Initial Application Date: WWW WIS
COUNTY OF HARNETT RESIDENTIAL LAND LISE APPLICATION
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"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION"
City: MONUSUITE State: NX Zip: 2) Yelcontact No: 9/94/60-2933; mail: myraid only
APPLICANT: COUNTR US O Depte Red ss:
*Please fill out applicant information if different than tendowner
CONTACT NAME APPLYING IN OFFICE: BLUGS ROJAND Phone & 919-7910-10351
PROPERTY LOCATION: Subdivision: Stone CV055
State Road # 170 State Road Name: Dievnill Rd.
Percet: 01053514 0100 43 PIN: 0515 31-4031,000
Zonings Ar Sur Flood Zone: Newscarshed: 1 The Deed Book & Page: 3078 760-767
*New structures with Progress Energy as service provider need to supply premise number
SFD: (Size 3.6 x 38) # Bedrooms: 5 # Baths: Basement(w/wo bath): N/P Garage: Deck: Crawl Space: Siab:
☐ Mod: (Sizex) # 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
·
Secrooms: Garage;(site built?) Deck:(site built?)
Duplex: (Size x) No. Buildings: No. Bedrooms Par Unit:
☐ Home Occupation: # Rooms: Use: Hours of Operation: #Employees:
Addition/Accessory/Other: (Sizex) Use:Closets in addition? () yes () r
Closets in addition? (_) yes (_) r
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: Manufactured Homes: Other (specify):
lequired Residential Property Line Setbacks: Comments:
lear 25' 114.2
losest Side 10' 18.1
idestreet/comer lot
earest Building

Page 1 of 2
APPLICATION CONTINUES ON BACK

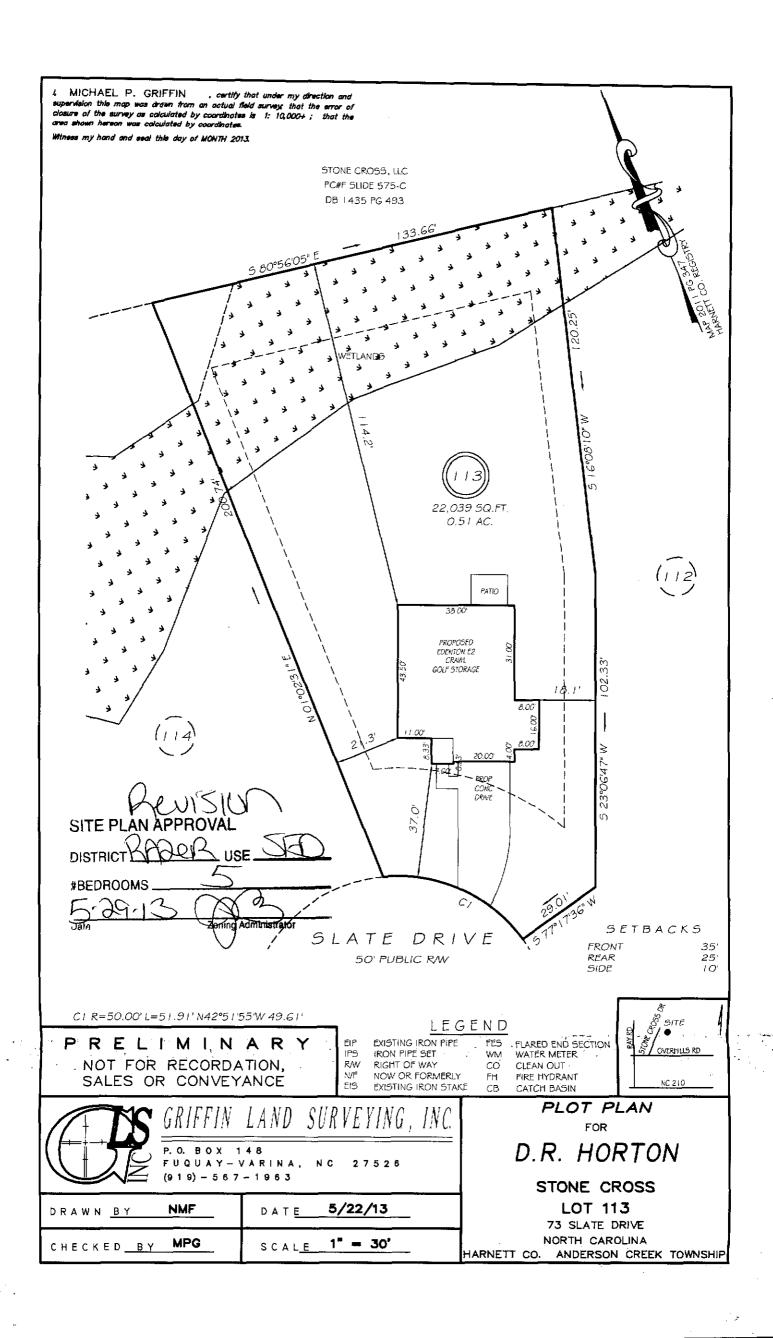
03/11

Residential Land Use Application

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"It is the owner/applicants responsibility to provide the county with any applicable information about the subject property, including but not limited to: boundary information, house location, underground or overhead easements, etc. The county or its employees are not responsible for any information that is contained within these applications."

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



HARNETT COUNTY TAX 10# 61. 0535 14.6100 35 61.0535 14.0100 40 61.0535 14.0100 47 62.617 584 533 FOR REGISTRATION
Kimberly S. Hargrove
REGISTER OF DEEDS
Harnett County, NC
2012 AUG 30 03:55:17 PM
BK:3028 PG:760-762
FEE:\$26.00
EXCISE TAX: \$305.00
INSTRUMENT # 2012013968
TWESTER



Drafted by: James E. Holshouser, Jr Sanford Holshouser LLP

P.O. Box 1227
Pinehurst, NC 28370
Return to:

Pagwell Holt Smith P.A. Di Cloister Court, Ste 200 Chapel Hill, NC 27514

Brief Description for Index: Lots 105, 110, 112, 113, and 114 Stone Cross Subdivision

This property does not include the primary residence of the

Stamps: \$305.00

STATE OF NORTH CAROLINA

COUNTY OF HARNETT

GENERAL WARRANTY DEED

THIS GENERAL WARRANTY DEED, made this the 28th of August, 2012, by and between STONE CROSS, L.L.C. a Delaware Limited Liability Company, doing business in North Carolina as Stone Cross Estates, L.L.C., 125 Whispering Pines Club Drive, Spring Lake, NC 28390 (hereinafter called "Grantor") and D.R. HORTON, INC., a Delaware corporation, 2000 Aerial Center Parkway, Ste 110, Morrisville, NC 27560 (hereinafter called "Grantee").

WITNESSETH

The Grantor, for valuable consideration paid by the Grantee, the receipt of which is hereby acknowledged, and subject to the matters set out below, grants, bargains, sells, and conveys unto the Grantee all of that certain lot or parcel of land situated in the City of Spring Lake, Anderson Creek Township, Harnett County, North Carolina, described as follows:

* Each section below to be filled out by whomever performing work.

Must be owner or licensed
contractor. Address, company
name & phone must match

U	Application #	
Harnett County Central Permitting		•
PO Box 65 Lillington, NC 27546	•	
10-893-7525 Fey 010-809-3709		

1-2793 www.harnett.org/permits

Application for Residential Building and Trades Permit

A 1	
Owner's Name: DR Novbo Joc.	·
Site Address: 73 State Davis Spender Laure	Date:
Site Address: 73 State Drive Spring LAKE Directions to job site from Illington: 1150 315 5	1 - 10 Phone: 419 4(1) -2933
Directions to job site from Lillington: Highway 2105 to Overhills Rd-Subdivision on 14.	Spring Take Pt of
Overhill red-subdivision on 12. L	school Teal PA
	(Per
SubdivisionStone CNOSS	
Description of Proposed Work: Single Forkily Kesin	Lot: 113
Description of Printosed Work: Strong 400 Williams	* OCA # of Bedrooms: J
Finished Bonds Room?	NO Court On the Control of the Contr
D. K. Boxton & Inc.	<u>919 460 - 2933</u>
Building Contractor's Company Name	l'elephone
2010 acrial Center Pkus Suntello	mmany editorian.com
Address DAUSUITE CUC STO	Email Address
L-WIZ/L3> 6 (=74.4	_3585)
Signature of Owner/Contractor/Officer(s) of Corporation	License #
Description of Work	
Description of Work Name Construction Service Size:	Amps T-Pole:YesNo
Electrical Contractor's Company Name	_ 419 & b3 - 7474
1.0.30x 162 (101x DC 27502	reightions .
Address // A	Can panizzia e minder
Marie Simbon	FINGS VOOLESS
Signature of Duras/Contractor/Office (1)	19850 L Ca
Signature of Owner/Contractor/Officer(s) of Corporation	license 4
Mechanical/HVAC Contractor Inform Description of Work	<u>iation</u>
Ym Plumbing	_336 - 9 93 - 1975
Mechanical Contractor's Company Name	Telephone
615 Galin St. Lunersulle Mt	Dimarko en Marcha con
Address	Email Address (0/
Dane Martin	23529
Signature of Owner/Contractor/Officer(s) of Corporation	License #
Plumbing Contractor Information	a 3 —
Description of Work Law Construction	_# Baths_ ┙. こ
All Limbico	333-993-1975
Plumbing Contractor's Company Name	Telephone
1013 bratio St. Lernersy le RC	
Address	Email Address ymplumbing. com
- Dane Martin	23529
Signature of Owner/Contractor/Officer(s) of Corporation	License #
Insulation Contractor Information	
100km & 1000 atton 314 Old Duro Store Rd.	<u>919</u> 661-0999
nsulation Contractor's Company Name & Address	Telephone
House & Address Company Name & Address Carry	Δ
*NOTE: General Contractor must fill out and sign the secon	<u></u>
and sign the secot	na page of this application,

Homeowners Applying to Build Their Own Home
Please answer the following questions then see a Permit Technician to determine if you qualify for permit under Owners Exemption. Questionnaire per G.S. 87-14 Regulations as to Issue of Building Permits (Memo available upon request)
Do you own the land on which this building will be constructed? YesNo
Have you hired or intend to hire an individual to superintend and manage construction of the project? Yes No
3. Do you intend to directly control & supervise construction activities?YesNo
4. Do you intend to schedule, contract, or directly pay for all phases of construction work to be done?
5. Do you intend to personally occupy the building for at least 12 consecutive
months following completion of construction and do you understand that if you do not do so, it creates the presumption under law that you fraudulently secured the permit? Yes No
I hereby certify that I have the authority to make necessary application, that the application is correct and that the construction will conform to the regulations in the Building, Electrical, Plumbing and Mechanical codes, and the Harnett County Zoning Ordinance. I state the information on the above contractors is correct as known to me and if any changes occur including listed contractors, site plan, number of bedrooms, building and trade plans, Environmental Health permit changes or proposed use changes, I certify it is my responsibility to notify the Harnett County Central Permitting Department of any and all changes. EXPIRED PERMIT FEES - 6 Months to 2 years permit re-issue fee is \$150.00. After 2 years re-issue fee is as per current fee exhedule.
Signature of Owner/Contractor/Officer(s) of Corporation Date
Signature of Owner/Contractor/Officer(s) of Corporation Date
Signature of Owner/Contractor/Officir(s) of Corporation Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:
Signature of Owner/Contractor/Officer(s) of Corporation Date Affidavit for Worker's Compensation N.C.G.S. 87-14
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the: General Contractor Owner Officer/Agent of the Contractor or Owner Do hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit: Has three (3) or more employees and has obtained workers' compensation insurance to cover them.
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the: General Contractor Owner Officer/Agent of the Contractor or Owner Do hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:
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Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the: General Contractor Owner Officer/Agent of the Contractor or Owner Do hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit: Has three (3) or more employees and has obtained workers' compensation insurance to cover them. Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them. Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance covering themselves. Has no more than two (2) employees and no subcontractors. While working on the project for which this permit is sought it is understood that the Central Permitting Department issuing the permit may require certificates of coverage of worker's compensation insurance prior to issuance of the permit and at any time during the permitted work from any person, firm or compression
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DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 10946

Filed on: 0! Initially file

Designated Lien Agent

Chicago Title Company, LLC

Online: www.liensnc.com the policy and dental country

Address: 19 W. Hargett St., Suite 507 / Raleigh, NC

27601

Phone: 888-690-7384
Fax: 913-489-5231

Email: support@liensnc.com (constitution of constitution of constitution)

Project Property

Stonecross Lot 113
73 Slate Drive

Sping Lake, NC 28390

Pre-Permit Workers

Stone Cross Lot 113

Print & Post



Contractors:

Please post this notice on the.

Suppliers and Subcontractor Scan this image with your smarriew this filing. You can then

to Lien Agent for this project.

Property Type

1-2 Family Dwelling

Date of First Furnishing

2013-06-05

Owner Information

DR Horton Inc 2000 Aerial Center Parkway Suite 110A Morrisville, NC 27560 Email: mmguy@drhorton.com

Phone: 919-795-7299

Technical Support Hotline: (888) 690-7384