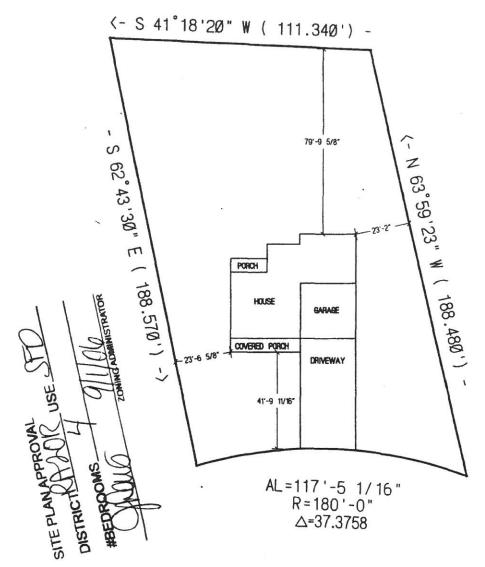
Initial Application Date: 8/30/06			Applica	ation # <u>8650</u>	015673
Central Permitting 108 E. Front Street, Lillin		HARNETT LAND US Phone: (910) 893	E APPLICATION -4759 Fax: (9	/2 910) 893-2793	70010 www.harnett.org
City: Dunn					
APPLICANT: (Same as above)					
City:	State	zip	riloile #		
PROPERTY LOCATION: SR #: 1201 Parcel: 099567 0006 25 Zoning: RA 20R Subdivision: Caroli Flood Plain: Panel: 75	na Seasons Watershed: N	A Deed Book/F	Lot #:	38 Plat Book	
DIRECTIONS TO THE PROPERTY FROM LILI	INGTON:	Awlina So		2 StrAis	ht Toward
PROPOSED USE: SFD (Size 54 x 51) # Bedrooms 4 Multi-Family Dwelling No. Units Manufactured Home (Size x) # Number of persons per household 5PE Business Sq. Ft. Retail Space Industry Sq. Ft	No. Bedrooms Of Bedrooms Kitchen # Rooms Use	ooms/Unit Garage Type _ Type _ Use	Deck		
Additional Information: Water Supply: (County () Well (Note Sewage Supply: () New Septic Tank () Expension & Sedimentation Control Plan Required? Property owner of this tract of land own land that Structures on this tract of land: Single family dwarf of Required Residential Property Line Setbacks.	xisting Septic Tank YES NO contains a manuface	County Sewer	() Other nundred feet (500')		
f permits are granted I agree to conform to all	Nearest Building	10laws of the State of I	North Carolina regu	lating such work and	d the specifications or
plans submitted. I hereby swear that the foregoin					
MINTALLI //			1212	1	

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

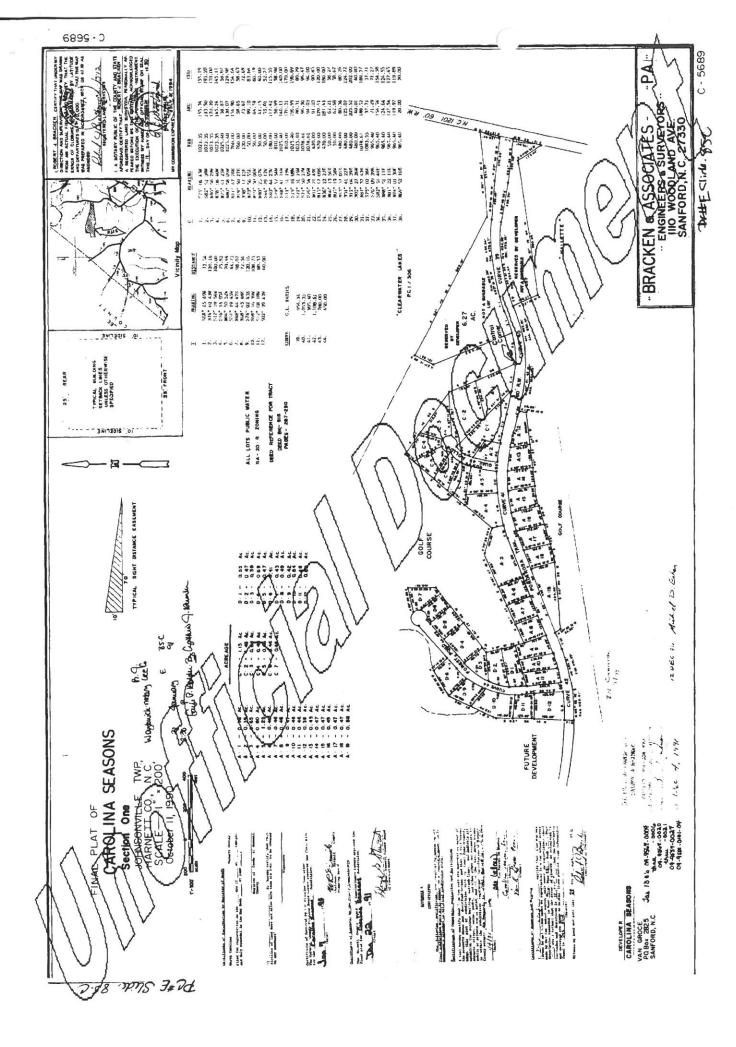
Signature of Owner or Owner's Agent

A RECORDED SURVEY PLAT AND RECORDED DEED ARE REQUIRED WHEN APPLYING FOR A LAND USE APPLICATION



QUAIL HOLLOW

JASON PRICE CONST. INC.
THE HALE
LOT #6 CAROLINA SEASONS
SCALE: 1"=40'



/. / .	
HARNETT COUNTY TAX ID#	FOR DESIGNATION OF DEALERS OF DEALES.
	and the 41 day, Ad. Mr. City
19-9567-DW-25	MX: 7250 PG: 301-303 PEE: \$17.00 NC NEV STNIP: \$35.00 LISTRUPEN 1 2000112934
V//	HETRIFEIT A 20061/2004
TOTAL BY LIND	State and an analysis of the state of the st
Revenue: 36,00 Tax Lot No.: Percel identifier No 999567 60	ne es
Verified by Coultry on the day	of, 2008
by	
Mail after recording to Grantes	
This instrument was prepared by Lyma A. Mutthew	e, Attorney at Law
((3)	
Brief Description for the IndeX Lots Co. Car	olina Seasons
MORTH CAROLINA	GENERAL WARRANTY DEED
THIS DEED made this O'T day of day, 2006, t	oy erit setwoen
GRANTOR	GRANTEE
RONALD E. ROWELL	JABON FRICE CONSTRUCTION, INC.
and wife, AMDREA T. ROWELL	a North Carolina Corporation
ARDREA I. NOWELL	$V \wedge 1$
P.O. Box 1030,	121 Green Poyest Circle, Dunn, NC 28834
Lemar, AR 72846	Dilmo, NC 28834
,	
	-(C)
The designation Grantor and Grantos as used he assigns, and shall include singular, plural, mescu	rein shall inteletie said parties, their heirs, successors, and fine, feminine or weuter all-required by contest.
WITNESSETH that the Constant for a valuable	- Care Day
hereby ecknowledged, hee and by these presents simple, all that certain lot or parcel of send shaded	cose grant, bargain, sell and convey unto the Grantee in fee in Security, Hamest Soundy, North Carolina and
more particularly described as follows:	The second of th
DEDICAL ALL ALC C.	
January 28, 1981, prepared by Robert Bracks	ded "Final Plut of Caroling Seasons, Section I dated in Registered Surveyor and reportful in Map Book E,
particular description of the property hereby (co is hereby made to daild recorded map for a more conveyed.
This property is conveyed subject to restrictly	re covenants and conditions as set out in instrument
recorded in Book 928, Page 298, Harnett Coun	ty Registry.
	$(\wedge \vee)$
	14//
N.C. Bur Assoc. Form No. 7 * 1977 Printed by Agrament with the N.C. Ber Assoc. 2009	

OWNER NAME: JOSON Price Const, Inc. APPLICATION #: 1050150
This application to be filled out only when applying for a new septic system. 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)
DEVELOPMENT INFORMATION
New single family residence
Expansion of existing system
Repair to malfunctioning sewage disposal system
Non-residential type of structure
WATER SUPPLY
G New well
C Existing well
Community well .
Public water
□ Spring
Are there any existing wells, springs, or existing waterlines on this property? [_] yes {\infty} no {_} unknown
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
(X) Conventional (_) Any
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 [X] NO Does The Site Contain Any Jurisdictional Wetlands?
{}}YES { ■ NO Does The Site Contain Auy Existing Wastewater Systems?
[_]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 [X] NO Are There Any Easements Or Right Of Ways On This Property?
· San Carlotte Control of the
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
REPERSONNEEL. PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED) DATE