

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546

Telephone Number

910-893-4759

Application for ~~Environmental Health Improvement~~ Permit in Areas Zoned by Municipalities

03-5-6522

Existing Jack

Landowner Information:

Name: BONNIE O. PARSONS

Address: 590 JUNNY Rd
Angier, NC 27501

Phone: 919-639-2967

Applicant Information:

Name: same

Address: _____

Phone: _____

Property Location:

E911 Address: 590 JUNNY Rd, Angier, NC 27501

PIN or Parcel #: _____

State Road #: _____ Lot/Tract Size: _____

Subdivision: _____ Lot #: _____

Give Specific directions to the property from Lillington: 210 to Angier

TURN Left on DUNN St. Go to end of DUNN ST.
TURN Right on JUNNY Rd. - 1/2 mile on Left Right.

Proposed Use:

() Single Family Dwelling (Size X) # of Bedrooms _____
Basement _____ Basement w/plumbing _____ Deck _____

(per phone call)

() Multi-Family Dwelling - # of Units _____ # of Bedrooms/Units _____

() Manufactured Home (Size X) # of Bedrooms _____ Garage _____
Deck _____

() Number of Persons per Household 2

() Business -- Square Footage Retail Space _____ Type _____

() Industry -- Square Ft. _____ Type _____

() Home Occupation - # of Rooms/Size 1 160"X140" Use Beauty Salon

() Addition to Existing Building -- Size _____ Use _____

() Other Enclosing Back Porch

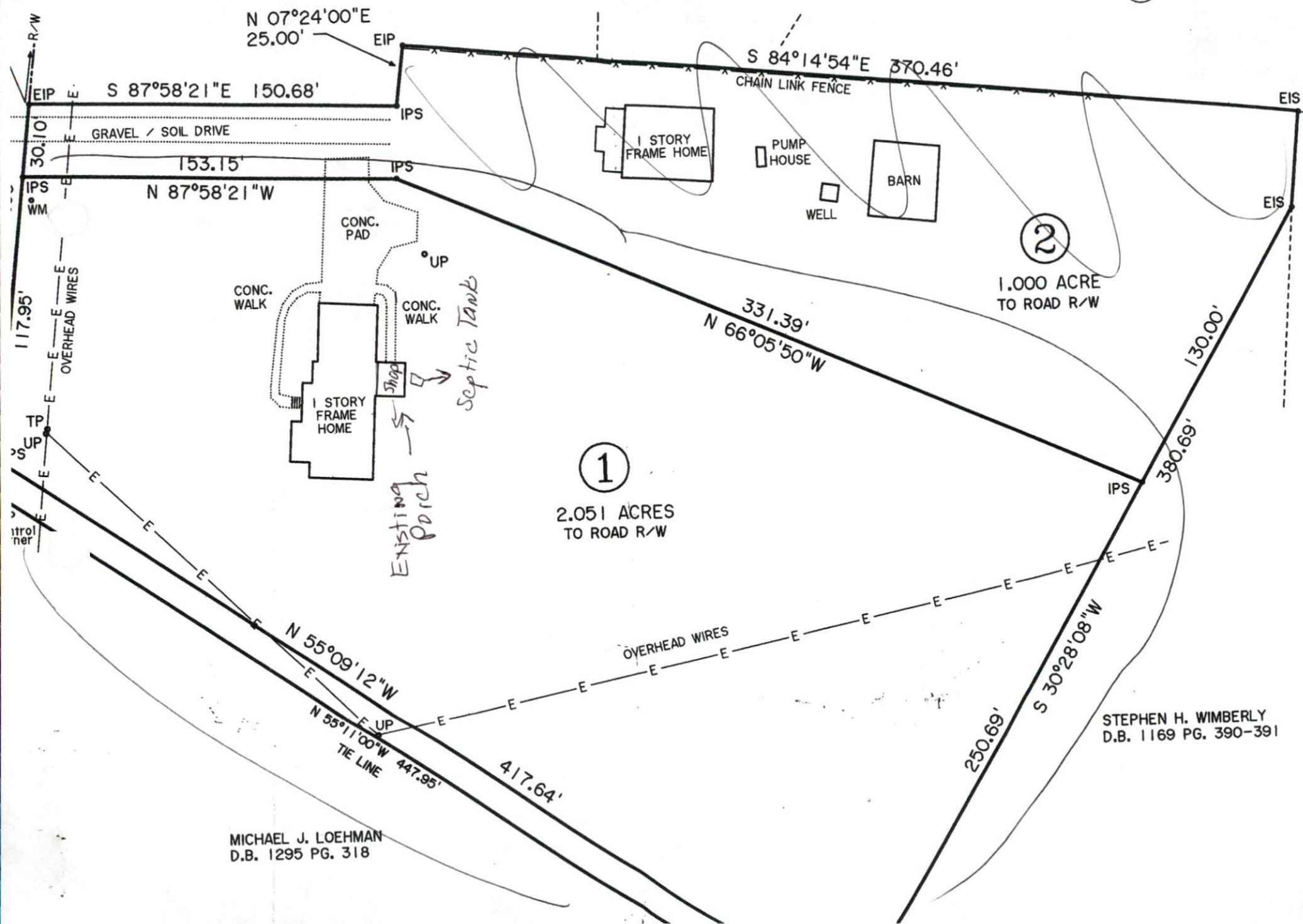
Water Supply: () County () Well (☒ Other City)

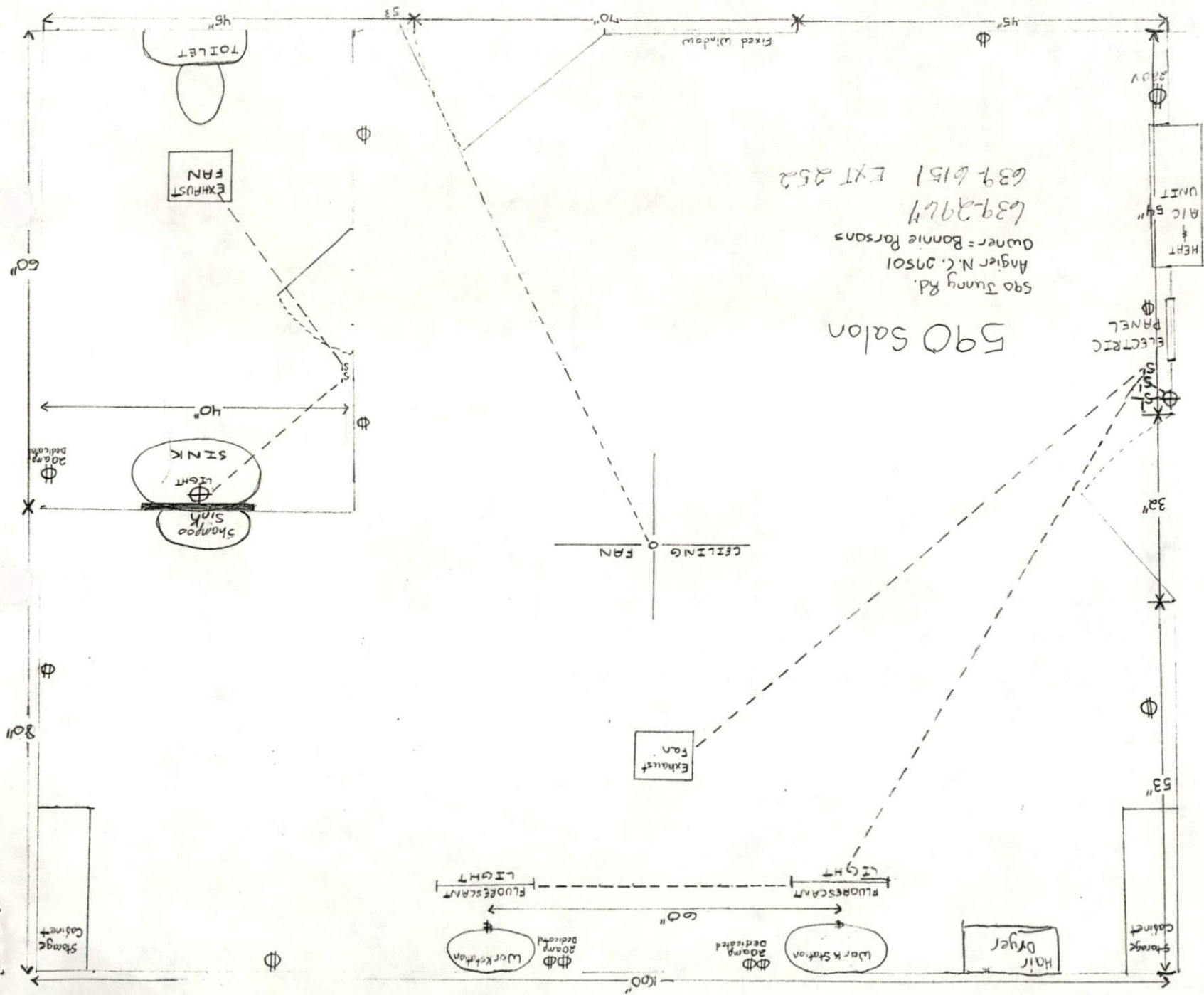
Sewer: () New Septic Tank (☒ Existing Septic Tank () Revision () Sewer

Applicant's Signature Bonnie O. Parsons

B. VIOLA STEPHENSON
D.B. 1140 PG. 640

DEER HAVEN SUBDIVISION
PLAT CAB. F SLIDE 507D





Parking Area

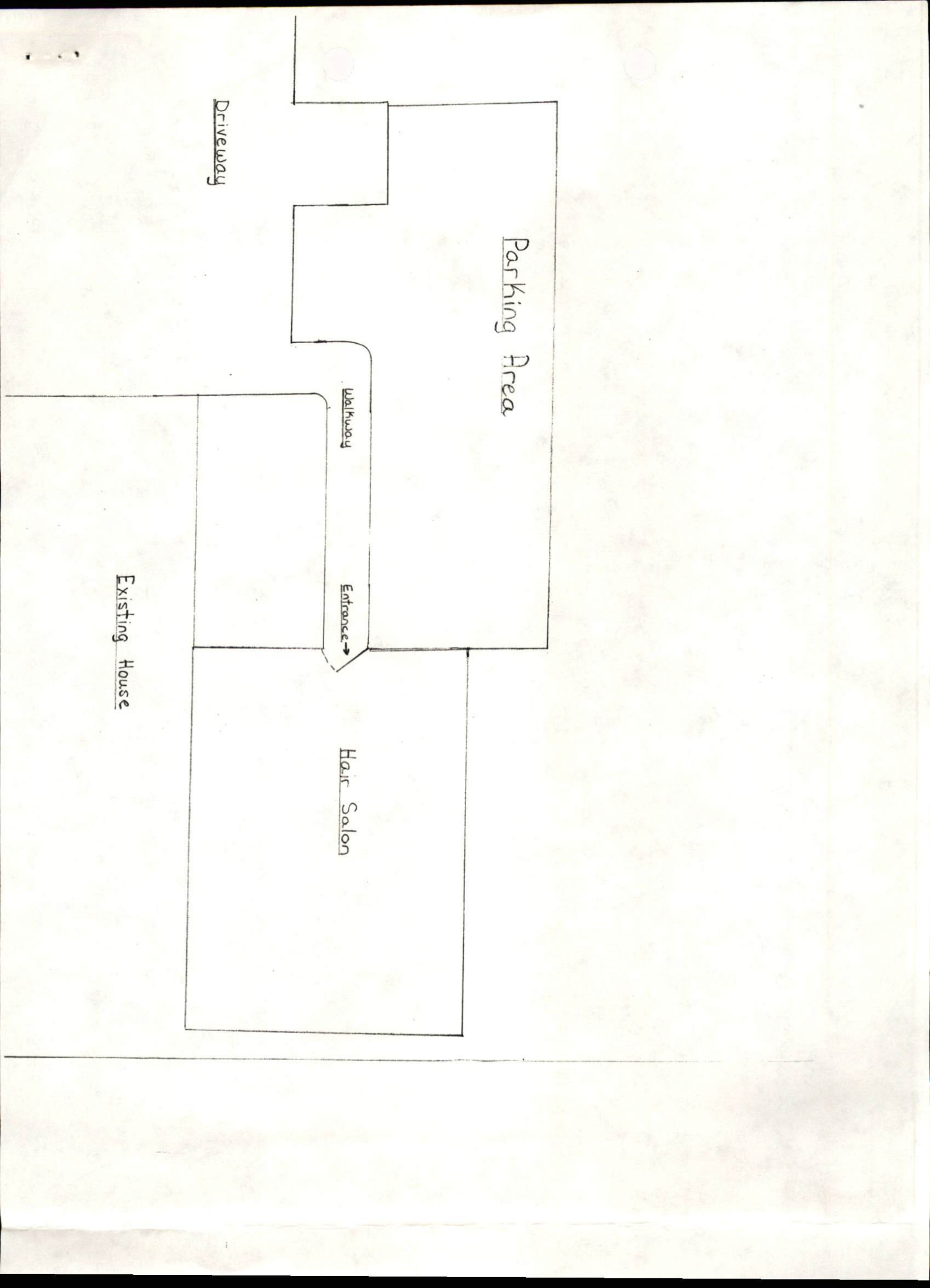
Walkway

Entrance →

Hair Salon

Driveway

Existing House



LAND USE AND PROPERTY DESCRIPTION
TOWN OF ANGIER, N. C.

APPLICATION FOR :

- | | |
|---|---|
| <input type="checkbox"/> Improvement permit | <input type="checkbox"/> Zoning of Property |
| <input type="checkbox"/> Mobile Home lot | <input type="checkbox"/> Subdivision Approval |
| <input type="checkbox"/> Conditional Use | <input type="checkbox"/> Mobile Home Park |
| <input type="checkbox"/> Parking permit | <input type="checkbox"/> Grading permit |
| <input type="checkbox"/> Satellite Dish Antenna | <input type="checkbox"/> Temporary permit |
| <input type="checkbox"/> Signs | <input type="checkbox"/> Special Use _____ |
| <input type="checkbox"/> Fences | <input checked="" type="checkbox"/> Other <u>In home business</u> |

APPLICANT:

Name Bonnie Parsons
Address 590 Junny Rd
Angier NC 27501
Phone 639-6151- ext 252

OWNER:

Name Same
Address _____
Phone 639-2967

PRESENT USE OF PROPERTY SFO

LOCATION OF PROPERTY 590 Junny Rd Angier NC.

PROPOSED USE OF PROPERTY

- ☐ Single Family Dwelling : # Rooms _____ # Bedrooms _____ Square feet _____
- ☐ Multi Family Dwelling: # of units _____ #Bedrooms (per unit) _____
square feet (per unit) _____
- ☐ Mobile Home (single lot): single wide _____ double wide _____
- ☐ Mobile Home Park: Section 16, Zoning Ordinance must apply
- ☐ Business: total # of employees per day _____
Type of business _____
- ☒ Others (specify) In home Beauty Salon
- ☐ Existing structure _____ Renovate _____ Addition _____
Demolish _____

Attach site plan showing property lines, location of proposed structures (including driveways, ratios, decks, etc.) and any existing structure.

WATER & SEWER SUPPLY:

	WATER	SEWER
Private	_____	<input checked="" type="checkbox"/> _____
Public	<input checked="" type="checkbox"/> _____	_____
Proposed	_____	_____
Existing	_____	_____

APPLICANT: I certify that all of the statements made in this application and any attached documents are true, complete and correct to the best of my knowledge and belief and are made in good faith. I understand that false information may be grounds for rejection of this application. Authorized Inspection Department Representatives are granted right of entry to make evaluations or inspections and to release information upon public request.

Bonnie Parsons
Signature

2-20-03
DATE

nett County Planning Department
Central Permitting
PO Box 65, Lillington, NC 27546
910-893-4759

03-5-6522

In order to provide the best customer service, Central Permitting staff compiled a list of procedures that helps to ensure successful permitting processes. Please follow steps necessary to expedite your plans.

☐ Environmental Health New Septic Systems Test

- Place "property flags" in each corner of lot. All property lines must be clearly flagged approximately every 50 feet between corners.
- Place "house corner flags" at each corner of where the house/manufactured home will sit. Use additional flagging to outline driveways, garages, decks, out buildings, swimming pools, etc.
- Place flags at locations as developed on site plan by Customer Service Technician and you.
- Place Environmental Health "orange" card in location that is easily viewed from road.
- 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. *No grading of property should be done.*
- After preparing proposed site telephone Environmental Health @ 893-7547 for questions on soil evaluation and confirmation number. Environmental Health will not begin soil evaluations until you call for confirmation number. Environmental Health is the source for all matters concerning testing and scheduling once application is completed at Central Permitting.

☒ Environmental Health Existing Tank Inspections

- Place Environmental Health "orange" card in location that is easily viewed from road.
- Prepare for inspection by removing soil over door as diagram indicates. Loosen trap door cover.
- After preparing trapdoor call Environmental Health @ 893-7547 for confirmation number. Please be prepared to answer the following - The applicant's name, physical property location and the last four digits of your application number.

☐ Fire Marshal Inspections

- Call Fire Marshal's office @ 893-7580 for all inspections.
- Prior to requesting final Building Inspection call Fire Marshal's office @ 893-7580 for inspection.
- Pick up Fire Marshal's letter and place on job site until work is completed.

☐ Public Utilities

- Please stake with "orange" tape/name thirty feet (30) from the center of the road at the location you wish to have water tap installed.
- Allow four to six weeks after application for water/sewer taps. Call Utilities at 893-7575 for technical assistance.

☐ Building Inspections

- Call Building Inspections @ 893-7527 to request any inspection.
- For new housing/set up permits ensure you meet E 911 / Addressing prior to calling for final inspection.

☐ E911 Addressing

- Address numbers must be mounted on the house, 3 inches high (5" for commercial).
- Numbers must be a contrasting color from house, must be clearly visible night and day.
- At entrance of driveway if home is 100 ft or more from road, or if mailbox is on opposite side of road.
- Call E911 Addressing @ 814-2038 for any questions.

Applicant Name: (Please Print) Bonnie O. PARSONS

Applicant Signature: Bonnie O. Parsons Date 2-21-03

ZONING ADMINISTRATOR USE ONLY

The above property is located in RA-30
zoning district and will be used as In home
Beauty Salon.

NOTES: _____

PERMIT # 03-015

ZONING ADMINISTRATOR _____

DATE 2-18-03

SATISFACTION: The indebtedness secured by this Deed of Trust together with the instrument(s) secured thereby has/have been satisfied in full. This the _____ day of _____, 19____.

FIRST-CITIZENS BANK & TRUST COMPANY
By _____
(Signature of Officer & Title)

NOTICE TO REGISTER OF DEEDS: Please cancel this instrument and return to the following address:

Name: _____

Address: _____

Zip Code: _____

Tax Lot No. _____

Verified by _____

by _____

Carolyn L. Parker, Assistant Vice President

First-Citizens Bank & Trust Company

Mail after recording to _____

THIS INSTRUMENT AND RETURN TO THE FOLLOWING ADDRESS:

This instrument prepared by _____

Brief description for the Index _____

LED
BOOK 078 PAGE 652-656

'94 DEC 14 PM 3 41

GAYLE P. HOLDER
REGISTER OF DEEDS
HARNETT COUNTY, NC

Recording: Date, Time, Book and Page

CANCELLED
9/28 2001

KIMBERLY S. HARGROVE
REGISTER OF DEEDS

BY _____
Register of Deeds/Asst. Deputy

NORTH CAROLINA (FUTURE ADVANCE) DEED OF TRUST

THIS DEED of TRUST made this 8th day of December, 19 94, by and between:

TRUSTOR	TRUSTEE	BENEFICIARY
Bonnie O. Pope P.O. Box 4 Angier, NC 27501	W. Sherwood Blackwood	FIRST-CITIZENS BANK & TRUST COMPANY Retail Loan Administration PO Box 26592 Raleigh, NC 27611

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

The designation Trustor, Trustee, and Beneficiary as used herein shall include said parties, their heirs, personal representatives, successors, and assigns, and shall include singular, plural, masculine, feminine or neuter as required by context.

COLLATERAL IS OR INCLUDES FIXTURES.

☐ If this box is marked, this Deed of Trust secures an obligation incurred for the construction of an improvement on land.

WITNESSETH

WHEREAS, Trustor is indebted or is to be indebted to Beneficiary in the maximum principal sum of Thirty Three Thousand

and no/100----- Dollars (\$ 33,000.00), which is the maximum principal amount, including present and future obligations, if any, which may be secured by this Deed of Trust at any one time, such indebtedness being evidenced by a: (Either (A), (B) or (C) below must be selected. The options not selected are not applicable and are deleted.) THE TERMS OF THE INSTRUMENT EVIDENCING THE INDEBTEDNESS SECURED HEREBY MAY BE MODIFIED FROM TIME TO TIME BY AGREEMENT BETWEEN THE PARTIES THERETO INCLUDING, BUT NOT LIMITED TO, A MODIFICATION TO INCREASE THE INTEREST RATE, TO CHANGE THE PAYMENT AND/OR PAYMENT SCHEDULE, AND/OR TO EXTEND TIME FOR THE PAYMENT OF SUCH INDEBTEDNESS; AND SUCH INSTRUMENT AS SO MODIFIED SHALL CONTINUE TO BE SECURED HEREBY AND WITH A PRIORITY AS OF THE DATE OF RECORDATION OF THIS DEED OF TRUST.

(A) ☐ Note dated _____, 19____ or if date omitted, of even date herewith, payable with interest as specified therein; and

(B) ☐ Note dated _____, 19____, or if date omitted, of even date herewith, payable with interest as specified therein; and THIS DEED OF TRUST SECURES FUTURE ADVANCES; and the amount presently secured by this Deed of Trust is (insert amount

advanced at closing): (if none state "0") _____

NORTH CAROLINA
and f HARNETT COUNTY

RECEIVED AND CANCELLED on the date hereof; and

(C) ☐ Note dated _____, 19____, or if date omitted, of even date herewith, payable with interest as specified therein; and THIS DEED OF TRUST SECURES FUTURE ADVANCES; and the amount presently secured by this Deed of Trust is (insert amount advanced at closing): (if none state "0") _____

dated _____
which _____
Chap _____

I herewith cancel the same of record under and by virtue contained in G.S. 45-37 (a) (2) of the General Statutes of North Carolina

FOR REGISTRATION REGISTER OF DEEDS
KIMBERLY S. HARGROVE
HARNETT COUNTY, NC
2001 SEP 28 11:41:04 AM
BK: 1543 PG: 224-227 FEE: \$0.00
INSTRUMENT # 2001016791

able with interest as specified therein, earned by the provisions of Article 9 of Trust may be incurred within a period