Godna	SCANNED		
Initial Application Date: F // OF	DATE	Application # 08 500 20	
Central Permitting 108 E. Front Street, Lillington, NC	, ,	ND USE APPLICATION 7525 Fax: (910) 893-2793	-,
LANDOWNER: WYNN CONSTRUCTION	Mailing Address	1696 Hager Pd.	
City: Cred nour State: NC	Zip: 275 Home #: 919	54134 ) Contact #: 9	19 416 5580
APPLICANT: Some abone	Mailing Address		<del></del>
City:State:*Please fill out applicant information if different than landowner	_Zip:Home #:	Contact #:	
CONTACT NAME APPLYING IN OFFICE: Terry			
PROPERTY LOCATION: Subdivision: Tin you's			
State Road #: State Road Name:			
Parcel: 039576 095883	PIN: 9597	35 1132-000	
Zoning: Flood Zone: Watersh	ed Deed Book & Pan	e· / Power Comr	vaun.
· ·	room as a bedroom if it has a clos	·	Circle:
SFD (Size <u>V9 x V8</u> ) # Bedrooms <u>3</u> # Balls	s_2 Basement (w/wo bath) _/	No Garage Ver Deck No	Crawl Space / Slab
Q Mod (Size x ) # Bedrooms # Baths			
☐ Manufactured Home:SWDWTW (\$ ☐ Duplex (Sizex) No. Buildings			CK(Site Dutit?)
☐ Home Occupation # Rooms Use			mployees
Addition/Accessory/Other (Sizex) Use			
*Homes with Progress Energy as service provider need	to supply premise number from Pr	rogress Energy	
Water Supply: County Well (No. dwelling Sewage Supply: New Septic Tank (Complete New Property owner of this tract of land own land that contain Structures (existing or proposed): Single family dwelling	v Tank Checklist) () Existing a manufactured home w/in five		? (_)YES (_)NO
Required Residential Property Line Setbacks:	Comments:		
Front Minimum 35 Actual VO			
Rear 25 8165			
Closest Side /0 2778			
Sidestreet/corner lot 20 2767			
Negroot Building			

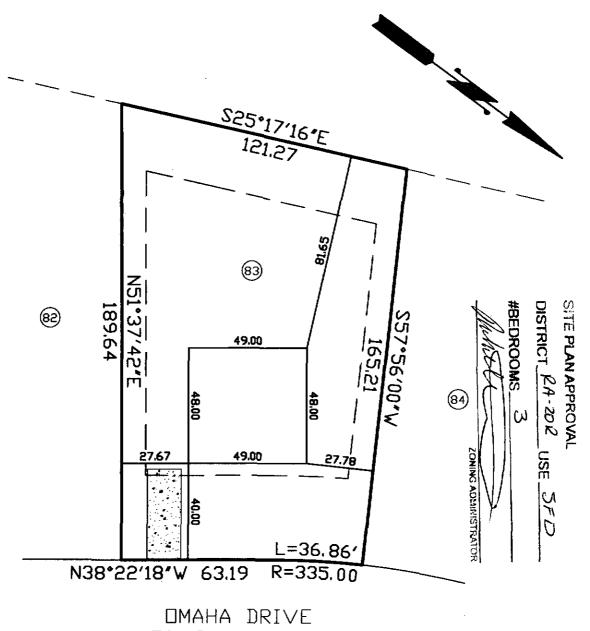
If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted. I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

Signature of Owner or Owner's Agent

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



50' PUBLIC R/W

THUS MAP YAS PREPARED FROM RECORDED DATA, AS NOTED, AND FROM OTHER SOURCES PROVIDED BY THE DIVINER. THUS IS A PRELIDIONARY STEP FLAM, INTENDED FOR PLANDING USE DIALY AND IN NO VAY REPRESENTS A SURVEY NADE BY THUS COMPANY, THUS MAP IS NOT INTENDED FOR RECORDATION, CONVEYANCES, OR SALES.

Charlie T. Carpenter, P.L.S. Professional Land Surveyor 1940 Juniper Church Road Four Oaks, NC 27524 (919) 963-2909 (919) 320-5281

PRELIMINARY SITE PLAN FOR:

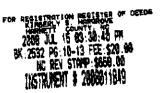
YNN CONSTRUCTION

PIN 9597-35-1132.000 PARCEL ID 039576 0088 83 LDT 83 TINGEN POINTE S/D PB2007 PG711-718 8/18/08 1"=40"

476 DMAHA DRIVE BRDADWAY, NC 27505



MARNETT COUNTY TAX IN
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Excise	Tav	***	۸n

Recording Time, Book and Page

a Lot No.	Parcel Identifier No: OUT OF 039576-0088
rified by County on the	_day of, 20
all after recording to Bain, Buzzard & Me	CRae, LLP, Attorneys at Law, 65 Bain Street, Lillington, NC 27546 (cRae, Attorney at Law, 65 Bain Street, Lillington, NC 27546
us instrument was prepared by David F. M	IcRae, Attorney at Law, 65 Bain Street, Lillington, NC 27546
iall after recording to Bain, Buzzard & Me his instrument was prepared by David F. M Brief Description for the index:	IcRae, Attorney at Law, 65 Bain Street, Lillington, NC 27546

## NORTH CAROLINA GENERAL WARRANTY DEED

THIS DEED made this 11th day of July, 2008 by and between

GRANTOR

THE HARNETT LAND GROUP, LLP, a North Carolina Limited Liability Company AND JERRY CUMMINGS AND KENNETH CUMMINGS T/A CUMMINGS BROTHERS ENTERPRISES and their wives, SYLVIA D. CUMMINGS AND MARY GLADYS CUMMINGS Post Office Box 326
Zebulon, North Carolina 27597

GRANTER

WYNN CONSTRUCTION, INC

1696 Hayes Road Creedmoor, North Carolina 27522

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 Barbeeue Township, Harnett County, North Carolina and many particularly described as follows:

BEING ALL OF LOT NUMBERS 34, 38, 39, 46, 42, 48, 49, 50, 57, 58, 59, 60, 82 AND 83, TINGEN POINTE SUBDIVISION, AS SHOWN UPON TILAT PLAT OF SURVEY ENTITLED "SUBDIVISION PLAT OF TINGEN POINTE SUBDIVISION, PHASE 1, 2A & 3A", PREPARED BY THE CHANDLER GROUP, DATED JUNE 15, 2007, AND AFPEARING OF RECORD AS A PLAT CONSISTING OF SEVEN SHEETS AT MAP NUMBER 2007 - 711-718, HARNETT COUNTY REGISTRY. REFERNECE TO SAID PLAT BEING HEREBY MADE FOR A GREATER CERTAINTY OF DESCRIPTION.

THESE LOTS ARE CONVEYED SUBJECT TO THOSE CERTAIN RESTRICTIVE COVENANTS AS APPEAR OF RECORD IN DEED BOOK 2436, PAGE 548, HARNETT COUNTY REGISTRY.

THIS BEING A PORTION OF THAT CERTAIN PROPERTY AS CONVEYED TO THE HARNETT LAND GROUP, ET AL, BY DEED FROM JOHN J. LYON, ET AL, DATED JULY 21, 2006, AND APPEARING OF RECORD IN DEED BOOK 2257, PAGE 94, HARNETT COUNTY REGISTRY.

\*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.

SEPTI If apply		tion 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 app question	plicant shall notif n. If the answer	by the local health department upon submittal of this application if any of the following apply to the property in is "yes", applicant must attach supporting documentation.
{}}YE	S (L)NO	Does the site contain any Jurisdictional Wetlands?
{}}YE	S (L) NO	Do you plan to have an <u>irrigation system</u> now or in the future?
{}}YE	S INO	Does or will the building contain any drains? Please explain
()YE	S I_VNO	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
{}}YE	s (1) NO	Is any wastewater going to be generated on the site other than domestic sewage?
{ <u></u> }YE	s (∠) NO	Is the site subject to approval by any other Public Agency?
{}}YE	S INO	Are there any easements or Right of Ways on this property?
{}}YE	S (V) 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

OWNER NAME: Wynn last who

APPLICATION #: 08 50020785

\*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)

DEVEL	<u>OPMENT IN</u>	<u>FORMATION</u>	
a Nev	v single family	residence	
Q Exp	Expansion of existing system		
□ Rep	air to malfunct	ioning sewage disposal system	
□ Nor	-residential typ	ne of structure	
WATE	SUPPLY	<del></del>	
□ Nev	well		
□ Exis	ting well		
□ Com	munity well	·	
Publ	ic water		
🗆 Spri	ng		
		rells, springs, or existing waterlines on this property?	
{}} yes	1_ no {_	_} unknown	
SEPTIC	<i>a</i>		
		ion to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.	
{}} Ac	•	Innovative	
	ernative	{} Other	
	rventional	{}} Any	
ine appli question.	cant shall notify If the answer i	y the local health department upon submittal of this application if any of the following apply to the property in s "yes", applicant must attach supporting documentation.	
}YES	NO NO	Does the site contain any Jurisdictional Wetlands?	
}YES	1_1NO	Does the site contain any existing Wastewater Systems?	
}YES	(_ANO	Is any wastewater going to be generated on the site other than domestic sewage?	
}YES	1_NO	Is the site subject to approval by any other Public Agency?	
}YES	(INO	Are there any easements or Right of Ways on this property?	
}}YES	{	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.	
Have Res	d This Applicat	ion And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And	
tate Offic	ials Are Grante	Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules	

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PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

SISON DATE