

Initial Application Date: 11/20/14

Application # 1450035004
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: CUMBERLAND HOMES, INC Mailing Address: P.O. Box 727

City: Dunn State: NC 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: Joni Phone #: 910-892-4345

PROPERTY LOCATION: Subdivision: Carolina Seasons Lot #: 9 Lot Acreage: .42

State Road #: 1201 State Road Name: Ponderosa Rd Map Book&Page: 2009/ 96

Parcel: 09956702 0006 08 PIN: 9567-01-9807.000

Zoning: RA-20R Flood Zone: X Watershed: N/A Deed Book&Page: 3206/213 Power Company*: CEMC

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Take 27 West From Lillington, Take Right on Johnsonville School Rd, Take Right on Ponderosa Rd, Turn Left into Subdivision, Turn Right on Green Links Drive, (R) ON SPRINGFLOWERS DR. LOT IS ON (R)

- PROPOSED USE: (Include Bonus room as a bedroom if it has a closet)
- SFD (Size 426' x 414') # Bedrooms 3 # Baths 2 1/2 Basement (w/wo bath) _____ Garage PATIO Deck Crawl Space Slab Circle: 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>38</u>	_____
Rear	<u>25</u> <u>67</u>	_____
Closest Side	<u>10</u> <u>11'</u>	_____
Sidestreet/corner lot	<u>20</u> <u>N/A</u>	_____
Nearest Building on same lot	<u>N/A</u> <u>N/A</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.

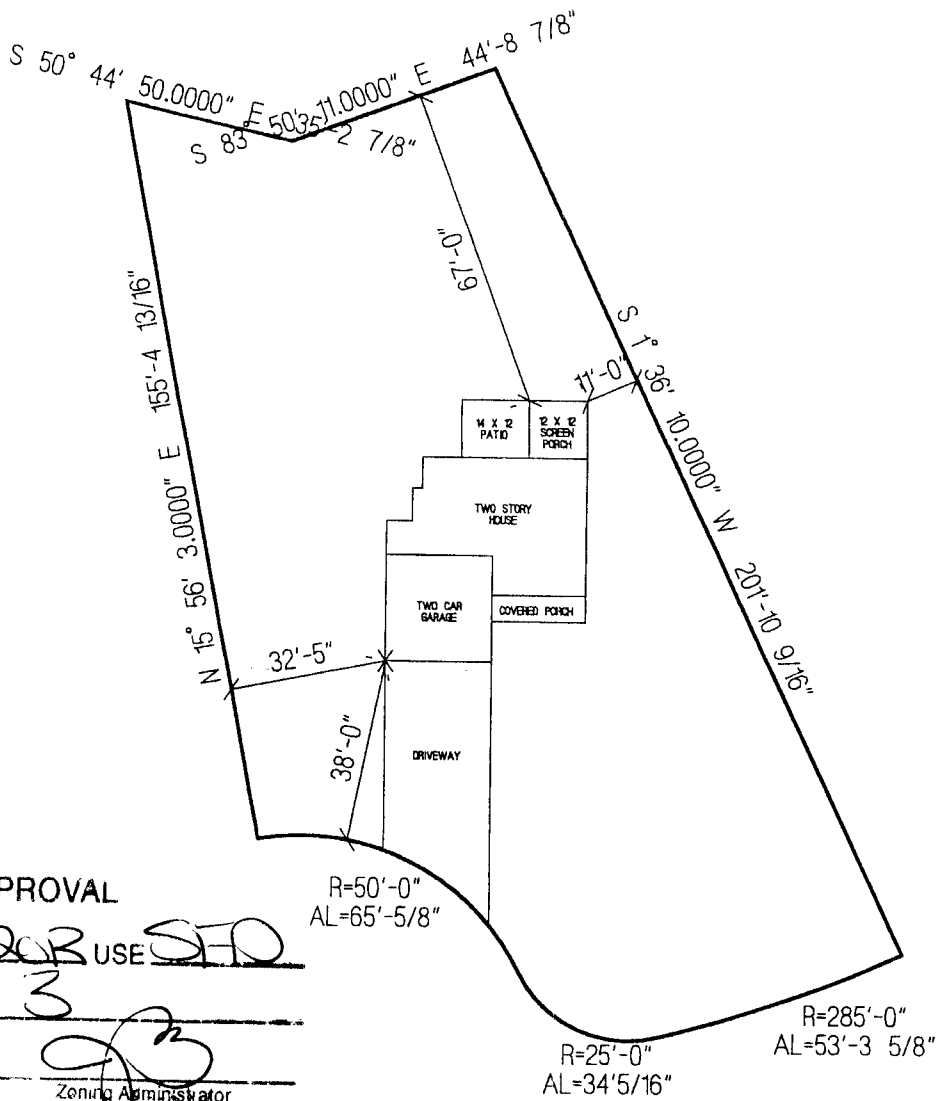
[Signature]
Signature of Owner or Owner's Agent

11/20/14
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



SITE PLAN APPROVAL

DISTRICT RA20R USE SFD

#BEDROOMS 3

Date 11-21-14 
 Zoning Administrator

SPRING FLOWERS DRIVE

SILVERADO HOMES, LLC.
 LOT # 9 CAROLINA SEASONS
 THE FAIRFIELD II WITH SCREEN PORCH
 SCALE: 1"=40'

For Registration Kimberly S. Hargrove
Register of Deeds
Harnett County, NC
Electronically Recorded
2014 Nov 13 11:05 AM NC Rev Stamp: \$ 64.00
Book: 3260 Page: 213 Fee: \$ 26.00
Instrument Number: 2014015262

HARNETT COUNTY TAX ID #
09956702 0006 08

11-13-2014 BY MT

**NORTH CAROLINA
GENERAL WARRANTY DEED**

Excise Tax: \$64.00

Recording Time, Book and Page:

Tax Map No.

Parcel Identifier No: 09956702 0006 08

Mail after recording to: Lynn A. Matthews, III Commerce Drive, Dunn, NC 28334

This instrument was prepared by: Lynn A. Matthews, Attorney

THIS DEED made this 12th day of November, 2014 by and between

GRANTOR

Crestview Development LLC, a North Carolina Limited Liability Company

Mailing Address: P.O. Box 727, Dunn, NC 28335

GRANTEE

Cumberland Homes Inc., a North Carolina Corporation

Property Address: Lot 9, Carolina Seasons, Phase 2, Section 1, Cameron, NC 28326

Mailing Address: P.O. Box 727, Dunn, NC 28335

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 and more particularly described as follows:

Being all of Lots 9 of Carolina Seasons, Phase 2, Section 1 as shown on plat map recorded in Map Number 2009-96 thru 2009-99, Harnett County Registry. Reference to said map is hereby made for greater certainty of description.

This lot is conveyed subject to the Restrictive Covenants recorded in Book 2604, Page 212 and Book 3189, Page 883.

Submitted electronically by "Matthews Law Group PC"
in compliance with North Carolina statutes governing recordable documents
and the terms of the submitter agreement with the Harnett County Register of Deeds.

All or a portion of the property hereinabove described was acquired by Grantor by instrument recorded in Book 2230, Page 657, Harnett County Registry.

A map showing the above described property is recorded in Plat Book 2009, Page 96 thru 99, and referenced within this instrument.

Does the above described property include the primary residence (yes/no) ? **No**

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:

- 1. 2015 ad valorem taxes which are not yet due or payable
- 2. Restrictions, easements and rights of way as they appear of record

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 officer(s), the day and year first above written.

Crestview Development LLC, a North Carolina Limited Liability Company

(SEAL)

By: Danny E. Norris

Danny E. Norris
Title: Managing Member

(SEAL)

By: _____

Title: _____

(SEAL)

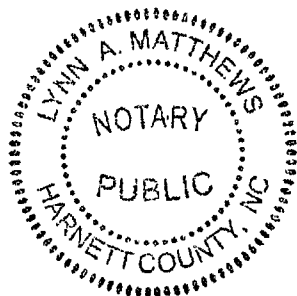
(SEAL)

STATE OF NORTH CAROLINA,

COUNTY OF HARNETT

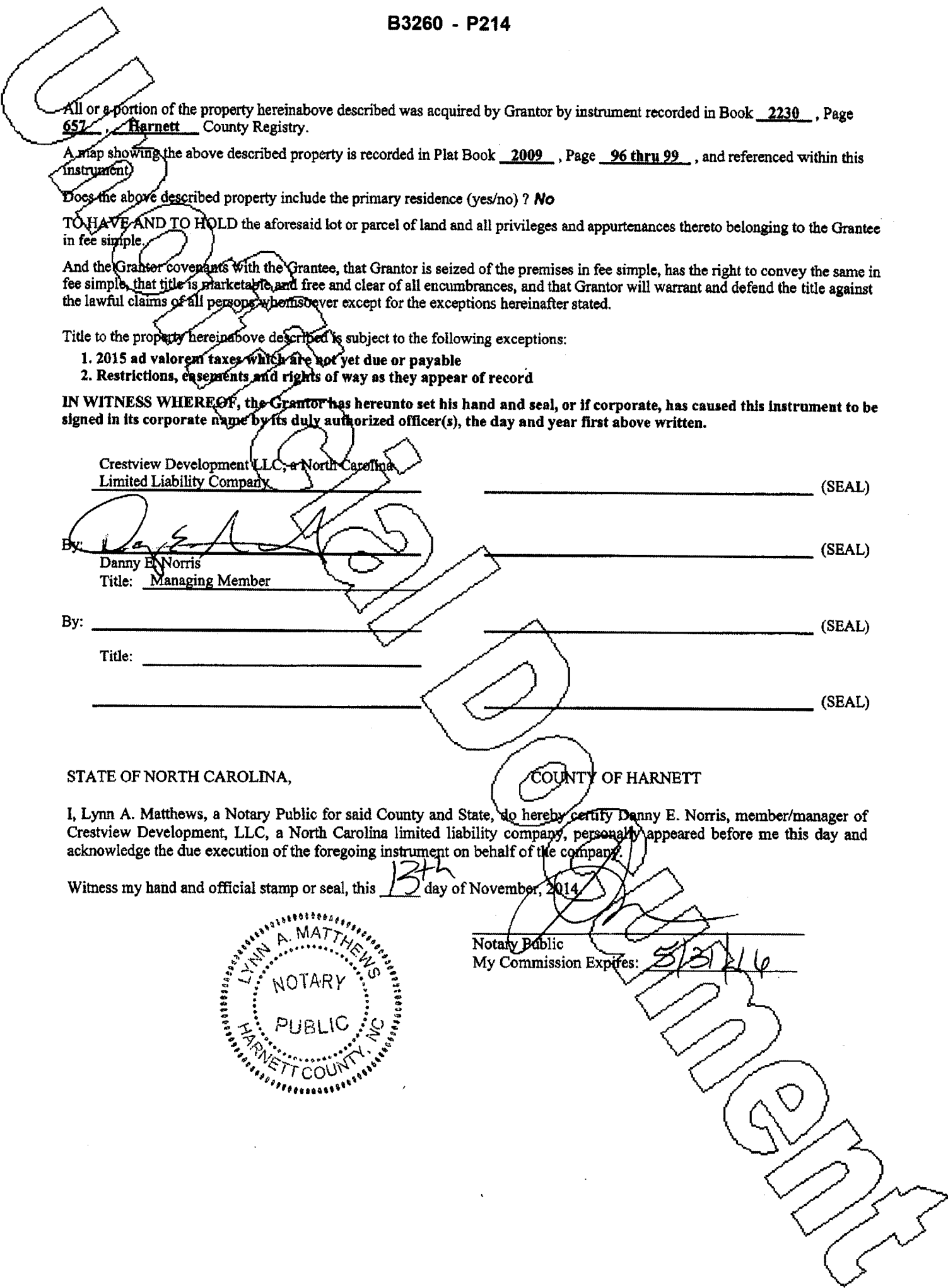
I, Lynn A. Matthews, a Notary Public for said County and State, do hereby certify Danny E. Norris, member/manager of Crestview Development, LLC, a North Carolina limited liability company, personally appeared before me this day and acknowledge the due execution of the foregoing instrument on behalf of the company.

Witness my hand and official stamp or seal, this 13th day of November, 2014.



Notary Public

My Commission Expires: 5/31/16



* 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 license.

Application # _____

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

Application for Residential Building and Trades Permit

Owner's Name: CUMBERLAND HOMES INC Date: 10/13/14
Site Address: SPRING FLOWERS DR Phone: 910-892-4345
Directions to job site from Lillington: 27 West Front Lillington, (R) on Johnsonville School Rd, (R) on Penderosa Rd, (L) into S/D, (R) on Green Links Dr, (R) ON SPRING FLOWERS, LOT ON (R)
Subdivision: Carolina Seasons Lot: 9
Description of Proposed Work: NSF #Bedrooms: 3
Heated SF 1935 Unheated SF 176 Finished Rec Room? NO Crawl Space () Slab (X)

General Contractor Information

Cumberland Homes Telephone 910-892-4345
Building Contractor's Company Name
PO Box 727 Dunn, NC 28335 Address
Darryl Harris License # 59493

Must sign & fill out second page

Signature of Owner/Contractor/Officer(s) of Corporation

Electrical Permit Information

Description of Work New Service Size: 200 Amps TPole yes no
Wester + Pace Telephone 919-499-5389
Electrical Contractor's Company Name
546 Leslie Dr. Sanford, NC. 27330 Address
William Wester License # 12007-U

Signature of Officer(s) of Corporation

Mechanical Permit Information

Description of Work New RESIDENTIAL
CERTIFIED HEATING & AIR, LLC Telephone 910 818-0600
Mechanical Contractor's Company Name
P.O. BOX 1071, HOPE MILLS, NC Address
28348 License # 20012

Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work New RESIDENTIAL # Baths 2 1/2
CURTIS FAIRCLOTH PLUMBING Telephone 910-531-3111
Plumbing Contractor's Company Name
5056 ELIZABETH TOWN HWY Address
ROSEBORO NC License # 7269
28382

Signature of Officer(s) of Corporation

Insulation Permit Information

INSULATING INC. Telephone 910 398-2952
Insulation Contractor's Company Name & Address 5902 FAYETTEVILLE RD
RALEIGH NC
27603

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)

- 1. Do you own the land on which this building will be constructed? yes no
- 2. 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? yes no
- 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.

[Signature]
Signature of Owner/Contractor/Officer(s) of Corporation

11/20/14
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.

Company or Name: Cumberland Homes

Sign w/Title: Dy his owner

Date: 11/20/14

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 14-50035004 Date 12/23/14
Property Address 21 SPRING FLOWERS DR
PARCEL NUMBER 09-9567-02- -0006- -08-
Application type description CP NEW RESIDENTIAL (SFD)
Subdivision Name CAROLINA SEASONS PH 2 80LOTS
Property Zoning RES/AGRI DIST - RA-20R

Owner Contractor

CUMBERLAND HOMES INC CUMBERLAND HOMES INC
PO BOX 727 PO BOX 727
DUNN NC 28335 DUNN NC 28335
(910) 892-4345

Applicant

CUMBERLAND HOMES INC #9
PO BOX 727
DUNN NC 28335
(910) 892-4345

--- Structure Information 000 000 42.6X41.4 3BDR SLAB W/ GARAGE
Flood Zone FLOOD ZONE X
Other struct info # BEDROOMS 3000000.00
PROPOSED USE SFD
SEPTIC - EXISTING? NEW TANK
WATER SUPPLY COUNTY

Permit BLDG,MECH,ELEC,PLB,INSU PERMIT
Additional desc
Phone Access Code 1063940
Issue Date 12/23/14 Valuation 157210
Expiration Date 12/23/15

Special Notes and Comments
T/S: 11/21/2014 10:44 AM JBROCK ----
CAROLINA SEASONS #9
XX
PERMIT INCLUDES BLDG,ELEC,MECH,PLUMB
INSULATION AND LAND USE.
XX
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
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Page 2
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Property Zoning RES/AGRI DIST - RA-20R

Permit BLDG,MECH,ELEC,PLB,INSU PERMIT

Additional desc . . .
Phone Access Code . . . 1063940

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
10	101	B101	R*BLDG FOOTING / TEMP SVC POLE	_____	___/___/___
20	103	B103	R*BLDG FOUND & TEMP SVC POLE	_____	___/___/___
20-30	814	A814	ADDRESS CONFIRMATION	_____	___/___/___
30-999	111	B111	R*BLDG SLAB INSP/TEMP SVC POLE	_____	___/___/___
30-999	309	P309	R*PLUMB UNDER SLAB	_____	___/___/___
30-999	205	E205	R*ELEC UNDER SLAB	_____	___/___/___
30	104	B104	R*FOUND & SETBACK VERIF SURVEY	_____	___/___/___
40-50	129	I129	R*INSULATION INSPECTION	_____	___/___/___
40-60	425	R425	FOUR TRADE ROUGH IN	_____	___/___/___
40-60	125	R125	ONE TRADE ROUGH IN	_____	___/___/___
40-60	325	R325	THREE TRADE ROUGH IN	_____	___/___/___
40-60	225	R225	TWO TRADE ROUGH IN	_____	___/___/___
50-60	429	R429	FOUR TRADE FINAL	_____	___/___/___
50-60	131	R131	ONE TRADE FINAL	_____	___/___/___
50-60	329	R329	THREE TRADE FINAL	_____	___/___/___
50-60	229	R229	TWO TRADE FINAL	_____	___/___/___
999		H824	ENVIR. OPERATIONS PERMIT	_____	___/___/___