Initial Application Date: 1/-6-08 COUNTY OF HARNETT LAND USE APPLICATION Fax: (910) 893-2793 108 E. Front Street, Lillington, NC 27546 www.hamett.org Phone: (910) 893-7525 LANDOWNER: WYNN CONSTRUCTION Mailing Address: 2550 Capital Dr. Sude 105 State: NC Zip: 27505 Home # 919 528 134) Contact # 919 476 5760 Mailing Address: Sane as a hove APPLICANT: WYNN Contraction Zip:_____Home #: State: City: PROPERTY LOCATION: Subdivision: Pigner Farms Lot #: 14 Lot Size: 574 Parcel: 1305/9 0/19 23 PIN: 05/9 37 9/9/. 000

Zoning: RA3U Flood Plain: X Panel: Watershed: NA Deed Book&Page: 2430/58 Map Book&Page: PB 2007 PG-50/ 23 PIN: 05/9 37 9/5/. OW SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 79Ke Old UK 421 from Lillington anto Adrock Ad. Subdivision 3 miles on risht PROPOSED USE: SFD (Size 0 x 50) # Bedrooms 3 # Saths 2 Basement (w/wo bath) 1 Garage 1 Deck 1 Modular: __On frame __Off frame (Size __ x __) # Bedrooms __ # Baths __ Garage __ (site built? __) Deck __ (site built? __) Multi-Family Dwelling No. Units ______No. Bedrooms/Unit _____ Manufactured Home: ___SW __DW __TW (Size __x ___) # Bedrooms ___Garage ___(site built? ___) Deck ___(site built? ___) # Employees:_____Hours of Operation:_ Sq. Ft. Retail Space _____Type__ Rusiness # Employees: Type Sq. Ft._ Industry # Bathrooms Kitchen Seating Capacity _____ Church Use _____Hours of Operation:_ (Size___x___) #Rooms_____ Home Occupation (Size___x__) Use Accessory/Other Closets in addition(__)yes (__)no Addition to Existing Building (Size___x__) __) MUST have operable water before final (__) Well (No. dwellings ___ Water Supply: (___) County Sewage Supply: (__) New Septic Tank (Complete New Tank Checklist) (__) Existing Septic Tank (___) County Sewer (__) Other Property owner of this tract of land own land that contains a manufactured home w/in five hundred feet (500') of tract listed above? ___YES ___NO Structures on this tract of land: Single family dwellings _____ Manufactured Homes _____ Other (specify) ___ Required Residential Property Line Setbacks: Comments: Minimum 35 Actual 52.99 Front 121.04 25 Rear 12-66 10 Side 12.66 Sidestreet/corner lot 20 Nearest Building __

on same lot

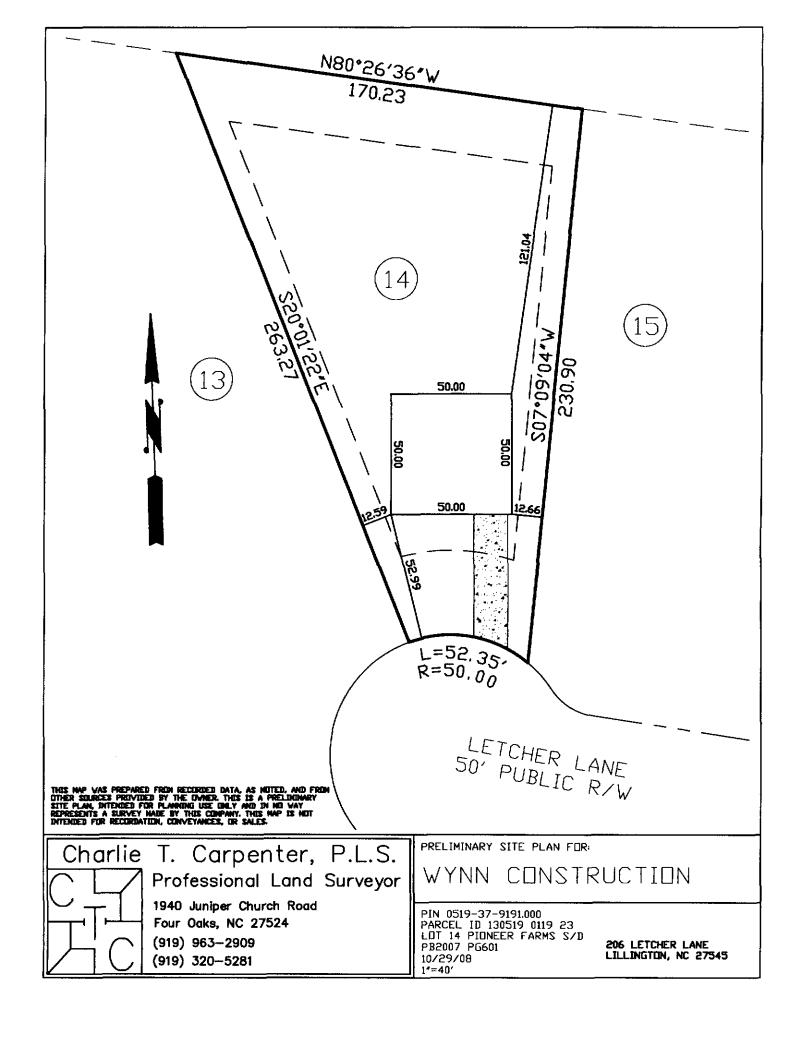
If permits are granted I agree to conform to all ordinances and the laws of the State of North Carolina regulating such work and the specifications of plans submitted. I hereby state that the foregoing statements are accurate and correct to the best of my knowledge. This permit is subject to revocation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

Signature of Owner or Owner's Agent

11-6-08

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



OWNER NAME: Wy	nu Construction	APPLICATION #:	
County Health De	*This application to be filled out epartment Application for I	only when applying for a new septic system.* mprovement Permit and/or Authorization to Construct	
IMPROVEMENT PERM	IT OR AUTHORIZATION TO CO	SIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE DNSTRUCT SHALL BECOME INVALID. The permit is valid for eithe tion submitted. (complete site plan = 60 months; complete plat = without the submitted.)	
DEVELOPMENT INFO	DRMATION	·	
New single family re	sidence		
☐ Expansion of existing	g system		
□ Repair to malfunction	ning sewage disposal system		
□ Non-residential type	of structure		
WATER SUPPLY	_		
New well			
☐ Existing well			
☐ Community well			
Public water			
☐ Spring			
Are there any existing we	lls, springs, or existing waterlines of	on this property?	
{_}} yes (no {})	unknown		
•			
SEPTIC	on to construct please indicate desire	d system type(s): can be ranked in order of preference, must choose one.	
{ } Accepted	Innovative	3,000	
{}} Accepted {}} Alternative	{} Other		
{ } Conventional			
The annicant chall notify		submittal of this application if any of the following apply to the property	
question. If the answer is	"yes", applicant must attach suppo	orting documentation.	
{ }YES {_} NO	Does the site contain any Jurisdic	tional Wetlands?	
{_}}YES {}NO	Does the site contain any existing	<u>.</u>	
{_}}YES {}NO		nerated on the site other than domestic sewage?	
(_}YES (}NO	Is the site subject to approval by		
{_}}YES	Are there any easements or Right	•	
		water, cable, phone or underground electric lines?	
(,		-632-4949 to locate the lines. This is a free service.	
l Have Read This Applicat		on Provided Herein Is True, Complete And Correct. Authorized County A	
State Officials Are Grante	d Right Of Entry To Conduct Necess	ary Inspections To Determine Compliance With Applicable Laws And Rul	
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 REPRE	SENTATIVE SIGNATURE (REQUIRED) DATE	

	085002123
NAME:	APPLICATION #:
County Healt IF THE INFORMATION PERMIT OR AUTHO depending upon docum 910-893-7 Environmental Place "pin every 50 fo Place "ora out buildin Place orar If property evaluation	*This application to be filled out when applying for a septic system inspection.* th Department Application for Improvement Permit and/or Authorization to Construct ON IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED. THEN THE IMPROVEMENT RIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration rentation submitted. (complete site plan = 60 months; complete plat = without expiration) (525 option 1 CONFIRMATION # Health New Septic System Code 800 sk property flags" on each corner iron of lot. All property lines must be clearly flagged approximatel eet between corners. Inge house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks ags, swimming pools, etc. Place flags per site plan developed at/for Central Permitting. Inge Environmental Health card in location that is easily viewed from road to assist in locating property. It is thickly wooded, Environmental Health requires that you clean out the undergrowth to allow the so to be performed. Inspectors should be able to walk freely around site. Do not grade property. Just to locate utility lines prior to scheduling inspection. 800-632-4949 (This is a free service)
After prepare to confirmat Use Clickate Environmental Follow abo Prepare to inspection After prepare multiple prepare at equiver at expenses.	aring proposed site call the voice permitting system at 910-893-7525 option 1 to schedule and use code selecting notification permit if multiple permits exist) for Environmental Health inspection. Please note ion number given at end of recording for proof of request. 2Gov or IVR to verify results. Once approved, proceed to Central Permitting for permits. Health Existing Tank Inspections
SEPTIC If applying for author	rization 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 n question. If the answ	totify the local health department upon submittal of this application if any of the following apply to the property in yer is "yes", applicant must attach supporting documentation.
{_}}YES {} NO	Does the site contain any Jurisdictional Wetlands?
(_)YES (_) 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	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?
I IVES (INC	Does the site contain any existing water cable, phone or underground electric lines?

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.

If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service.

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

DATE

2807618888
HARNETT COUNTY TAX ID# FOR REDISTRICTION RESISTER OF DEEDS KINGERLY B HARROYE GOMMY INC.
13-0519-0019-01 13-0519-0019-11 13-0519-0019-11 13-0519-0019-11 13-0519-0019-11 13-0519-0019-11 14-00-19-0019-11 14-00-19-0019-11 15-0519-0019-0019-11 15-0519-0019-0019-11 15-0519-0019-0019-11 15-0519-0019-0019-11 15-0519-0019-0019-11 15-0519-0019-0019-0019-0019-0019-0019-00
Excuse Tax \$816.00 Recording Time, Book and Page
Tax Lot No Parcel Identifier No 130519-0019-07 AND 130519-0019-11 THRU 130519-0019-33 Veniled by County of the day of 20
By
Mail after recording to Buid, Buzzard & McRae, LLP, Attorneys at Law, 65 Bain Street, Lillington, NC 27546 This instrument was prepared by David R. McRae, Attorney at Law, 65 Bain Street, Lillington, NC 27546
Brief Description for the index: LOTS1 -24, PIONEER FARMS SUBDIVSISION
NORTH CAROLINA GENERAL WARRANTY DEED
THIS DEED made this 10th day of October, 2007 by and between
GRANTOR GRANTEE
RAMM DEVELOPERS, LLC
POST OFFICE BOX 577 LILLINGTON, NORTH CAROLINA 27546 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, ferminine or neuter as required by context
WITNESSETH, that the Grantor, for a valuable consideration paid by the Grantoe, the receipt of which is hereby acknowledged, has and by these presents does grant, bargain, sell and convey unto the Grantee in fee sample, all that certain lot or parcel of land situated in the City of . Upper Little River Township, Harmett County, North Carolina and where particularly described as follows
BEING ALL OF LOT NUMBERS 1 THRU 24, INCLUSIVE, PIONEER FARMS SUBDIVISION, AS SHOWN UPON THAT CERTAIN PLAT OF SURVEY ENTITLED "SURVEY FOR: PIONEER FARMS SUBDIVISION", PREPARED BY BENNETT SURVEYS, INC., DATED JULY 10, 2007, AND APPEARING OF RECORD AT MAP NUMBER 2007-601, HARNETT COUNTY REGISTRY. REFERENCE TO SAID PLAT BEING HEREBY MADE FOR A GREATER CERTAINTY OF DESCRIPTION.
THIS PROPERTY IS CONVEYED SUBJECT TO THAT CERTAIN EXISTING 50 FOOT EASEMENT AS SHOWN UPON THE ABOVE REFERENCED PLAT APPEARING OF RECORD AT MAP NUMBER 2001-501, AND ALSO SHOWN ON MAP NUMBER 207-371 AND MAP NUMBER 2004-424, ALL OF THE HARNETT COUNTY REGISTRY.
THIS BEING THE SAME PROPERTY AS CONVEYED TO RAMM DEVELOPERS, LLC, BY DEED FROM BARBARA B. HOLDER, WIDOW, DATED JUNE 14, 2004, AND APPEARING OF RECORD IN DEED BOOK 1949, PAGE 24-36, HARNETT COUNTY REGISTRY.
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