

Initial Application Date: 5-25-10

Application # 1050024489

CU# _____

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 Fax: (910) 893-2793 www.harnett.org/permits

LANDOWNER: Kenneth & Cynthia Moss Mailing Address: P.O. Box 577

City: Lillington State: NC Zip: 27546 Contact # 910-890-2103 Email: N/A

APPLICANT: Moss Developers Mailing Address: _____

City: Lillington State: NC Zip: 27546 Contact # 910-890-0328 Email: N/A

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: _____ Phone # _____

PROPERTY LOCATION: Subdivision: Grandle Pines Lot #: 9 Lot Size: .50AC

State Road # 1264 State Road Name: Brown Rd Map Book & Page: 2005, 815

Parcel: 13 0621 0054 68 PIN: 0621-01-2585.000

Zoning: R200B Flood Zone: X Watershed: IV Deed Book & Page: 2324, 29 Power Company: South River EMC

*New structures with Progress Energy as service provider need to supply premise number _____ from Progress Energy.

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 421 North 4 miles to Raven Rock RD, turn right on Raven Rock, go 1.5 miles turn left on Brown Road, go .75 miles to Carson Crt on right

PROPOSED USE:

- SFD: (Size 59 x 38) # Bedrooms: 3 # Baths: 2 Basement (w/wo bath): Garage: Deck: Crawl Space: Slab: _____
(Is the bonus room finished? yes no w/ a closet? yes no (if yes add in with # bedrooms)
- Mod: (Size _____ x _____) # Bedrooms _____ # Baths _____ Basement (w/wo bath) _____ 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 _____ x _____) Use: _____ 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

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

Required Residential Property Line Setbacks: _____ Comments: _____

	Minimum	Actual
Front	<u>35</u>	<u>40</u>
Rear	<u>25</u>	<u>68</u>
Closest Side	<u>10</u>	<u>41</u>
Sidestreet/corner lot	<u>10</u>	<u>-</u>
Nearest Building on same lot	<u>-</u>	<u>-</u>

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]
Signature of Owner or Owner's Agent

5/21/10
Date

****This application expires 6 months from the initial date if permits have not been issued****

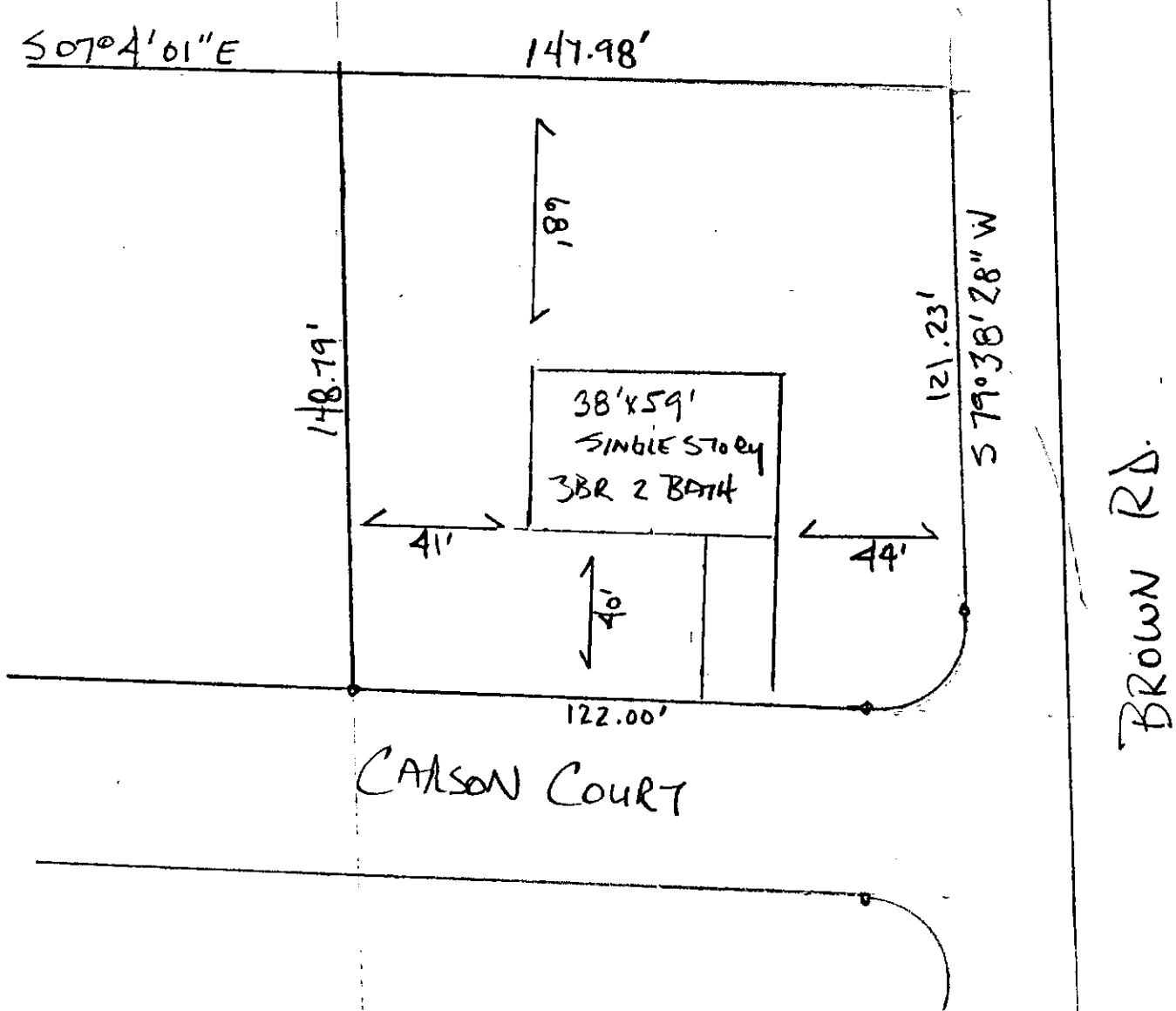
A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION

SITE PLAN APPROVAL

DISTRICT RA20R USE SFD

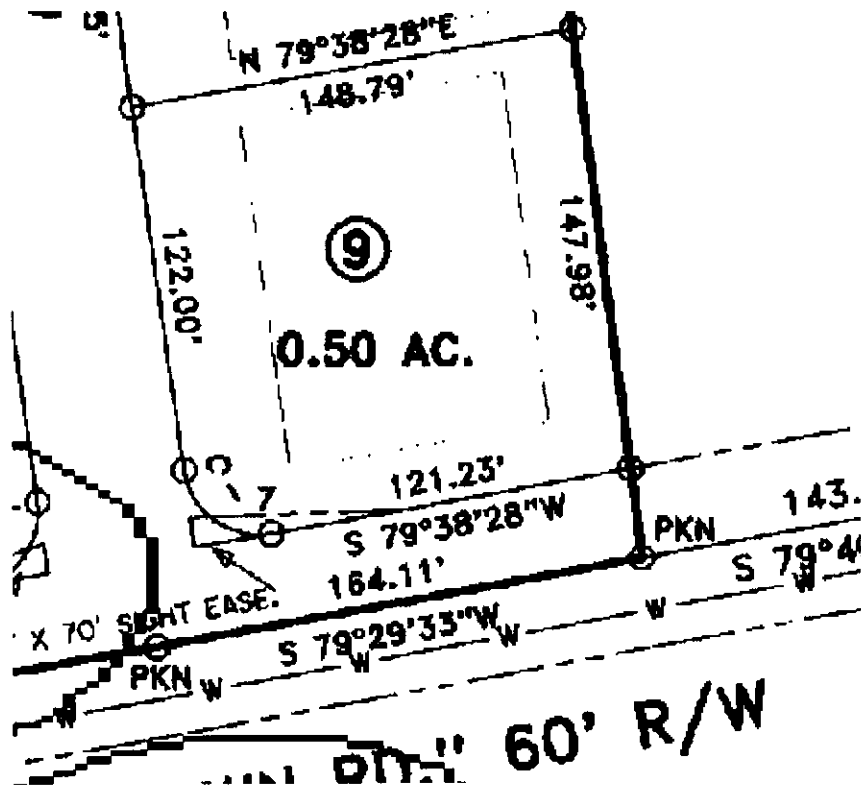
#BEDROOMS 3

Date 5-25-10 JB
Zoning Administrator



LOT 9 GRANDE PINES

SCALE 1" = 40'



NAME: Mass Developers

APPLICATION #: 24489

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)

Environmental Health New Septic Systems Test 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 structure site. Use additional flags to outline driveways, garages, decks, out buildings, swimming pools, etc. Place flags per site plan developed at/for Central Permitting.
- 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. *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 and use code **800** (after selecting notification permit if multiple permits) for Environmental Health confirmation. **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 permits.

Environmental Health Existing Tank Inspections Code 800

- Place Environmental Health "orange" card in location that is easily viewed from road. Follow above instructions for placing flags 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 & select notification permit if multiple permits, then use code **800** for Environmental Health confirmation. **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)

5/25/10

DATE



HARNETT COUNTY TAX ID#

13-0021-0054
13 0021 0054 01

FOR REGISTRATION REGISTER OF DEEDS
KIMBERLY S. HARGROVE
HARNETT COUNTY, NC
2007 JAN 02 03:31:54 PM
BK: 2324 PG: 29-31 FEE: \$17.00

INSTRUMENT # 2007000078

12-07 BY 8413

Excise Tax \$

Recording Time, Book and Page

Tax Lot No _____ Parcel Identifier No 130621-0054 & 130621-0054-01 thru 08

Verified by _____ County of the _____ day of _____, 20
By _____

Mail after recording to BARN, BLIZZARD & MCRAE, LLP, Attorneys at Law, P.O. Box 99, Lillington, NC 27546
This instrument was prepared by DAVID F. MCRAE, Attorney at Law, P.O. Box 99, Lillington, NC 27546

Brief Description for the index : LOTS 1 THUR 9, GRANDE PINES, MAP 2005-815

NORTH CAROLINA GENERAL WARRANTY DEED

THIS DEED made this 21st day of December, 2006 by and between

GRANTOR	GRANTEE
DGM ENTERPRISES, LLC Post Office Box 577 Lillington, North Carolina 27546	KENNETH A. MOSS AND WIFE, CYNTHIA B. MOSS Post Office Box 577 Lillington, North Carolina 27546

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 _____, Upper Little River Township, Harnett County, North Carolina and more particularly described as follows

BEING ALL OF LOT NUMBERS 1 THROUGH 9, GRANDE PINES SUBDIVISION, AS SHOWN UPON THAT PLAT OF SURVEY ENTITLED "SURVEY FOR: GRANDE PINES S/D", PREPARED BY BENNETT SURVEYS, INC., DATED SEPTEMBER 14, 2005, AND APPEARING OF RECORD AT MAP NUMBER 2005-815, HARNETT COUNTY REGISTRY. REFERENCE TO SAID PLAT BEING HEREBY MADE FOR A GREATER CERTAINTY OF DESCRIPTION.

ALSO CONVEYED HERewith AND APPURTENANT TO IS THAT CERTAIN 50 FOOT RIGHT OF WAY DESIGNATED AS CARSON COURT ON THE HEREINABOVE REFERENCED PLAT APPEARING OF RECORD AT MAP NUMBER 2005-815, HARNETT COUNTY REGISTRY.

This being a portion of the same property as conveyed to DGM Enterprises, LLC, by deed from Dorothy T. Anderson and husband, Gerald A. Anderson, dated November 18, 2004, and appearing of record in Deed Book 2010, Page 876-878, Harnett County Registry.

The property hereinabove described was acquired by Grantor by instrument recorded in Deed Book 2010, Page 876-878, Harnett County Registry.

A map showing the above described property is recorded in Map Number 2005-815, Harnett County Registry.

TO HAVE AND TO HOLD the aforesaid lot or parcel of land and all privileges and appurtenances thereto belonging to the Grantee in fee simple

And the Grantor covenants with the Grantee, that Grantor is seized of the premises in fee simple, has the right to convey the same in fee simple, that title is marketable and free and clear of all encumbrances, and that Grantor will warrant and defend the title against the lawful claims of all persons whomsoever except for the exceptions hereinafter stated

Title to the property hereinabove described is subject to the following exceptions

Any and all restrictions, roadway easements, and utility easements as may appear of record in the Harnett County Registry.

IN WITNESS WHEREOF, the Grantor has hereunto set his hand and seal, or if corporate, has caused this instrument to be signed in its corporate name by its duly authorized officers and its seal to be hereunto affixed by authority of its Board of Directors, the day and year first above written

DGM ENTERPRISES, LLC

(Corporate Name)

DOROTHY T. ANDERSON (SEAL)

By

President

Dorothy T. Anderson (SEAL)

ATTEST

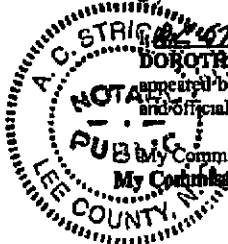
Secretary

(SEAL)

(Corporate Seal)

(SEAL)

SEAL-STAMP NORTH CAROLINA, Lee COUNTY



I, A.C. Strickland, a Notary Public of the County and State aforesaid, certify that DOROTHY T. ANDERSON, MEMBER MANAGER OF DGM ENTERPRISES, LLC personally appeared before me this day and acknowledged the execution of the foregoing instrument. Witness my hand and official stamp or seal, this 22nd day of December, 2006.

My Commission Expires March 2, 2009
My Commission Expires February 4, 2008

A.C. Strickland
Lee Strickland, Notary Public

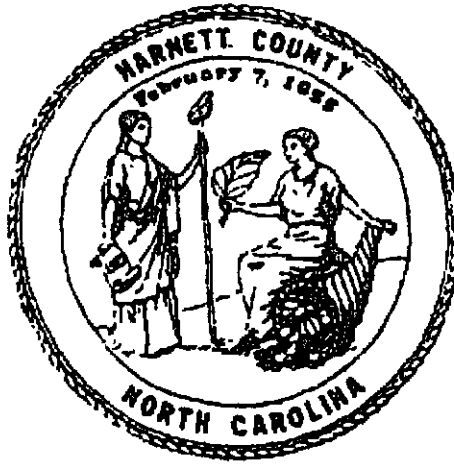
SEAL-STAMP STATE OF NORTH CAROLINA
COUNTY OF HARNETT

I, _____, a Notary Public in and for the aforesaid State and County, do hereby certify that _____, Attorney in fact for _____, personally appeared before me this day, and being by me duly sworn, says that she executed the foregoing instrument for and in behalf of _____ and that her authority to execute and acknowledge said instrument is contained in an instrument duly executed, acknowledged, and recorded in Deed Book _____ Page _____, in the office of the Register of Deeds, Harnett County, North Carolina, on the _____ day of _____, and that this instrument was executed under and by virtue of the authority given by said instrument granting her power of attorney, that the said _____ acknowledged the due execution of the foregoing and annexed instrument for the purposes therein expressed for and in behalf of the said _____

Witness my hand and notarial seal this _____ day

My commission expires

Notary Public



KIMBERLY S HARGROVE
REGISTER OF DEEDS, HARNETT
305 W CORNELIUS HARNETT BLVD
SUITE 200
LILLINGTON, NC 27546

Filed For Registration: 04/02/2007 03:31:54 PM

Book: RE 2324 Page: 29-31

Document No.: 2007000078

DEED > 3 PGS \$17.00

Recorder: TRUCI S WESTER

State of North Carolina, County of Harnett

KIMBERLY S. HARGROVE , REGISTER OF DEEDS

DO NOT DISCARD

2007000078

2007000078