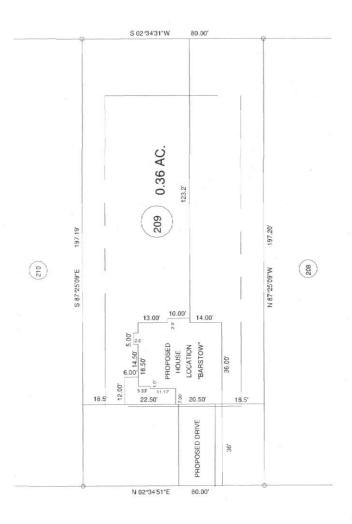
//	
Initial Application Date: 9/5/13	Application # 1350032077
/ /	CU#
COUNTY OF HARNE Central Permitting 108 E. Front Street, Littington, NC 27546	Phone: (910) 893-7525 Fax: (910) 893-2793 www.harnett.org/permits
LANDOWNER: Havnett Carol Grap	Mailing Address: POXXX 591
City:	278 Home #:
	Mailing Address: Po Box 2067
City: State: A Zio: A	830 Home #: Contact #: 910-988 640 f
C V/ I V.	
CONTACT NAME APPLYING IN OFFICE: H. CLICLE	Measure Phone #: 910-983-6404
	wen tome Lot #: 209 Lot Acreage: 362
State Road #: State Road Name:	Map Booka Page: No 10 1000
	PIN:
Zoning: KH-20R Flood Zone: Watersheet	Deed Book& Page: 2257/ 99 Power Company*: Like Energy
*New homes with Progress Energy as service provider need to supply	premise number from Progress Energy.
SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:	
- Suj & 1 40 00	& Quale (1) have on (6)
/	
PROPOSED USE: SFD (Size 38 x 13) # Bedrooms 3 # Baths 3 Baser (Is the bonus room finished? w/ a closet if so	ment (w/wo bath) Garage Crawl Space
	nent (w/wo bath) Garage Site Built Deck ON Frame / OFF
(Is the second floor finished? Any other site built addit	ions?)
Manufactured Home:SWDWTW (Sizex_	# Bedrooms Garage(site built?) Deck(site built?)
☐ Duplex (Sizex) No. Buildings No. Bedroom ☐ Home Occupation # Rooms Use	
☐ Home Occupation # Rooms Use ☐ Addition/Accessory/Other (Size x) Use	Hours of Operation:#Employees
Water Supply: (County (No. dwellings) Sewage Supply: (New Septic Tank (Complete Checklist)	MUST have operable water before final
	() Existing Septic Tank (Complete Checklist) ()County Sewer and home w/in five hundred feet (500') of tract listed above? ()YES ()NO
	pufactured Homes Other (specify)
Required Residential Property Line Setbacks: Comments:	The state of the s
Front Minimum 53 Actual 36	
Rear 25 133.2	
Closest Side 10 18.5	
Sidestreet/corner lot	
Nearest Building on same lot	
Thereby state that foreigning statements are accurate and correct to the	State of North Carolina regulating such work and the specifications of plans submitted. st of my knowledge. Permit subject to revocation if false information is provided.
Hill Heavant	or my knowledge. Permit subject to revocation if false information is provided.
Signature of Owner or Owner's Agent	Date

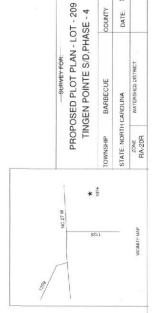
"This application expires 6 months from the initial date if no permits have been issued" A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION



"OMAHA DR." 50' R/W

SITE PLAN APPROVAL
DISTRICT RADES USE STA #BEDROOMS Zoning Administrator

MAP NO. 2013-263



DRAWING NO. FIELD BOOK

RVB

40" SURVEYED BY: DRAWN BY:

20. 0 SCALE: 17=

SEPTEMBER 05,2013

HARNETT

COUNTY DATE

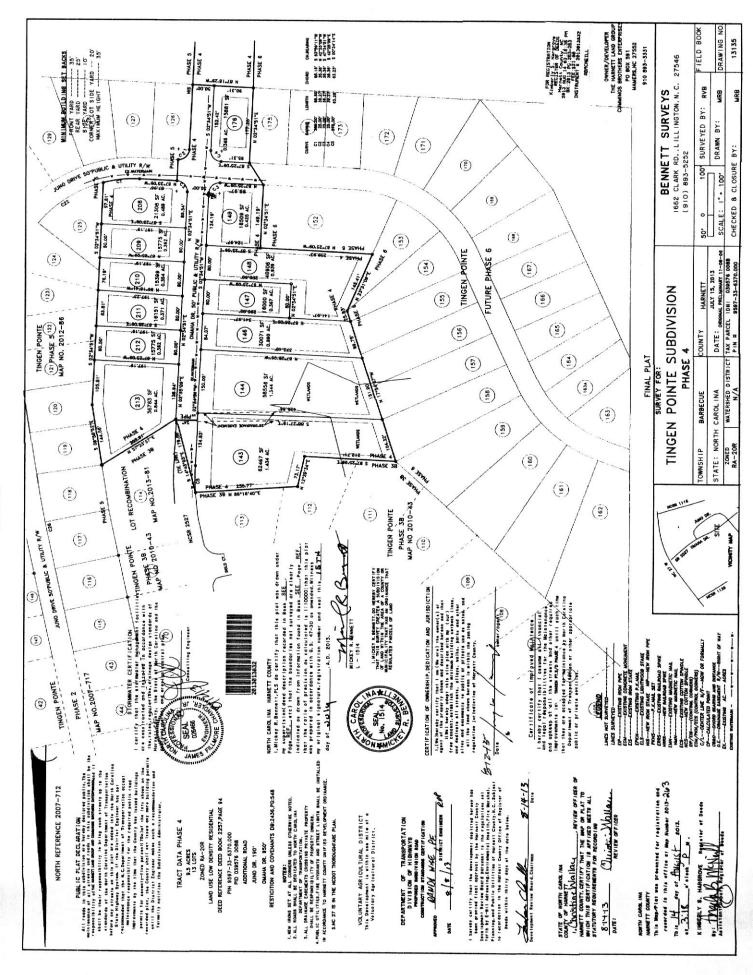
BENNETT SURVEYS 1662 CLARK RD., LILLINGTON, M.C. 27546 (910) 893-5252

13327

CHECKED & CLOSURE BY: 40,

MAP REFERENCE: MAP NO. 2013-263

VIMUM BUILDING SET BACKS



NAME: MSP	Const. & Dor. L	LC	APPLICATIO	ON #:	
	*This application to be	filled out when applying	for a contin		
County Health	Denariment Applicat	TOR TOR IMPROVED	4 M- 14 11		
PERMIT OR AUTHORIZ	ZATION TO CONSTRUCT S	HALL BECOME DIVINE	OR THE SITE IS ALT	ERED, THEN THE IMPROVI	<u>Istruct</u> EMENT
depending upon documen	station submitted. (Complete s	ite plan = 60 months; Comp	lete plat = without exp	iration)	expiration
/10-073-732	option i		CONFIRMAT	ION#	
	Health New Septic Syst	<u>em</u> Code 800			
	Significance application	lately every but leet her	WOOD CATRARA	ach corner iron of lot. A	
out buildings,	e nouse corner flags" at a swimming pools, etc. P	each corner of the prop lace flags per site plan	osed structure. A	lso flag driveways, garag Central Permitting	
· race drange	r Cilvironmental Health c	ard in location that is ea	eily viewed from a	and to!-+! !	ronarty
evaluation to	be performed. Inspector	mental Health requires 's should be able to wal	that you clean out	the <u>undergrowth</u> to allo	w the soil
	, auuressea within 10 h	lisinase dave after co	refirmation CSE A	A	50 <u>.</u>
TOT IMITED TO	uncover outlet nu. mar	R nouse corners and	nronartilinaa -4	c. once lot confirmed re option 1 to schedule and	
222 (41101 001	coming mounication permit	. Il mulliple permits exis	II) for Environmen	option 1 to schedule and tal Health inspection. Pl	use code ease note
SOLDHIT TOTAL	number given at end of report or IVR to verify results.	scording for proof of rec	luest.		
<u> </u>	ieaith Existing Tank ins	spections Code 800		mitting for permits.	
 Follow above 	instructions for placing fl	ags and card on proper	ty.		
 Prepare for in 	nspection by removing s	oil over outlet end of t	ank as diagram in	ndicates, and lift lid strai	ght up (if
After uncoveri	ing outlet end call the voi	niess inspection is for a	a septic tank in a n	nobile home park)	
maniple perm	us, men use code 800 fc	or Environmental Health	inspection. Pleas	e note confirmation num) permit if ber given
at cita of 1600	rung for proof of request	,			
	Voi TVIX to fleat results.	Once approved, procee	d to Central Perm	itting for remaining permit	is.
SEPTIC If applying for authorizat	tion to construct please indica	ate desired system type(s):	can be ranked in ord	er of preference, must choose	one
Accepted	[] Innovative	[] Conventional	{ } Any	,	one.
Alternative	{}} Other			<i>2</i>	
he applicant shall notify uestion. If the answer is	y the local health departments "yes", applicant MUST A	nt upon submittal of this a	— pplication if any of DOCUMENTAT	the following apply to the price to the pric	roperty in
_ YES [_NO	Does the site contain any	Jurisdictional Wetlands?			
)YES () NO	Do you plan to have an ir	rigation system now or in	the future?		
_IYES _INO	Does or will the building	contain any drains? Pleas	e explain		
) YES () NO	Are there any existing we	lls, springs, waterlines or	Wastewater System	s on this property?	
IYES () NO	Is any wastewater going t	o be generated on the site	other than domestic	sewage?	
)YES ()NO	Is the site subject to appro	oval by any other Public A	gency?		
_IYES _ NO	Are there any easements of	or Right of Ways on this p	roperty?	*	
_IYES / NO	Does the site contain any	existing water, cable, phot	ne or underground e	lectric lines?	
	If yes please call No Cuts	at 800-632-4949 to locate	e the lines. This is a	free service.	
Have Read This Applicat	ion And Certify That The In	formation Provided Herein	ls True, Complete A	and Correct. Authorized Cou	inty And

1 H 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 56r, 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)

NORTH CAROLINA HARNETT COUNTY

OFFER TO PURCHASE AND CONTRACT OF SALE

THIS CONTRACT OF SALE, made and entered into this 26th day of July, 2013, by and between The Harnett Land Group, LLC, (the "Seller") and MSP Construction & Development. (the "Buyer").

WITNESSETH:

IN CONSIDERATION of the mutual covenants, promises and conditions hereinafter set forth and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged by the parties, the parties hereto agree as follows:

1. PROPERTY. Seller agrees to sell to the Buyer and the Buyer agrees to purchase from the Seller the fee simple property lying in Harnett County, North Carolina, Tingen Point Subdivision, Barbecue Township, and being more particularly described as:

Being all of lot(s) 208, 209, 211, 212 and 144 in the subdivision known as Tingen Point, Phase VI, according to a plat of the same duly recorded in Plat Book 2012, Page 86-87, Deed Book 2257, Page 94, Harnett County, North Carolina, Registry.

If any personal property is to transfer to the Buyer from Seller, such property shall be given no value hereunder.

- 2. PURCHASE PRICE AND DEPOSIT. Buyer shall pay to the Seller the sum of ONE HUNDRED THIRTY THOUSAND and No/100 Dollars (\$130,000), the "Purchase Price". The Purchase price shall be paid as follows:
 - A. \$0.00 as a good faith deposit (the "Earnest Money"), to be held in trust by Weaver Commercial Properties pending the completion of this contract or termination of this contract as hereinafter provided, and to be applied toward the purchase price.
 - B. \$130,000.00 due upon closing.
- 3. CONDITIONS TO BUYER'S OBLIGATIONS. The Buyer's obligation to purchase the Property pursuant to this Contract is contingent upon the following, all or any of which may be waived by the Buyer:
 - A. All deeds of trust, liens, and other charges against the Property must be paid and satisfied by Seller prior to or at closing such that cancellation may be promptly obtained following closing. Seller shall remain obligated to obtain any such cancellations following closing.

(SEAL)

- 18. EXECUTION. This instrument shall become a binding contract when signed by both Buyer and Seller.
- 19. EXPIRATION OF OFFER. This instrument shall be deemed an offer to the Seller which may be accepted by signature of the Seller and delivery of the original to the Buyer. This offer shall be deemed revoked and null and void if not accepted by the Seller and delivered to the Buyer by 5:00 p.m. on August 15, 2013.
- 20. OTHER PROVISIONS and CONDITIONS. Buyer understands and agrees that all building construction and site improvements on any subdivision lot shall comply with all restrictions and covenants as set forth in the Tingen Point Subdivision Restrictive Covenant Agreement.

IN WITNESS WHEREOF, this Contract is executed under seal in signed multiple originals, all of which constitute one and the same instrument, with a signed original being retained by each party, and the parties adopt the word "seal" beside their signatures below.

BUYER:

By: MSP Construciton & Dev.

by the construction & Dev.

Data:

SELLER:

By: Dustin Blackwell Member/Manager

Date: 7/26

* Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address, company name & phone must match information on	Harnett County Cen PO Box 65 Lillington	tral Permitting		
license.	Telephone Number 910-893- Application for Building	7525 www.harnett.org		
Owner's Name:	aust. Y Dar	111		
Address:				
			:	
Directions to job site from Lillingto	on:			
Subdivision: Timen	Pointe	Lot:	209	
Construction Type: (Please Ched — New Moved House Renovation Addition	eside	t <u>se</u> : (Please Check) ential Cor ar Mul	nmercial ti-Family	
Total Project Cost:				
Heated SFCrawl Space (General Contractor	<u>Information</u> onstruction Cost \$		
Unheated SF Slab ()	Acres Dist	turbed	Stories	
1751 Construction		910-988-64	04	mpleasant 10
Building Contractor's Company Na	ame le	elephone		MPlease
P.O. Box 2067	layetteville, NC	58307	69166	
Address S. Hea	saut :		License #	
Signature of Owner/Contractor/Of	ficer(s) of Corporation – N	lust sign back of form & wo	orkers comp	
Description of Work Electric	Flootrical Darmit	nformation		
15 Pole. Yes () No () Underg	round() Overhead	()		
Permanent Service: Underground	() Overhead () Se	ervice Size:	Amps	
Places Electric Maintenants Electrical Contractor's Company N	ame Te	19-499- 7-70 Rephone	67 ————————————————————————————————————	. *
Address Ad Lil	lington NC 2754	6	21643-U	
11.118	32	_	Licerise #	
Signature of Officer(s) of Corporati	on			
	Mechanical Permit	<u>Information</u>		
Description of Work				
Number of Units	Type System	Mechanical Cost \$	1000	
Mechanical Convector's Compa	Name Inc.	Telephone		
508 Was M	MKG7 34 (30	ithred =	1.1cense #	
Signature of Officer(s) of Corpor	ation			
Description of Work 7 lunding	Plumbing Permit In			
Number of Baths 2		ımbing Cost \$		
JAMIE Johnson Plus	abi-y	Talankana		
Plumbing Contractor's Company N		Telephone L. 27545	21649	
1490 Clark Rd	Lillingha, N.	L. 2/34>	License #	
Jam Joh			2.501100 11	
Stonature of Officer(s) of Corporation				
Insulation Permit	Information Residentia			
Insulation Contractor's Company N	Tame & Address	710-4	86-8855 Telephone	
modiation Contractor's Company N	anic a vadices		relephone	

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? Yes No					
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? YesNo					
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 Of Months/to 2 years permit re-is sue 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					
Accidental and the second and the se					
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					
The undersigned applicant being the:					
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					
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:					
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					
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					
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.					
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					

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.

Application Number 13-50032077 Date 10/29/13

Property Address 883 OMAHA DR

PARCEL NUMBER 03-9576-01- -0088- -60-Application type description CP NEW RESIDENTIAL (SFD) Subdivision Name TINGEN POINTE PH 4 13LOTS

Property Zoning RES/AGRI DIST - RA-20R

Owner Contractor

THE HARNETT LAND GROUP II LLC MSP CONSTRUCTION & DEV LLC

PO BOX 2067 PO BOX 326

NC 28302 NC 27597 FAYETTEVILLE ZEBULON

(910) 988-6404

0

Applicant

-----MSP CONSTRUCTION LLC #209

PO BOX 2067

FAYETTEVILLE NC 28302

(910) 988-6404

Structure Information 000 000 38X41 3BDR CRAWL W/ GARAGE

Flood Zone FLOOD ZONE X

3000000.00 Other struct info # BEDROOMS

SFD

BEDROOMS PROPOSED USE SEPTIC - EXISTING? NEW TANK WATER SUPPLY

Permit BLDG, MECH, ELEC, PLB, INSU PERMIT

Additional desc . .

Phone Access Code . 1006980
Issue Date . . . 10/29/13 Valuation Expiration Date . . 10/29/14

Special Notes and Comments

T/S: 09/06/2013 09:37 AM JBROCK ----

TINGEN POINTE #209

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 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
Application Number 13-50032077 Date 10/29/13

Application Number 13-50032077 Property Address 883 OMAHA DR

Permit BLDG, MECH, ELEC, PLB, INSU PERMIT

Additional desc . .

Phone Access Code . 1006980

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
Seq 10 20 20-30 30-999 30 40-50 40-60 40-60 40-60 50-60 50-60	Insp# 101 103 814 105 104 129 425 125 325 429 131 329	Code B101 B103 A814 B105 B104 I129 R425 R125 R325 R429 R131 R329	R*BLDG FOOTING / TEMP SVC POLE R*BLDG FOUND & TEMP SVC POLE ADDRESS CONFIRMATION R*OPEN FLOOR R*FOUND & SETBACK VERIF SURVEY R*INSULATION INSPECTION FOUR TRADE ROUGH IN ONE TRADE ROUGH IN THREE TRADE ROUGH IN TWO TRADE ROUGH IN FOUR TRADE FINAL ONE TRADE FINAL THREE TRADE FINAL	Initials	Date
50-60 999	229	R229 H824	TWO TRADE FINAL ENVIR. OPERATIONS PERMIT		_/_/_

TOWNSHIP BARBECUE STATE: NORTH CAROLINA FOUNDATION LOCATION SURVEY - LOT TINGEN POINTE S/D,PHASE - 4 WATERSHED BIBTRICT TAX PARCEL (DH: SURVEY FOR: COUNTY HARNETT 209 CHECKED & CLOSURE BY: RYB SCALE: 1" 40" BENNETT SURVEYS F-1304 1662 CLARK RD., LILLINGTON, N. C. 27546 (910) 893-5252 DRAWN BY: RYB FIELD BOO

MAP REFERENCE: MAP NO. 2013-263

E82-E102 .ON 9AM

87°25°09"E 197,19"

H

(B)

"OMAHA DR." 50' R/W

.00'08 3"12'4E"SO N

209) 0.36 AC.

00'08 M. IE. F. ZO S

(E)

H