Initial Application Date COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION CI I# Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits "A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION" Main Address City: Contact No: *Please fill out applicant information if different than landowne CONTACT NAME APPLYING IN OFFICE: State Road Name: Watershed: *New structures with Progress Energy as service provider need to supply premise number from Progress Energy. PROPOSED USE: Basement(w/wo-bath):_ Garage: V Deck: (Is the bonus room finished? (__) yes (__) no w/a closet? (__) yes (__) no (if yes add in with # bedrooms) _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 _SW __DW __TW (Size ___x ___) # Bedrooms: ___ Garage: __(site built?___) Deck:__(site built?___) ___) 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 County _____ Existing Well ____ New Well (# of dwellings using well _____) *Must have open ble water before final 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 Does the property contain-any easements whether underground or overhead (__) yes (__) no Structures (existing or proposed): Single family dwellings: Manufactured Homes:__ Required Residential Property Line Setbacks: Comments: Front Rear Closest Side Sidestreet/corner lot **Nearest Building** on same lot Residential Land Use Application Page 1 of 2 APPLICATION CONTINUES ON BACK 03/11

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:	
1 Hickory 210-5 to Stains Lake	aston auchils
1/ Road - Substitision on walt after P	all theisector
0	
If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subje	such work and the specifications of plans submitted. ct to revocation if false information is provided.
Ill Beall G	1/4/13
Signature of Owner or Owner/s Agent	Date

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 incorrect or missing information that is contained within these applications.

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

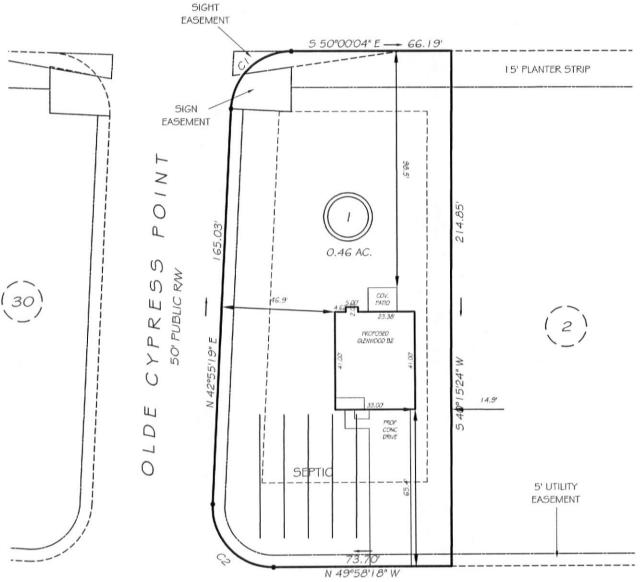
I, MICHAEL P. GRIFFIN , certify that under my direction and supervision this map was drawn from an actual field survey, that the error of closure of the survey as calculated by coordinates is 1: 10,000+; that the area shown hereon was calculated by coordinates.

Witness my hand and seal this day of MONTH 2013.



CYPRESS CHURCH ROAD

60' PUBLIC RAW



HIGHGREEN POINT

SITE PLAN APPROVAL

DISTRICT #BEDROOMS

SETBACKS

FRONT 25' 10' REAR SIDE CORNER SIDE 20'

C1 R=25.00' L=38.05' N86°31'25"E 34.48' C2 R=25.00' L=40.53' NO3°31'29"W 36.24'

PRELIMINAR

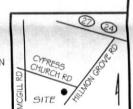
NOT FOR RECORDATION, SALES OR CONVEYANCE

EXISTING IRON PIPE FES EIP WM

IRON PIPE SET RIGHT OF WAY RW NOW OR FORMERLY EXISTING IRON STAKE

FLARED END SECTION WATER METER CLEAN OUT CO FIRE HYDRANT

CB





SURVEYING, INC. LAND

P. O. B O X 1 4 8 F U Q U A Y - V A R I N A , (9 1 9) - 5 6 7 - 1 9 6 3

DRAWN BY NMF	DATE 4/4/13
CHECKED BY MPG	SCAL <u>E</u> 1" = 40'

PLOT PLAN

D.R. HORTON

CYPRESS POINTE LOT 1

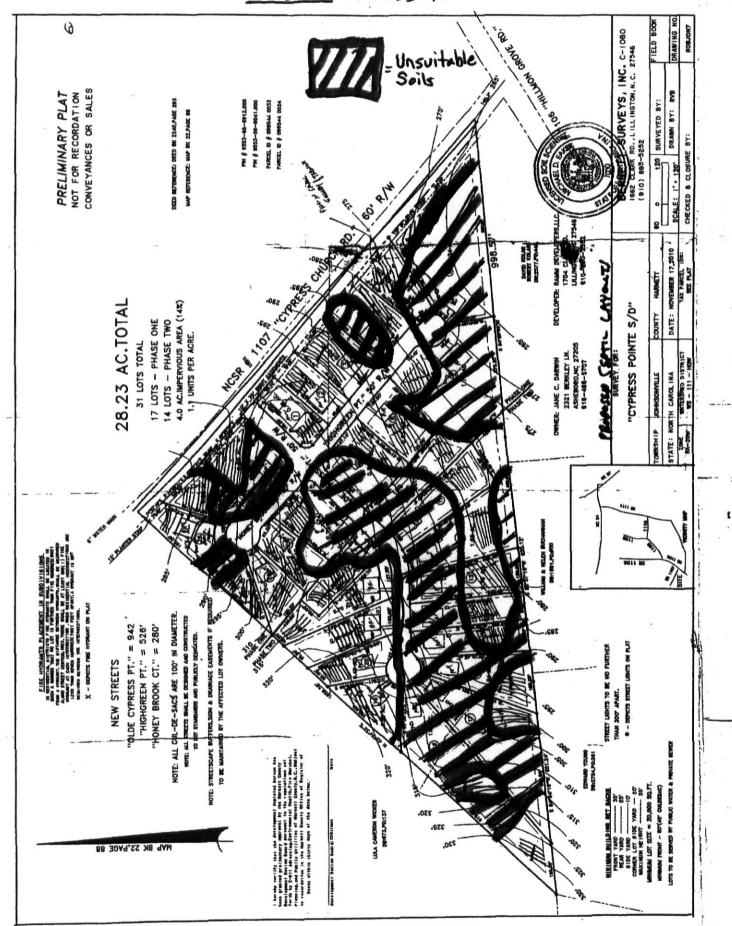
15 HIGHGREEN POINT CAMERON, N.C. HARNETT CO. JOHNSONVILLE TOWNSHIP

NAME:	DKH	loxton	Ind	_	APPLICATION #:
				•	
Course					g for a septic system inspection.*
IF THE INF	ORMATION IN R AUTHORIZA	THIS APPLICATION TO CONS	ATION IS FA	LSIFIED, CHANGED, LL BECOME INVALI	or THE SITE IS ALTERED, THEN THE IMPROVEMENT D. The permit is valid for either 60 months or without expiration plete plat = without expiration)
, 9	0-893-7525	option 1	ounpiece site	pian – oo mening, com	CONFIRMATION #
Envir	<i>onmental He</i> Il property ir	ealth New Sel	made vis		roperty flags" on each corner iron of lot. All property
					posed structure. Also flag driveways, garages, decks,
Ol	it buildings, s	wimming poo	ls, etc. Plac	e flags per site plar	n developed at/for Central Permitting.
PiIf					
					confirmation. \$25.00 return trip fee may be incurred
• At 80 cc	or failure to un ter preparing 00 (after select onfirmation nu se Click2Gov	ncover outle proposed site cting notificati mber given a or IVR to ver	e call the vo on permit if t end of rece fy results. (house corners and ce permitting systemultiple permits ex ording for proof of re Once approved, pro	d property lines, etc. once lot confirmed ready. m at 910-893-7525 option 1 to schedule and use code (ist) for Environmental Health inspection. Please note equest. seed to Central Permitting for permits.
				ections Code 80	
• Pi	 Follow above instructions for placing flags and card on property. Prepare for inspection by removing soil over outlet end of tank as diagram indicates, and lift lid straight up (if possible) and then put lid back in place. (Unless inspection is for a septic tank in a mobile home park) DO NOT LEAVE LIDS OFF OF SEPTIC TANK 				
• At if	ter uncoverin	g outlet end nits, then use	call the voice code 800	e permitting system for Environmental	n at 910-893-7525 option 1 & select notification permit Health inspection. Please note confirmation number
	se Click2Gov	or IVR to hea	r results. O	nce approved, proce	eed to Central Permitting for remaining permits.
SEPTIC If applying	for authorization	on to construct p	lease indicate	desired system type(s): can be ranked in order of preference, must choose one.
{}} Acc	epted	{}} Innovat	ive	{}} Conventional	{}} Any
{ } Alte	rnative				
The applica	ant shall notify	the local health	n department	upon submittal of thi	s application if any of the following apply to the property in NG DOCUMENTATION:
{}}YES	(_) NO	Does the site	contain any J	urisdictional Wetland	ls?
{}}YES	{_}} NO	Do you plan t	o have an <u>irr</u>	gation system now or	r in the future?
{}}YES	{ NO	Does or will t	he building c	ontain any <u>drains</u> ? Pl	ease explain
{}}YES	{} NO	Are there any	existing well	ls, springs, waterlines	or Wastewater Systems on this property?
{}}YES	- NO	Is any wastew	ater going to	be generated on the s	site other than domestic sewage?
{}}YES	(Is the site sub	ject to appro	val by any other Publi	ic Agency?
{}}YES	[_] NO	Are there any	Easements of	r Right of Ways on th	nis property?
{_}}YES	{_} NO	Does the site	contain any e	xisting water, cable, j	phone or underground electric lines?
		If yes please	call No Cuts	at 800-632-4949 to lo	ocate the lines. This is a free service.
I Have Read	l This Applicati	ion And Certify	That The Inf	ormation Provided He	erein 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)



	Harnett County, NC 2012 AUG 23 03:54:25 PM 2012 AUG 23 03:54:25 PM BK:3028 PG:125-126 FEE:\$25.00 EXCISE TAX: \$59.00 INSTRUMENT # 2012013526 INSTRUMENT # 2012013526
HARNETT COUNTY TAX ID#	2012013526
NORTH CAROLINA	A GENERAL WARRANTY DEED
Excise Tax: \$59.00	
Parcel Identifier No. 000 5 33 Verified by By:	County on the day of, 20
Mail/Box to: GRANTEE This instrument was prepared by: Malcolm E. Harris, P./ Brief description for the Index: Lot 1, Cypress Pointe Sub THIS DEED made this 17th day of August, 2012, by and	ndivision
GRANTOR	GRANTEE
Deacon Development CP, LLC	D.R. Horton, Inc.
P.O. Box 400 Rolesville, NC 27571	2000 Aerial Center Parkway Suite 110 Morrisville, NC 27560
The designation Grantor and Grantee as used herein shall singular, plural, masculine, feminine or neuter as required	include said parties, their heirs, successors, and assigns, and shall include by context.
by these presents does grant, bargain, sell and convey unto City of,	tion paid by the Grantee, the receipt of which is hereby acknowledged, has and the Grantee in fee simple, all that certain for or pardel of land situated in the Township, Harnett County, North Carolina and more particularly described
as follows:	
Being all of Lot 1, Phases One and Two of Cypress Pointe 576, Harnett County Registry.	Subdivision, as shown on map recorded in Book of Maps 2011, Pages 575 &

The above described property ____ does XX does not include the primary residence of a Grantor (pursuant to NCGS 105-317.2).

NC Bar Association Form No. 3 © 1976, Revised © 1977, 2002 Printed by Agreement with the NC Bar Association – 1981 - Chicago Title Insurance Company The property hereinabove described was acquired by Grantor by instrument recorded in Book 2833, Page 490, Harnett County Registry.

A map showing the above described property is recorded in Map Number 2011, Pages 575 and 576, Harnett County Registry.

PO 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 Granter 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:

Ad Valorem taxes for current and subsequent years.

- 2. Declaration of Covenants, Conditions and Restrictions recorded in Book 2914, Page 52, Harnett County Registry.
- 3. Matters revealed on the above described subdivision map.

IN WITNESS WHEREOF, the Grantor has duly executed the foregoing as of the day and year first above written. Deacon Development CP, LCC (SEAL) State of North Carolina - County of Wake-I certify that the following person (s) personally appeared before me this day, each acknowledging to me that he or she voluntarily signed the foregoing document for the purpose state herein and in the capacity indicated: Kenneth W. Goetze, Manager of Deacon Development CP, LLC, a North Carolina limited liability company. Official Signature of Notary

JULIE A. McBeiDE McD Man (Official Seal) Notary's printed or typed name My commission expires: 04-01-2016 NC Bar Association Form No. 3 @ 1976, Revised @ 1977, 2002

Printed by Agreement with the NC Bar Association - 1981 - Chicago Title Insurance Company

* Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address, company name & phone must match

Application # Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Application for Residential Building and Trades Permit

Owner's Name: N O No. to a los	
Owner's Name: D. K. Mo Do Joc.	Date: 4 4.15
Site Address: 15 Higharun Pt	Phone: 919 4(a) -2933
Directions to job site from Lillington:	
Subdivision CYDICIS Privale	1-1
	Lot: 1
Heated SF. 2173 Unheated SF. 2753 Finished Bonus Room?	# of Bedrooms: 3
General Contractor Information	Claud Space: Slab: V
D.R. Howard - In	919 460 · 2437
Building Contractor's Company Name	Telephone
2000 acral Center Plan Suntello	minguy edihouter.com
Address , 11 n Morrisville (UC >) (20)	Email Address
HM Scott Kano	<u> </u>
Signature of Owner/Contractor/Officer(s) of Corporation	License #
Description of Work Electrical Contractor Informatio	<u>n</u> Amps_T-Pole: <u></u> ✓YesNo
-inspecial Glastic	919 363 - 7474
Electrical Contractor's Company Name	Telephone
1.0.30x162 BOLK DC 27502	Camponizzia e mindesuro
Address &	Email Address
Strate May Mulin	19850 L Can
Signature of Owner/Contractor/Officer(s) of Corporation Mechanical/HVAC Contractor Inform	License #
Description of Work New Construction Inform	lation
Ym Plumbine	231 900 1025
Machanical Contractorio Co	336 - 793 - 19 13 Telephone
615 Galin St. Ku aus Ile 13	Telephone
Address	Email Address (mulumbing com
Dane Masta	23529
Signature of Owner/Contractor/Officer(s) of Corporation	License #
Plumbing Contractor Information	<u> </u>
Description of Work New Construction	# Baths_ 2.5
ym Plumbing	333-993-1925
Plumbing Contractor's Company Name	Telephone
Address Address	Amusine ymplumbing. com
Thomas 304	Lilian Address V
Signature of Owner/Contractor/Officer(s) of Corporation	23529
Insulation Contractor Informatio	License #
Tatur wholation 51901d Burestone RV.	<u>919 661-0999</u>
Insulation Contractor's Company Name & Address A	Telephone
Modern Software & Company Name & Address Counc. AC	Q
*NOTE: General Contractor must fill out and sign the seco	nd 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? Yes No
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? YesNo
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 <u>any</u> 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 schedule. Signature of Owner/Contractor/Officer(s) of Corporation Date
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 corporation carrying out the work.
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 corporation

DO NOT REMOVE!

etails: Appointment of Lien Agent

Entry #: 655

Filed on: 04/04/2013 Initially filed by: mmguy

Designated Lien Agent

Chicago Title Company, LLC

Property Type

1-2 Family Dwelling

Owner Information

dr horton inc 2000 aerial cenger pkwy suite 110a morrisville, NC 27560 Email: mmguy@drhorton.com

Phone: 919-795-7299

Contractor Information

drhorton inc 2000 aerial center pkwy suite 110a morrisville, NC 27560

Email: mmguy@drhorton.com

Phone: 919-795-7299

Project Property

cypress pointe lot 1 15 highgreen pt cameron, NC 28326

Pre-Permit Workers

none

Filing Notification Alerts

Filer Email 1: mmguy@drhorton.com

Print & Post



Contractors:

Please post this notice on the Job Site.

Suppliers and Subcontractors:

Scan this image with your smart phone to view this filing. You can then file a Notice to Lien Agent for this project.

Filing Location Information:

Online: www.liensnc.com • Address: 19 W. Hargett St., Suite 507 / Raleigh, NC 27601 • Email: support@liensnc.com •

Fax: (919) 489-5231 • Technical Support Hotline: (888) 690-7384 •

P.O. BOX 65 LILLINGTON, NC 27546 For Inspections Call: (910) 893-7525 Fax: (910) 893-2793 Bldg Insp scheduled before 2pm available next business day. Application Number 13-50031092 Date 5/24/13 Property Address 15 HIGHGREEN PT Owner Contractor ------DR HORTON INC D.R. HORTON INC 2000 AERIAL CENTER PKWY 2000 AERIAL CENTER PKWY MORRISVILLE NC 27560 SUITE 110 MORRISVILLE (919) 460-2933 MOKKISVILLE (919) 460-2969 NC 27560 Applicant -----DR HORTON INC #1 2000 AERIAL CENTER PKWY MORRISVILLE NC 27560 (919) 460-2933 --- Structure Information 000 000 33X41 3BDR MONO W/ GARAGE Flood Zone FLOOD ZONE X Other struct info # BEDROOMS PROPOSED USE 3000000.00 SFD SEPTIC - EXISTING? NEW TANK COUNTY WATER SUPPLY ______ Permit BLDG, MECH, ELEC, PLB, INSU PERMIT Additional desc . . Phone Access Code . 978130 Issue Date . . . 5/24/13 Valuation . . . Expiration Date . . 5/24/14-Special Notes and Comments T/S: 04/17/2013 10:38 AM JBROCK ----CYPRESS POINTE S/D LOT 1 PERMIT INCLUDES BLDG, ELEC, MECH, PLUMB INSULATION AND LAND USE. Work must conform and comply with the STATE BUILDING CODE and all other State and local laws, ordinances & regulations

HARNETT COUNTY CENTRAL PERMITTING

HARNETT COUNTY CENTRAL PERMITTING P.O. BOX 65

LILLINGTON, NC 27546

For Inspections Call: (910) 893-7525 Fax: (910) 893-2793 Bldg Insp scheduled before 2pm available next business day.

Page 2 Date 5/24/13 Application Number 13-50031092 Property Address 15 HIGHGREEN PT

Application description . . . CP NEW RESIDENTIAL (SFD) Subdivision Name CYPRESS POINTE 30LOTS Property Zoning PENDING

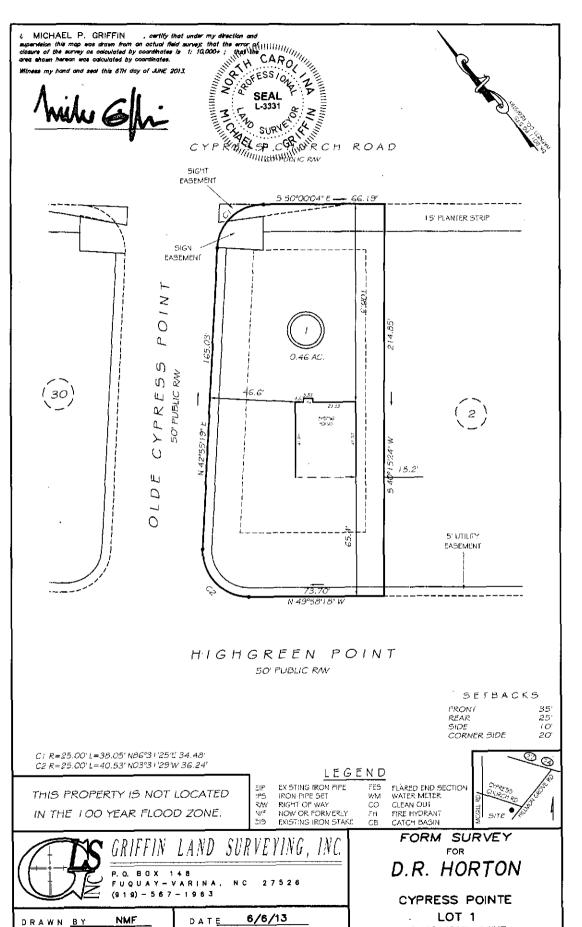
Permit BLDG, MECH, ELEC, PLB, INSU PERMIT

Additional desc . .

Phone Access Code . 978130

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
10-30	814	A814	ADDRESS CONFIRMATION		/ /
10-999	309	P309	R*PLUMB UNDER SLAB		— _/ — _/ —
10-999	205	E205	R*ELEC UNDER SLAB		- / - / -
20-999	114	B114	R*BLDG MONO SLAB/TEMP SVC POLE		//
30-50	129	I129	R*INSULATION INSPECTION		//
30-60	425	R425	FOUR TRADE ROUGH IN		_/_/_
30-60	125	R125	ONE TRADE ROUGH IN		_/_/_
30-60	325	R325	THREE TRADE ROUGH IN		//
30-60	225	R225	TWO TRADE ROUGH IN		_/_/_
40-60	429	R429	FOUR TRADE FINAL		//
40-60	131	R131	ONE TRADE FINAL		/_/_
40-60	329	R329	THREE TRADE FINAL		//
40-60	229	R229	TWO TRADE FINAL		//
999		H824	ENVIR. OPERATIONS PERMIT		/ /



1" = 40"

SCALE

MPG

CHECKED_BY

209

15 HIGHGREEN POINT CAMERON, N.C.

HARNETT CO. JOHNSONVILLE TOWNSHIP

COUNTY OF HARNETT Building Inspections Department Planning Services Certificate of Compliance:_____ Occupancy: Certificate issued pursuant to the requirements of North Carolina General Statute 153A-363 and Harnett County Zoning Ordinances. This certifies at the time of issuance, this structure was in compliance with the various ordinances of the County of Harnett and the North Carolina State Building Codes. For the following: Use Classification: **Permit Numbers** Building: _ Electrical: Address: Address Insulation: Plumbing: Mechanical: ME@ Home: Date: 9-4-15 **Building Official:**

PREPARED 9/03/13, 14:21:45
Harnett County INSPECTION TICKET PAGE · INSPECTOR: IVR DATE 9/04/13

ADDRESS. : 15 HIGHGREEN PT SUBDIV: CYPRESS POINTE 30LOTS

CONTRACTOR : D.R. HORTON INC PHONE: (919) 460-2969 OWNER . . : DR HORTON INC PHONE: (919) 460-2933

PARCEL . . : 09-9544- - -0024-- -

APPL NUMBER: 13-50031092 CP NEW RESIDENTIAL (SFD) DIRECTIONS : T/S: 04/17/2013 10:38 AM JBROCK ----

CYPRESS POINTE S/D LOT 1

---**--**

STRUCTURE: 000 000 33X41 3BDR MONO W/ GARAGE

FLOOD ZONE . . . : FLOOD ZONE X

BEDROOMS 3000000.00 PROPOSED USE : SFD SEPTIC - EXISTING? . . . : NEW TANK WATER SUPPLY : COUNTY

PERMIT: CPSF 00 CP * SFD					
	REQUESTED	INSP	DESCRIPTION		
TYP/SQ	COMPLETED R	RESULT	RESULTS/COMMENTS		
A814 01	6/06/13 T	ΓW	ADDRESS CONFIRMATION TIME: 17:00 VRU #: 002392603		
	6/07/13 A	AP	15 HIGHGREEN PT CAMERON 28326		
•			T/S: 06/07/2013 10:59 AM TWARD		
P309 01	6/06/13 F	FŚ	R*PLUMB UNDER SLAB TIME: 17:00 VRU #: 002392611		
	6/06/13 A	AP	T/S: 06/06/2013 03:04 PM FSPIVEY		
B104 01	6/07/13 J	JB	R*FOUND & SETBACK VERIF SURVEY TIME: 17:00 VRU #: 002393551		
	6/07/13 A	ĄΡ	T/S: 06/07/2013 11:04 AM JBROCK		
B114 01	6/11/13 F	FS	R*BLDG MONO SLAB/TEMP SVC POLE VRU #: 002393981		
	6/11/13 A	ΑP	T/S: 06/11/2013 03:21 PM FSPIVEY		
R425 01	7/16/13 F	FS	FOUR TRADE ROUGH IN TIME: 17:00 VRU #: 002410116		
	7/17/13 A	AP	T/S: 07/17/2013 03:07 PM FSPIVEY		
I129 01	7/19/13 F	FS	R*INSULATION INSPECTION TIME: 17:00 VRU #: 002412047		
	7/19/13 A	AP	T/S: 07/19/2013 03:23 PM FSPIVEY		
H824 01	8/02/13 E	ВМ	ENVIR. OPERATIONS PERMIT TIME: 17:00 VRU #: 002420958		
	8/02/13 A	AΡ	T/S: 08/05/2013 11:14 AM SSTEWART		
			T/S: 08/05/2013 11:14 AM SSTEWART		
R429 01	9/04/13 T	ry///	FOUR TRADE FINAL VRU #: 002434264		
	94-13 8	41			
	7 / 10				
			COMMENTS AND NOTES		
	7	i			

PREPARED 6/05/13, 14:13:55
Harnett County

INSPECTION TICKET INSPECTOR: IVR

PAGE DATE

6/06/13

ADDRESS : 15 HIGHGREEN PT SUBDIV: CYPRESS POINTE 30LOTS

CONTRACTOR : D.R. HORTON INC

PHONE : (919) 460-2969 PHONE : (919) 460-2933

OWNER . . : DR HORTON INC

PARCEL . . : 09-9544- - -0024-- -

APPL NUMBER: 13-50031092 CP NEW RESIDENTIAL (SFD)
DIRECTIONS: T/S: 04/17/2013 10:38 AM JBROCK ----

CYPRESS POINTE S/D LOT 1

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FLOOD ZONE . . . : FLOOD ZONE X

SEPTIC - EXISTING? . . . : NEW TANK WATER SUPPLY : COUNTY

PERMIT: CPSF 00 CP * SFD

REQUESTED INSP DESCRIPTION

TYP/SQ COMPLETED RESULT RESULTS/COMMENTS

A814 01 6/06/13 TI ADDRESS CONFIRMATION TIME: 17:00 VRU #: 002392603

2

P309 01 5/06/13 T#/ R*PLUMB UNDER SLAB TIME: 17:00 VRU #: 002392611

----- COMMENTS AND NOTES --------