No: 732.597.1035 Email: Sojerz28@gmail.com
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: _____ Phone # _____

PROPERTY LOCATION: Subdivision: Eagle/Datter SM Lot #: 8 Lot Size: 1383
State Road #: _____ State Road Name: 27W Map Book & Page: g15
Parcel: 09.9566.0084.07 PIN: 9566.02.5141
Zoning: RA20R Flood Zone: X Watershed: NA Deed Book & Page: 3328476 Power Company*: Central

*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 53 x 37) # Bedrooms 3 # Baths 3 Basement (w/wo bath) N/A 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 _____ x _____) # Bedrooms: _____ 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 28 x 30) Use: Garage Attached @ 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 underground Electric

Structures (existing or proposed): Single family dwellings: 1 Manufactured Homes: _____ Other (specify): _____

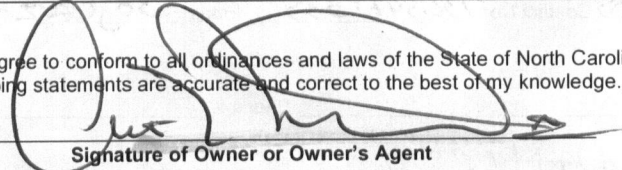
proposed modular
Comments: _____

Required Residential Property Line Setbacks:

	Minimum	Actual
Front	<u>35</u>	<u>60'</u>
Rear	<u>25</u>	<u>100+</u>
Closest Side	<u>10</u>	<u>45</u>
Sidestreet/corner lot	<u>20</u>	<u>—</u>
Nearest Building on same lot	<u>10</u>	<u>—</u>

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 27 West - Right onto Mine
Branch Dr. - Right onto Lakeridge Dr. - Lakeridge
turns into Sunridge - Follow Sunridge down until you
Reach new pavement, - property on left approx 500 Ft.

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

3/8/16
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

779.53 Ft

LOT # 8
13.83 Acres

SITE PLAN APPROVAL

DISTRICT RA20K USE modular

#BEDROOMS 3

3.8.16 djohnson

ZONING ADMINISTRATOR

1444.80 Ft

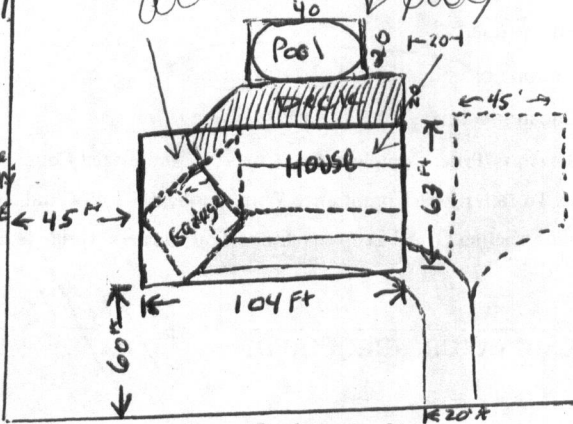
LOT # 7

1105.90 Ft

- House Building
- Driveway
- Pool
- Future Driveway or Garage
- Deck

14.5.38179
Future garage attached future pool

14.5.38178
Proposed modular



316.23 Ft

331.05 Ft

SUNRIDGE DR.

NAME: Angela L. Nielsen

APPLICATION #: 38178 ①

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 # 014401

3-8-16

Environmental Health New Septic System Code 800

- **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 **undergrowth** 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.**
- 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 **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**
- After uncovering **outlet end** 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)

Angela L. Nielsen

3/8/16
DATE

FOR REGISTRATION
Kimberly S. Hargrove
REGISTER OF DEEDS
Harnett County, NC
2015 AUG 04 09:20 AM
BK:2328 PG:476-477
FEE: \$28.00
EXCISE TAX: \$78.00
INSTRUMENT # 2015010899
SANTIS

HARNETT COUNTY TAX ID#

0998de-0084-01

8-15 BY CW



North Carolina General Warranty Deed

Excise Tax 70⁰⁰ Do NOT write above this line. Recording: Time, Book and Page

This instrument prepared by: Clyde L. Patterson
Brief description for the index: Lot 8, Eaker/Patterson
This Deed made this First day of August, 2015, by and between Grantor and Grantee.

Enter in appropriate block for each party: Name, address, county, state and if appropriate entity (i.e. corporation, partnership). The designation Grantor and Grantee as used herein shall include all parties, their heirs, successors and assigns and shall include singular, plural, masculine, feminine or neuter as required by context.

Grantor: Clyde L. Patterson, Unmarried and Michael D. Eaker, Unmarried, and Nicole R. Cain and husband, John Addison Cain, Jr.
4271 Leaflet Church Road, Broadway, NC 27505

Grantee: Angela L. Nielsen
88 First Street
Barnegat, NJ, 08005

Transfer of Ownership: Grantor, for a valuable consideration paid by Grantee, the receipt of which is hereby acknowledged, conveys to Grantee in fee simple, the Property described below:

Property: City of _____, Township of Johnsonville, County of Harnett, North Carolina.
This property was acquired by Grantor by an instrument recorded in Book _____ Page _____ County.
A map showing the property is recorded in Plat Book 2010 Page 815, Harnett County.
The legal description of the Property is:

This conveyance does not include the primary residence of the grantors herein.

Being all of Lot 8, containing 13.83 acres, as shown on a map entitled "Eaker/Patterson", dated November 19, 2010, prepared by Dowell G. Eakes, PLS, LLC and recorded in Map Book 2010, Page 815, Harnett County Registry. Reference to said map is hereby made for greater certainty of description.

Continued on Page 2

After recording mail to:
Angela L. Nielsen
88 First Street
Barnegat, NJ 08005

Tax Lot No. _____
Parcel Identifier No. _____
Verified By _____ County,
on the _____ day of _____, 2015
By _____

Continued from Page 1

UNRECORDED

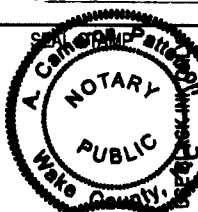
TO HAVE AND TO HOLD the said Property and all privileges and appurtenances (rights) belonging to Grantee, in fee simple.

Promises by Grantor: Grantor promises (covenants) with Grantee, that Grantor has title to the Property in fee simple; has the right to convey the title in fee simple; that the title is marketable and free and clear of all liens and encumbrances (i.e. mortgages and judgements), and Grantor will warrant and defend the title against the lawful claims of all persons, except for the following exceptions:

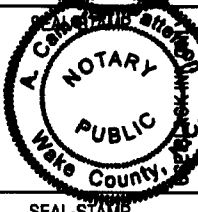
Restrictive covenants contained in instrument dated March 7, 2011, and recorded in Book 2845, Page 266, Harnett County Registry.

Signatures: Grantor has duly executed the foregoing instrument, as of the day and year first written above.

	Entity	Individual	
Name:		<u>Clyde L. Patterson</u>	(Seal)
By:		<u>Michael D. Eaker</u>	(Seal)
Title:		<u>Michael D. Eaker</u>	(Seal)
By:		<u>Nicole R. Cain</u>	(Seal)
Title:		<u>Nicole R. Cain</u>	(Seal)
By:		<u>John Addison Cain, Jr.</u>	(Seal)
Title:		<u>John Addison Cain, Jr.</u>	(Seal)



STATE OF North Carolina COUNTY OF Lee
A. Cameron Patterson, a Notary Public for said County and State, do hereby certify that
Clyde L. Patterson, Unmarried and Michael D. Eaker, Unmarried
 Grantor, personally came before me this day and acknowledged the due execution of the foregoing instrument.
 Witness my hand and official stamp or seal, this 31st day of August, 20 15
 My Commission Expires: 12/18/18 A. Cameron Patterson Notary Public



STATE OF North Carolina COUNTY OF Lee
A. Cameron Patterson, a Notary Public for said County and State, do hereby certify that
Nicole R. Cain and husband, John Addison Cain, Jr.
 Grantor, personally came before me this day and acknowledged the due execution of the foregoing instrument.
 Witness my hand and official stamp or seal, this 31st day of August, 20 15
 My Commission Expires: 12/18/18 A. Cameron Patterson Notary Public

SEAL-STAMP

ENTITY: Corporation, Limited Liability Company, General Partnership, or Limited Partnership
 STATE OF _____ COUNTY OF _____
 I, _____ a Notary Public of the County and State aforesaid, certify that
 _____ personally came before me this day and acknowledged
 that he is _____ of _____
 a North Carolina or _____ corporation / limited liability company / general
 partnership / limited partnership (strike through the inapplicable) and that by authority duly given and as an act of
 the Entity, has signed the foregoing instrument in its name and on its behalf as its act and deed.
 Witness my hand and official stamp or seal, this _____ day of _____, 20____.
 My Commission Expires: _____ Notary Public

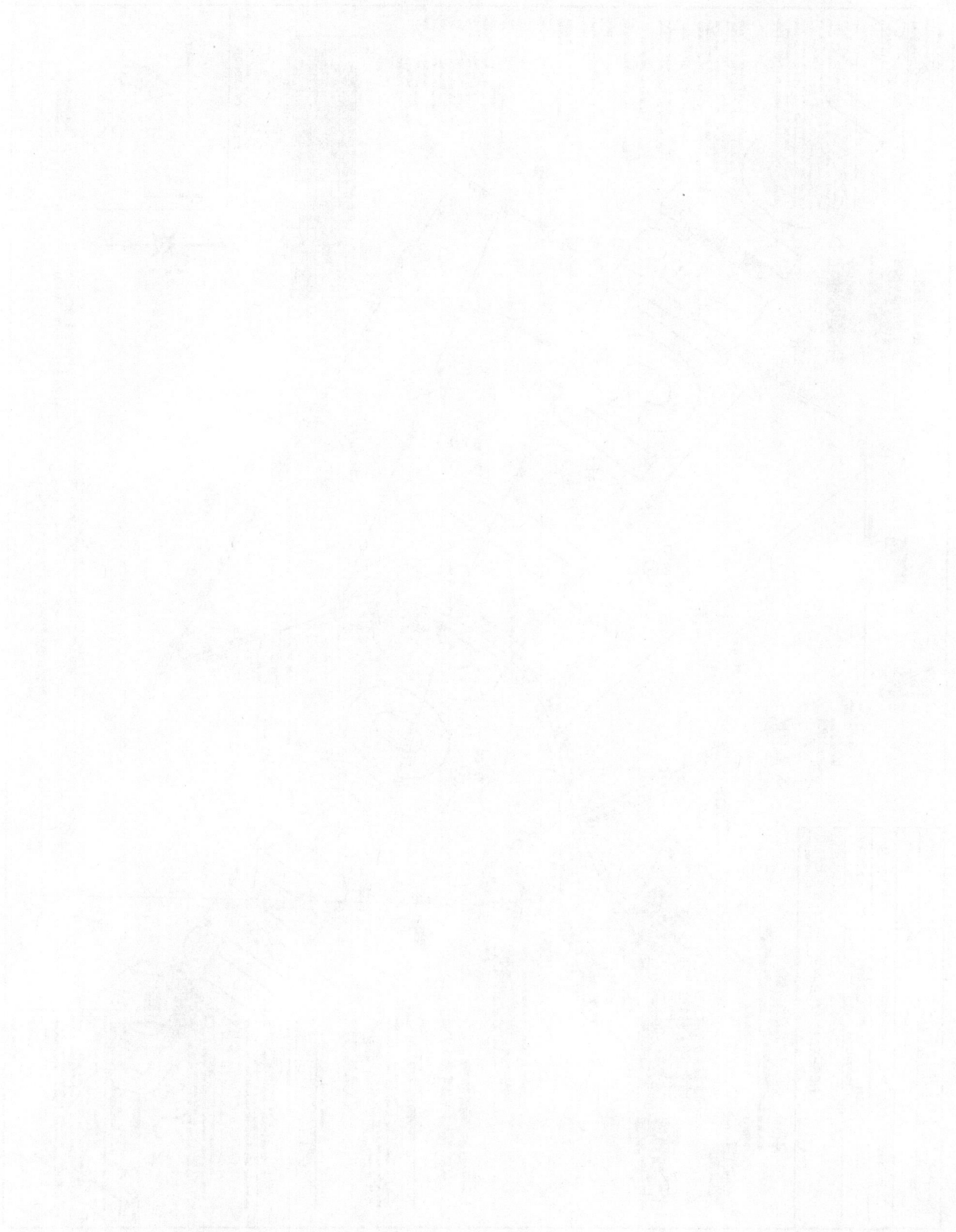
The foregoing Certificate(s) of _____

is/are certified to be correct. This instrument and this certificate are duly registered at the date and time and in the Book and Page shown on the first page hereof.

_____- REGISTER OF DEEDS FOR Harnett COUNTY

By _____ Deputy/Assistant - Register of Deeds

UNRECORDED



Harnett County Department of Public Health

Well Construction Permit Application

If the information in the application for a Well Construction Permit is *falsified, changed, or the site is altered*, then the Well Construction Permit shall become *invalid*.

APPLICANT INFORMATION

Angela L. Nielsen (732) 597-1035
Applicant/Owner Phone Number
135 Bengal Blvd. Panegat N.J. 08005
Street Address, City, State, Zip Code

The Applicant **must submit a Site Plan**. The Site Plan is a map/drawing of the property and must show:

1. existing and/or proposed property lines and easements with dimensions;
2. the location of the facility and appurtenance;
3. the location for the proposed well;
4. the location of existing or proposed sewer lines and/or sewage disposal systems within 100 feet of the proposed well;
5. the location of any existing wells within 100 feet of the property; surface water bodies;
6. above ground and/or underground storage tanks;
7. and any other known sources of contamination within 100 feet of the proposed well site.

The Applicant shall notify the Harnett County Health Director through or by way of the Harnett County Division of Environmental Health if any of the following occur prior to well construction:

1. there is a relocation of the proposed facility;
2. there is a change in the intended use of the facility;
3. there is a need for installing the waste water system in an area other than indicated on the well permit; or
4. there are landscape changed that affect site drainage.

Contact information: Environmental Health Division - 910-893-7547

PROPERTY INFORMATION

Proposed use of well

Single-Family Multifamily Church Restaurant Business Irrigation

Street Address _____ Subdivision/Lot # 8 EAKE/Patterson
Parcel # _____ PIN # _____

Directions to the Site

27 West - Right on Mine bench, Right onto Lakewood,
Follow Lakewood turns into Sunridge, Lot on ~~right~~ left
approx: 500 ft after new pavement starts

I have thoroughly read and completed this Application and certify that the information provided herein is true, complete and correct to the best of my knowledge and is given in good faith. Representatives of the Harnett County Health Department and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable rules.

I understand that I am solely responsible for the proper identification and labeling of all property lines, underground utility lines, and making the site accessible so that a well can be properly constructed according to the permit.

Angela L. Nielsen
Property Owner's or Owner's Legal Representative Signature Required
3/8/16
Date

Marion County Board of Commissioners

Resolution

Whereas, the Board of Commissioners of Marion County, Oregon, has received a request from the Board of Directors of the Marion County Chamber of Commerce for the purpose of...

RESOLUTION

Resolved, That the Board of Commissioners of Marion County, Oregon, do hereby...

The Board of Commissioners of Marion County, Oregon, do hereby...

RESOLUTION

Resolved, That the Board of Commissioners of Marion County, Oregon, do hereby...

The Board of Commissioners of Marion County, Oregon, do hereby...

Attest: My hand and seal of office this 15th day of August, 1910.
[Signature]

Application Number	16-50038178	Page	2
Property Address	94016 *UNASSIGNED	Date	3/18/16
PARCEL NUMBER	09-9566- - -0084- -07-		
Application description	CP MODULAR HOME		
Subdivision Name	JAMES C & CLIFTON BURGESS		
Property Zoning	PENDING		

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
Permit type LAND USE PERMIT					
999	818	Z818	PZ*ZONING INSPECTION	_____	___/___/___
999	820	Z820	PZ*ZONING/FINAL INSPECTION	_____	___/___/___
Permit type MODULAR PERMIT					
10	101	B101	R*BLDG FOOTING / TEMP SVC POLE	_____	___/___/___
20	103	B103	R*BLDG FOUND & TEMP SVC POLE	_____	___/___/___
20	814	A814	ADDRESS CONFIRMATION	_____	___/___/___
20-50	163	C163	C*BLDG FLOOR FRAMING	_____	___/___/___
30-40	119	B119	R*MOD MARRIAGE WALL	_____	___/___/___
40-50	425	R425	FOUR TRADE ROUGH IN	_____	___/___/___
40-50	125	R125	ONE TRADE ROUGH IN	_____	___/___/___
40-50	325	R325	THREE TRADE ROUGH IN	_____	___/___/___
40-50	225	R225	TWO TRADE ROUGH IN	_____	___/___/___
50-60	131	R131	ONE TRADE FINAL	_____	___/___/___
50-60	429	R429	FOUR TRADE FINAL	_____	___/___/___
50-60	329	R329	THREE TRADE FINAL	_____	___/___/___
50-60	229	R229	TWO TRADE FINAL	_____	___/___/___
999		H824	ENVIR. OPERATIONS PERMIT	_____	___/___/___
999		H828	ENVIRO. WELL PERMIT	_____	___/___/___
Permit type TEMPORARY ELECTRICAL PERMIT					
999	207	E207	R*ELEC TEMP SERVICE POLE	_____	___/___/___
999	267	E267	C*ELEC TEMP SERVICE POLE	_____	___/___/___

HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

LILLINGTON, NC 27546

For Inspections Call: (910) 893-7525 Fax: (910) 893-2793

Bldg Insp scheduled before 2pm available next business day.

Application Number	16-50038178	Date	3/18/16
Property Address	94016 *UNASSIGNED		
PARCEL NUMBER	09-9566- - -0084- -07-		
Application type description	CP MODULAR HOME		
Subdivision Name	JAMES C & CLIFTON BURGESS		
Property Zoning	PENDING		

Owner

Contractor

NIELSON ANGELA L
88 FIRST STREET
BARNEGAT NJ 08005

OWNER

----- Structure Information 000 000 -----

Flood Zone	FLOOD ZONE X		
Other struct info	# BEDROOMS		.00
	SEPTIC - EXISTING?	NEW	
	WATER SUPPLY	WELL	

Permit LAND USE PERMIT

Additional desc

Phone Access Code 1131325

Issue Date 3/18/16

Expiration Date 9/14/16

Valuation 0

Permit MODULAR PERMIT

Additional desc

Phone Access Code 1131317

Issue Date 3/18/16

Expiration Date 3/18/17

Valuation 0

Permit TEMPORARY ELECTRICAL PERMIT

Additional desc

Phone Access Code 1131333

Issue Date 3/18/16

Expiration Date 3/18/17

Valuation 0
