

Initial Application Date: 1/20/2011

Application # 1150025922

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: Prominent Builders Mailing Address: P.O. Box 727

City: Dunn State: N.C. Zip: 28335 Home #: 910-892-4345 Contact #: 910-892-2120

APPLICANT*: Cumberland Homes, Inc Mailing Address: same as above

City: " State: " Zip: " Home #: " Contact #: "

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Joan Phone #: 910-892-4345

PROPERTY LOCATION: Subdivision: Tinged Place Lot #: 29 Lot Acreage: .425 acres

State Road #: 1141 State Road Name: Micro Tower Rd. Map Book & Page: 2010 | 813

Parcel: 03 9597 0227 18 PIN: TBA

Zoning: RA-20R Flood Zone: X Watershed: N/A Deed Book & Page: 2825 1966-968 Power Company*: CEMC

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Take 27 West From Lillington, Turn Left on Tinged Rd, Turn Left on Micro Tower Rd, Turn Left on Douglas Acres Rd into S/D, Lot # on Left

- PROPOSED USE: 32'-6" x 54' (Include Bonus room as a bedroom if it has a closet) Circle: (Slab)
- SFD (Size 32'-6" x 54') # Bedrooms 3 # Baths 2 Basement (w/wo bath) N/A Garage 22' x 20' Deck 14' x 12' Crawl Space (Slab)
 - Mod (Size _____ x _____) # Bedrooms _____ # Baths _____ Basement (w/wo bath) _____ Garage _____ Site Built Deck _____ ON Frame / OFF _____
 - Manufactured Home: _____ SW _____ DW _____ TW (Size _____ x _____) # Bedrooms _____ Garage _____ (site built? _____) Deck _____ (site built? _____)
 - Duplex (Size _____ x _____) No. Buildings _____ No. Bedrooms/Unit _____
 - Home Occupation # Rooms _____ Use _____ Hours of Operation: _____ #Employees _____
 - Addition/Accessory/Other (Size _____ x _____) Use _____ Closets in addition ()yes ()no

*Homes with Progress Energy as service provider need to supply premise number from Progress Energy

Water Supply: County () Well (No. dwellings _____) **MUST** have operable water before final

Sewage Supply: New Septic Tank (Complete **New Tank Checklist**) () Existing Septic Tank () County Sewer

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

Required Residential Property Line Setbacks:	Comments:
Front Minimum <u>35'</u> Actual <u>40'</u>	
Rear <u>25'</u> <u>91'-5"</u>	
Closest Side <u>10'</u> <u>20'-1"</u>	
Sidestreet/corner lot <u>20'</u> <u>N/A</u>	
Nearest Building on same lot <u>N/A</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.

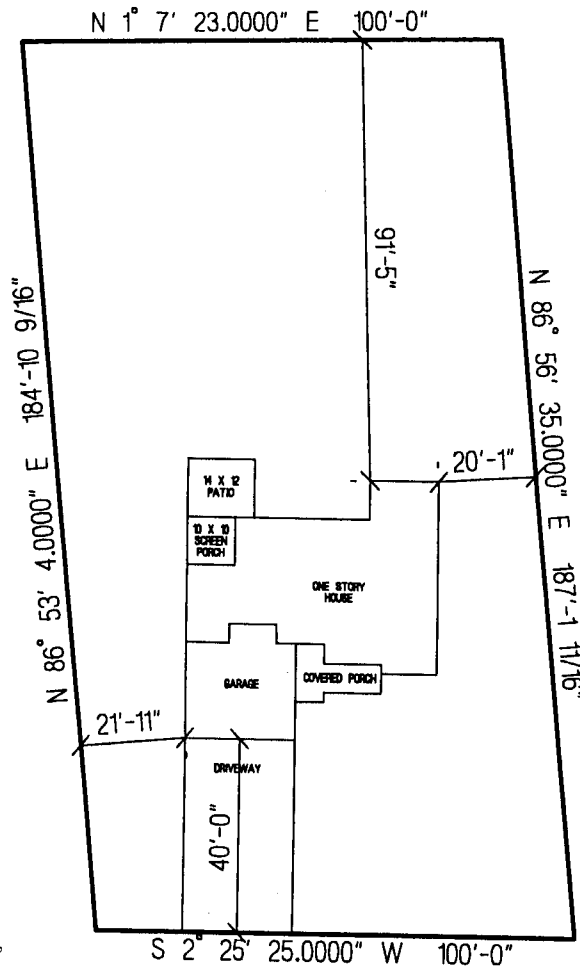
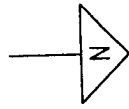
[Signature]
Signature of Owner or Owner's Agent

1/20/2011
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

Permit Copy



SITE PLAN APPROVAL

DISTRICT RAZOR USE SFD

BEDROOMS 3

1-21-11

DOUGLAS ACRES DRIVE

**PROMINENT BUILDERS
THE RG13-C02BF
LOT # 29 TINGEN PLACE
SCALE: 1"=40'**

NAME: Prominent Builders

APPLICATION #: 25922

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.

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)

1/20/2011
DATE



FOR REGISTRATION REGISTER OF DEEDS
 KIMBERLY S. HARGROVE
 HARNETT COUNTY, NC
 2011 JAN 12 12:05:49 PM
 BK: 2825 PG: 966-968 FEE: \$22.00
 NC REV STAMP: \$165.00
 INSTRUMENT # 2011000486

HARNETT COUNTY TAX ID#

910-03-9597-0227

1-12-11 BY KAD

NORTH CAROLINA GENERAL WARRANTY DEED

Excise Tax: \$ 165.00 *outlet*

Parcel Identifier No. 0395970227 Verified by _____ County on the ____ day of _____, 20____
 By: _____

Mail/Box to: Lynn A. Matthews, Lynn A. Matthews, 111 Commerce Drive, Dunn, NC 28334

This instrument was prepared by: Lynn A. Matthews, 111 Commerce Drive, Dunn, NC 28334

Brief description for the Index: LOT Lots 27, 28 and 29 Tingen Place, Phase 3,

THIS DEED made this 11th day of January, 2011 by and between

GRANTOR

B & J - Tingen Place LLC
 108 Thomas Mill Road, Ste 105
 Holly Springs, NC 27540

GRANTEE

Matthew H. Norris dba Prominent Builders
 Post Office Box 727
 Dunn, NC 28335

Enter in appropriate block for each Grantor and Grantee: name, mailing 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 Broadway, Barbecue Township, Harnett County, North Carolina and more particularly described as follows:

Being all of Lots 27, 28 and 29 of Tingen Place Subdivision, Phase Three, as shown on plat map recorded in Map Book 2010, Page 813, Harnett County Registry.

The property hereinabove described was acquired by Grantor by instrument recorded in Book 2171 page 63.

All or a portion of the property herein conveyed includes or X does not include the primary residence of a Grantor.

A map showing the above described property is recorded in Plat Book 2010 page 813.

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, other than the following exceptions:

- 2011 ad valorem taxes not yet due and payable.
- Easements, restrictions and rights of way of record.
- Matters evident by a visible inspection of the property.

IN WITNESS WHEREOF, the Grantor has duly executed the foregoing as of the day and year first above written.

By: B & J - Tingen Place LLC (Entity Name) (SEAL)
 Print/Type Name: _____

By: James Tucker (SEAL)
 Print/Type Name & Title: James Tucker, Mgr (SEAL)
 Print/Type Name: _____

By: _____ (SEAL)
 Print/Type Name & Title: _____ (SEAL)
 Print/Type Name: _____

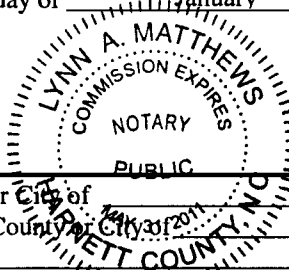
By: _____ (SEAL)
 Print/Type Name & Title: _____ (SEAL)
 Print/Type Name: _____

State of _____ - County or City of _____
 I, the undersigned Notary Public of the County or City of _____ and State aforesaid, certify that _____ personally appeared before me this day and acknowledged the due execution of the foregoing instrument for the purposes therein expressed. Witness my hand and Notarial stamp or seal this _____ day of _____, 20____.

My Commission Expires: _____ Notary Public
 (Affix Seal) _____
 Notary's Printed or Typed Name

State of North Carolina - County or City of Harnett
 I, the undersigned Notary Public of the County or City of Harnett and State aforesaid, certify that _____ personally came before me this day and acknowledged that he is the James Tucker of B & J - Tingen Place LLC, a North Carolina or _____ corporation/limited liability company/general partnership/limited partnership (strike through the inapplicable), and that by authority duly given and as the act of such entity, he signed the foregoing instrument in its name on its behalf as its act and deed. Witness my hand and Notarial stamp or seal, this 11th day of January, 2011.

My Commission Expires: May 31, 2011 Notary Public
 (Affix Seal) _____
 Notary's Printed or Typed Name



State of _____ - County or City of _____
 I, the undersigned Notary Public of the County or City of _____ and State aforesaid, certify that _____
 Witness my hand and Notarial stamp or seal, this _____ day of _____, 20____.

My Commission Expires: _____ Notary Public
 (Affix Seal) _____
 Notary's Printed or Typed Name