k	. &	,
initial Application	Date: 16/8	2015

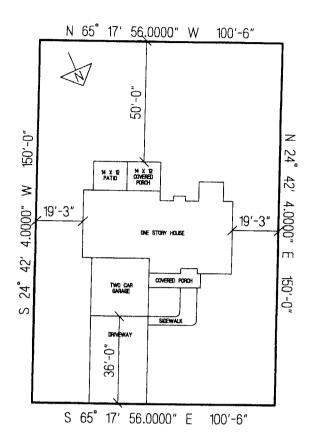
Applica	ion# 1550037258
	CI#

COUNTY OF WA
COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext; 2 Fav: (0.03)
"A PECOPORTO CHESTON A PARTIE (910) 893-7525 ext.2 Fax: (910) 893-2793
WWW.narnett.org/permits
"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION" LANDOWNER: MILLIMITED MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION" LANDOWNER: Mailing Address: Same as below City: Contact No: "Email: " Email: " Email: " Landowner: Mailing Address: Same as below City: State: Zip: Contact No: " Email: " Email: " Landowner: Mailing Address: Same as below City: State: To purchase and selection of the purchase and
Mailing Address:
City: // State: // Zip: // Contact No: // Email: //
APPLICANT: Curberland Starts Inc. Mailing Address: D. Box 727 City: Dunn State: 00 7: 28827
Mailing Address: DO Roy 717
City: Dunn State: 12 Zip: 28335 Contact No: 910-892-4345 Email: Journary's Contact No: 910-892-4345 Email: 910-892-910-910-910-910-910-910-910-910-910-910
*Please fill out applicant information if different than landowner
CONTACT NAME APPLYING IN OFFICE: Sinds or Joan Phone # 910-892-4345 PROPERTY LOCATION: Subdivision Jot # 187 B. 1/2 0
CONTACT NAME APPLYING IN OFFICE: Winds Or (-10-10)
Phone # 910 - 892 - 4345
PROPERTY LOCATION: Subdivision Lot # 182 BALLAND WOODS Lot #: 182 Lot Size: 13 Acres
State Road # State Book 1 2 Lot Size: 1/3 August 1/3 Au
Parrel DX Mas Proke p. 2001-0-
Parcel: 08 0652 0089 06 PIN: 0651-29-5627.000
Zoning: <u>PA-30-lood Zone:</u> <u>Watershed:</u> <u>Watershed:</u> <u>NA Deed Book & Page:</u> <u>OTP</u> <u>Power Company*:</u> <u>Puke (Pregress)</u>
*New structures with Progress Engraves
*New structures with Progress Energy as service provider need to supply premise number
PROPOSED USE:
SFD: (Size 62 x64) # Bedrooms: 3 # Baths: 2 Basemont(v)
SFD: (Size 62' x64') # Bedrooms: 3 # Baths: Z Basement(w/wo bath): Garage: Craw Space: Slab: Monolithic Slab: Slab: Monolithic Slab: Monolithic Slab: Monolithic Slab: S
The lift yes add in with # bodron>
Mod: (Sizex) # Bedrooms # Baths Day
Mod: (Sizex) # Bedrooms # Baths Basement (w/wo bath) Garage: Site Built Deck: On Frame Off Frame
and additions () yes () no
Manufactured Home: SW DW TAYO:
Manufactured Home:SWDWTW (Sizex) # Bedrooms:Garage:(site built?) Deck:(site built?)
Duplex: (Size x \ No Buildings)
Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit:
Home Occupation: # Rooms: Use: Hours of Operation: #Employees: #Employees:
Hours of Operation: #Employees:
Addition/Accessory/Other: (Sizex) Use:Closets in addition? () yes () no
Closets in addition? () was () a
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)
Sewage Supply:) *Must have operable water before 5
Sewage Supply: New Septic Tank (Complete Checklist) Existing Septic Tank (Complete Checklist) Existing Septic Tank (Complete Checklist) County Sewer
Does owner of this tract of land, own land that contains a manufactured borne will in a
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
Other (specify):
Required Residential Property Line Setbacks: Comments:
Front Minimum 35 Actual 36
Rear 25 50'
Closest Side
Sidestreet/corner lot 20
Nearest Building on same lot
Residential Land Use Application
Page 1 of 2

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: From Lillington take Hury 40/N to Ballard Weeds on Right
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 of Owner or Owner's Agent.

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



GWENDOLYN WAY

MILLENNIUM HOMES, LLC. THE OAKLAND WITH SCREEN PORCH LOT # 182 BALLARD WOODS SCALE: 1"=40'



NAME: Millemina Homes		
	APPLICATION #:	
*This application to be filled out when each	The state of the s	
This application to be filled out when apply County Health Department Application for Improvem	ing for a septic system inspection.	
IF THE INFORMATION BY THE ASSESSMENT OF THIS POPULATION OF THIS POPULATION OF THE PROPERTY OF	lent Permit and/a A	

NAME:	Millen	ing tomes
		APPLICATION #.
depending	g upon documer 910-893-752 Vironmental	*This application to be filled out when applying for a septic system inspection.* Department Application for Improvement Permit and/or Authorization to Construct IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT LATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration submitted. (Complete site plan = 60 months; Complete plat = without expiration) Soption 1 CONFIRMATION # Items must be a construct CONFIRMATION #
• 1	lines must be Place "orang out buildings Place orange If property is evaluation to All lots to be for failure to After preparing 300 (after selection in Jse Click2Go Tonmental Follow above Prepare for in 1908 (after property for in 1908 (after prepare for in 1908	clearly flagged approximately every 50 feet between corners. a house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks, swimming pools, etc. Place flags per site plan developed at/for Central Permitting. Environmental Health card in location that is easily viewed from road to assist in locating property. Thickly wooded, Environmental Health requires that you clean out the undergrowth to allow the soil addressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred approposed site call the voice permitting system at 910-893-7525 option 1 to schedule and use code aumber given at end of recording for proof of request. For environmental Health inspection. Please note world to verify results. Once approved, proceed to Central Permitting for permits. Seatth Existing Tank Inspections Code 800 instructions for placing flags and card on property. The put lid back in place. (Unless inspection is for a particle of the put lid back in place. (Unless inspection is for a particle of the put lid back in place. (Unless inspection is for a particle of the put lid back in place. (Unless inspection is for a particle of the property of the put lid back in place. (Unless inspection is for a particle of the property of the property is for a particle.
if gi	multiple per iven at end o se Click2Gov	mits, then use code 800 for Environmental Health inspection. Please note confirmation number or IVR to hear results. Once approved present the confirmation of the confirmation number or IVR to hear results. Once approved present the confirmation of the confirmation number or IVR to hear results.
() Acc	epted	produce indicate desired system type(s): can be ranked in order of preference, must all
() Alte	rnative	
The applica question. I	ant shall notify f the answer is	the local health department upon submittal of this application if any of the following apply to the property in "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:
IIYES	(T) NO	Does the site contain any Jurisdictional Wetlands?
_\YES	NO	Do you plan to have an <u>irrigation system</u> now or in the future?
(_)YES	(T) NO	Does or will the building contain any drains? Please explain.
()YES	(_X),NO	Are there any existing wells, springs, westerlines, W.
LYES	OKIN	Are there any existing wells, springs, waterlines or Wastewater Systems on this property? Is any wastewater going to be generated and the systems of the property?
L)YES	OX (X_)	Is any wastewater going to be generated on the site other than domestic sewage? Is the site subject to approval by any other Public Agency?
}YES	(A) XO	Are there any Fasements or Distriction.
_}YES		Are there any Easements or Right of Ways on this property?
		Does the site contain any existing water, cable, phone or underground electric lines? If yes please call No Cuts at 800 632 4048.

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 See Evaluation Can Be Performed.

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

10/10

Harrest COUNTY

CONTRACT TO PURCHASE

This cont between 7	cract, made and entered into this 15 day of Sept. 2015 by and selection as SELLER, and willerwing House, 112 as BUYER.
	WITNESSETH
THAT SEI to purchase	LLER hereby contracts to sell and convey to BUYER, and BUYER hereby contracts e from SELLER, the following described residential building lot/s, to wit:
Being all o	of the Subdivision known as Loads a map of which is duly recorded in Book of Plats Map 2009 County Registry.
Page 38	5. Harnett County Registry.
Price is \$@	ZI, OOO, payable as follows:
	Down Payment (payable upon execution of this contract): \$
	Balanco of Sale Price (payable at closing): \$21,000
Ć	The LOT/S shall be conveyed by SELLER to buyer by a General Warranty Deed free of all encumbrances other than taxes for the current year, which shall be prorated as of closing. The Deed shall be subject to all Restrictive Covenants, Utility Easements and applicable zoning ordinances on record at the time of closing.
	Buyer acknowledges inspecting the property and that no representations or inducements have been made by SELLER, other than those set forth herein, and that the Contract contains the entire agreement between the parties.
3. (1	Closing (Final Settlement) is to take place not later than: the offices of Should BUYER fail to close, the SELLER, at his option, may retain the sum paid as a Down Payment upon the Purchase Price as liquidated damages and declare this Contract null and void and may proceed to resell the LOT/S to a subsequent Buyer.
	Other Conditions:
-	Restrictive Covenants for subdivision are recorded in the Office of the Register of Deeds for County in Book page or a copy of which has been provided to Buyer.
a	Building side lines shall be per plat unless otherwise controlled by governmental authority. Property has been surveyed by
- C	Buyer must submit house plans to SELLER for architectural conformity and Covenant approval prior to breaking ground.
	Additionally: will be closed when sediment conds and/or dirt storage are removed
<u>. – . </u>	N WITNESS WHEREOF the parties have executed this contract this day 15 hof
ELLER	BUYER

by whomever performing work. Must be owner or licensed contractor. Address, company name & phone must match

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

1550037258

: 5 · 5

Application for Residential Building and Trades Permit

and III	d Trades Permit
Owner's Name: Millenryun Domes, LLC	, ,
UILG AUDITAGE 2 VANT	Date: 4/2/15
Directions to interior	1000 S mone: 910-891-4345
10 to 100 site from Lillington: Harry Ho	1 N & Ball 578
Mark woods on	Biolix RA.
1	right
Subdivision: Ballard Works	
Description of Proposed Work: \\SF	Lot: 182
Heated SF: 2279 Unheated SF: 1056 Finished Bonus Room? General Contractor Information	# of Bedrooms 3
General Control Room?	VES Crawl Space: State /
weekerland Houses General Contractor Information	ción Slab:Slab:
Building Contractor's Company Name	910-892-4345
EU ROX 717 1 1 11 11	Telephone
Address MAN, NC 28335	Joanne Joanner's Centurylink. net
Signal	Smail Address
Signature of Owner/Contractor/Officer(s) of Corporation	59493
Description of Work Alexander Information	License #
Service Size	Amps T-Pole: YesNo
Electrical Contractor's Company Name	919-1100 Yes_No
546 Leslie Dr. S. C. 1.10	919 - 499 - 5389 Telephone
246 Leslie Dr. Saxford, NC	NIA
dike Work	Email Address
ignature of Owner/Contractor/Officer(s) of Corporation	12007-11
	License #
entities II I KNIN X	esidentia (
lechanical Contractor's Company Name	910-818-0600
· O. DOX //)// // // // // // // // // // // //	relephone/
ddresa 1016 Hope Hills, NC 28348	
Lard Parker	Email Address
gnature a Own Contractor/Officer(s) of Corporation	20012
/ PUMbing Control to	License #
2 Sides His	
writes Faircloth Plumbide	# Baths
umbing Contractor's Company Name	910-531-3111
056 Elizabethtown Huy Roseburo NC	Telephone
Contraction of the second of the	Email Address
Mature of Owner Continue	Email Address
gnature of Owner/Contractor/Officer(s) of Corporation	License #
134 Tila The Contractor Information	on Comments
sulation Code is 500 French	919-772-9000
Manual Contractor & Company Name & Address Davisal. 110	Telephone
*NOTE: General Contractor —	
NUIE: General Contraction	

Homeowners Applying to Build Their Own Following questions then see a Permit Technician to determine its	domo
qualify for per G.S. 87-14 Regulations as to Issue of Building Permits (Memory)	ermit under Owners Exemption. D available upon requests
you own the land on which this building will be constructed?	
2. Have you hired or intend to hire an individual to superintend and manage construction of the project?	YesNo
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 possessite	YesNo
5. Do you intend to personally occupy the building for at least 12 consecution months following completion of construction and do you understand that it you do not do so, it creates the presumption under law that you fraudulent	utive f tly
I hereby certify that I have the authority to make necessary application, that the and that the construction will conform to the regulations in the Building Flex	Yes No
number of bedrooms, building and trade plans, Environmental Health permit char changes, I certify it is my responsibility to notify the Harnett County Central Permany and all changes. EXPIRED PERMIT FEES - 6 Months to 2 years permit re-issue fee is \$150.00. A signature of Owner/Contractor/Officer(s) of Corporation Affidavit for Worker's Compensation N.C.G.S. The undersigned applicant being the:	filer 2 years re-issue fee
General Contractor Owner Officer/Agent of the Con Do hereby confirm under penalties of perjury that the person(s), firm(s) or corporate set forth in the permit:	tractor or Owner
Has three (3) or more employees and has obtained	ion(s) performing the work
Has three (3) or more employees and has obtained workers' compensation Has one (1) or more subcontractors(s) and has obtained workers' compensation them.	insurance to cover them.
Has one (1) or more subcontractors(s) who has the	ation insurance to cover
Has one (1) or more subcontractors(s) who has their own policy of workers'	compensation insurance
Has no more than two (2) employees and no subcontractors. While working on the present of the p	
While working on the project for which this permit is sought it is understood that the Department issuing the permit may require certificates of coverage of worker's com to issuance of the permit and at any time during the permitted work from any person carrying out the work.	Central Permitting pensation insurance prior n, firm or corporation
Company or Name: Lumberland, Hours, loc	
Sign w/Title Owner D	Pate:
Residential Building Application	

2 of 2

06/10

LILLINGTON, NC 27546 For Inspections Call: (910) 893-7525 Fax: (910) 893-2793 Bldg Insp scheduled before 2pm available next business day. Application Number 15-50037258 Date 12/08/15 Property Zoning RES/AGRI DIST - RA-30 Contractor Owner ______ CUMBERLAND HOMES INC NELSON THOMAS W & LORRAINE B PO BOX 727 3075 AB CARTER RD PO BOX 727
FAYETTEVILLE NC 28312 DUNN NC 28335 (910) 892-4345 Applicant CUMBERLAND HOMES INC PO BOX 727 NC 28335 DUNN (910) 892-4345 Structure Information 000 000 62X64 3BDR SLAB W/ GARAGE & PATIO Flood Zone FLOOD ZONE X Flood Zone FLOOD ZONE X
Other struct info # BEDROOMS 3000000.00
PROPOSED USE SFD SEPTIC - EXISTING? NEW TANK COUNTY WATER SUPPLY Permit BLDG, MECH, ELEC, PLB, INSU PERMIT Additional desc . . Phone Access Code . 1116730 Issue Date 12/08/15 Valuation Expiration Date . . . 12/07/16 Special Notes and Comments T/S: 10/08/2015 11:33 AM JBROCK ----

HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

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.

------Date 12/08/15 Application Number 15-50037258

Subdivision Name BALLARDS WOODS PH 4A Property Zoning RES/AGRI DIST - RA-30

Permit BLDG, MECH, ELEC, PLB, INSU PERMIT

Additional desc . .

Phone Access Code . 1116730

Required Inspections

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

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 389666

Filed on: 12/07/2015

Initially filed by: cumberlandhomes

Designated Lien Agent

Investors Title Insurance Company

Online: www.liensnc.com

Address: 19 W. Hargett St., Suite 507 / Raleigh, NC 27601

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

Email: support@liensnc.com

Project Property

Lot 182 Ballards Woods Pin #0651-29-5627.000 68 Gwendolyn Way

Fuquay-Varina, NC 27526 Harnett County

Property Type

1-2 Family Dwelling

Print & Post



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.

Owner Information

Millennium Homes, LLC 108 Commer Drive Dunn, NC 28334 United States Email: joannorris@centurylink.net

Phone: 910-892-4345

View Comments (0)

Technical Support Hotline: (888) 690-7384