| Application #_ | 17-50041337 |
|----------------|-------------|
| | CU# |

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION 108 E. Front Street, Lillington, NC 27546

Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits

03/11

A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION LANDOWNER: JEC Rul Bt. Invest. LLC Mailing Address: P.O. Box 143 State: NC Zip: 28335 Contact No: 1196976905 Email: Cestion CC & Smail. Com APPLICANT :: Castley Cont. Comp. Mailing Address: P.O. Box 143 City: Dans State: NC Zip: 28335 Contact No: 919 6976905 Email: Cos Hon CC D g ma's Com CONTACT NAME APPLYING IN OFFICE: Lhan C. Turlingby Phone # 919.6976905 PROPERTY LOCATION: Subdivision: Not in a Subdivision Lot #: C Lot Size: . 708 __ State Road Name: __ NC 210 S _____ Map Book & Page: 2006 / 0395 100548 0001 19 PIN:__ 0548-77-5278.000 Zoning: RA - 20 Flood Zone: X Watershed: 615 Deed Book & Page: 34 25 / 0479 Power Company*: Duke Entry *New structures with Progress Energy as service provider need to supply premise number _____ PROPOSED USE: SFD: (Size 15.8 x 61.6) # Bedrooms: 3 # Baths: 2 Basement(w/wo bath): No Garage: 2 Deck: 14 Crawl Space: X Slab: Monolithic (Is the bonus room finished? (__) yes (__) no w/ a closet? (__) yes (__) no (if yes add in with # bedrooms) Mod: (Size ___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 Manufactured Home: ___SW __DW __TW (Size ___x ___) # Bedrooms: ___ Garage: __(site built? ___) Deck: ___(site built? ___) Duplex: (Size ____x___) No. Buildings:_____ No. Bedrooms Per Unit:_ Home Occupation: # Rooms:_____ Use:____ Hours of Operation:____ Addition/Accessory/Other: (Size ____x___) Use:____ _____ Closets in addition? (___) yes (___) no Water Supply: X County ____ Existing Well ____ New Well (# of dwellings using well _____) *Must have operable water before final Sewage Supply: X 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 (X) no Does the property contain any easements whether underground or overhead (2) yes (__) no Structures (existing or proposed): Single family dwellings: Proposed Manufactured Homes: Other (specify): Required Residential Property Line Setbacks: Lockbox Code: 3201 Minimum 35 Front Actual 66 Closest Side Sidestreet/corner lot Nearest Building on same lot Residential Land Use Application

| SPECIF | IC DIRECT | IONS TO THE | PROPERTY FROM | LILLINGTON: | HMY | 210 | 1 | toward | Bunn | Live | _ | |
|-----------|---------------|-----------------|-------------------------|-------------------|----------------|-------------|---------|--------------------|-------------|-------------|------------|-----------------|
| On | 1414 | new | 1 utarsection | n of | Hwy | 210 | 9 | A mesica | u bes | SIUM . | RA. | |
| | | | | | - 1 | | , | | / | | | |
| - | | | 7. | | | | | | | | | |
| | | | | | (5) | | | + | | | | 101 |
| | | | | | | | • | | | | - | |
| | | | | | 50 | | | 4 | | | | |
| f permits | s are grante | ed I agree to o | onform to all ordinance | es and laws o | f the State of | of North Ca | arolina | regulating such | work and t | he specifi | cations of | plans submitted |
| nereby | state that to | oregoing state | ements are accurate a | hd correct to the | he best of m | iy knowled | ge. P | ermit subject to r | evocation i | f false inf | ormation i | s provided. |
| | | | Signature of Owner of | or Owner's Ag | gent | | | Date | - | | | |

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

^{***}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.***

DISTRICT PA 2012 USE SITE PLAN APPROVAL 0 #BEDROOMS 2

NISTRATOR

DATA/0548/C003MA02 (170425TU)

| {}} Alt | ernative | {}} Other |
|----------------------|------------------------------------|--|
| The applic question. | ant shall notif If the answer i | y the local health department upon submittal of this application if any of the following apply to the property in s "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION: |
| {}}YES | 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 | $\{\underline{X}\}$ NO | Does or will the building contain any drains? Please explain |
| {}}YES | (_ X _) NO | Are there any existing wells, springs, waterlines or Wastewater Systems on this property? |
| {}}YES | { ★ } NO | Is any wastewater going to be generated on the site other than domestic sewage? |
| {}}YES | { <u>X</u> } NO | Is the site subject to approval by any other Public Agency? |
| {X}}YES | {} NO | Are there any Easements or Right of Ways on this property? |
| {_}}YES | { ★ } NO | Does the site contain any existing water, cable, phone or underground electric lines? |
| | | If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service. |
| I Have Read | d This Applicat | ion And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And |
| State Officia | als Are Grante | d Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules. |
| I Understan | d That I Am S | olely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making |
| The Site Acc | cessible Soft Fa | t A Complete Site Evaluation Can Be Performed |

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

Application # 17-50041337

Each section below to be filled out 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 for Residential Building and Trades Permit

| Owners Name JEC Red that Insistent b | Date 05/09/17 |
|--|--------------------------------|
| | Phone 9196476405 |
| Directions to job site from Lillington Hwy 20 fewerd | |
| near intersection of American Legion | |
| The state of the s | at I may st |
| Subdivision Not in a Shhofi rision | Lot C |
| Description of Proposed Work New Construction | # of Bedrooms 3 |
| Heated SF Finished Bonus Room? General Contractor Informatio | No Crawl Space X Slab |
| Caston Construction Company | 9196976905 |
| Building Contractor's Company Name | Telephone |
| P.O. Bux 143 Dann Nc 28335 | Caston CC D gmail.com |
| Address | Email Address |
| 77043 | |
| License # Electrical Contractor Information | on |
| Description of Work Naw Construction Service Size | 200 Amps T-Pole X YesNo |
| Making Electrical Service | 919 639 4837 |
| Electrical Contractor's Company Name | Telephone |
| 731 Marby Ry. Augin NC 27501 | Jonnie D Mobry Electrical. con |
| Address | Email Address |
| 15077 License # | |
| Mechanical/HVAC Contractor Inform | mation |
| Description of Work New Construction | |
| JAM HVAC | 910 897 5501 |
| Mechanical Contractor's Company Name | Telephone |
| 724 Tarkinghon Rus Dunn NC 28334 | Janes M HVAE a centurylink. |
| Address | Email Address |
| 17164 | |
| License # Plumbing Contractor Information | 30 |
| | 7 |
| A 1 | # Baths |
| Plumbing Contractor's Company Name | 919 915 0533 Telephone |
| 1820 Buily Ld Conts NC 2754 | releptione |
| Address | Email Address |
| 18659 | |
| License # | |
| Insulation Contractor Information | |
| Tru Team Builder Services Group | 910486 8855 |
| Insulation Contractor's Company Name & Address | Telephone |

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 that by signing below I have obtained all subcontractors permission to obtain these permits 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 schedule

15/10/12

| 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 | | | | | |
| Company or Name Construction Company | | | | | |
| Company or Name Castro Construction Company Sign w/Title Date 05/09/17 | | | | | |

LIEN AGENT INFORMATION

Effective April 1, 2013

In accordance with North Carolina General Assembly Session Law 2012-158, Inspection Departments are not allowed to issue any permit where the project cost is \$30,000 or more unless the application is for improvements to an existing dwelling that the applicant uses as a residence **OR** the property owner has designated a lien agent and provided the inspections office with the information below:

| Name of Lien Agent | Investors | Titta lush | rmu | Company |
|---------------------------|-----------|-------------|-----|---------|
| Mailing address of Agent | | | | |
| Physical address of Agent | | N. Honogett | | hip 507 |
| Telephone 888 690 | | | | 5231 |
| Email Support a 1 | ins NC. | com | | |

The information will be attached to the permit record and a copy provided to the applicant. The applicant is required to post a copy on the construction site.

Excerpt from North Carolina G.S. 160A-417:

"(Effective April 1, 2013) No permit shall be issued pursuant to subdivision (1) of subsection (a) of this section where the cost of the work is thirty thousand dollars (\$30,000) or more, other than for improvements to an existing single-family residential dwelling unit as defined in G.S. 87-15.5(7) that the applicant uses as a residence, unless the name, physical and mailing address, telephone number, facsimile number, and electronic mail address of the lien agent designated by the owner pursuant to G.S. 44A-11.1(a) is conspicuously set forth in the permit or in an attachment thereto. The building permit may contain the lien agent's electronic mail address. The lien agent information for each permit issued pursuant to this subsection shall be maintained by the inspection department in the same manner and in the same location in which it maintains its record of building permits issued."

HARNETT COUNTY TAX ID # 100948 0001 18 -19 -20 -21 For Registration Kimberly S. Hargrove
Register of Deeds
Harnett County, NC
Electronically Recorded
2016 Aug 03 11:35 AM NC Rev Stamp: \$ 144.00
Book: 3425 Page: 479 Fee: \$ 26.00
Instrument Number: 2016010834

BY:

NORTH CAROLINA GENERAL WARRANTY DEED

Excise Tax:

\$144.00

Recording Time, Book and Page:

Tax Map No.

Parcel Identifier No:

100548 0001 18 & 100548 0001 19

& 100548 0001 20 & 100548 0001 21

2016 by and between

Mail after recording to: Grantee

08-03-20

This instrument was prepared by: Lynn A. Matthews, Actorney (No Title Examination or Tax Advice Given)

GRANTOR

day of July

Jerry Lee Coats, Unmarried

Mailing Address: 176 American Legion Road, Lillington, NC 27546

THIS DEED made this _19th

GRANTEE

JEC Real Estate Investments LLC, a North Carolina Limited Liability Company
Property Address: 22 American Legion Road and 2811 & 2831 & 2851 NC Highway 210 S., Lillington, NC 27546

Mailing Address: P.O. Box 143, 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 fet or parcel of land and more particularly described as follows:

BEING all of Lots B, C, D and E as shown on survey map dated September 30, 2005, entitled "Map for Jerry Lee Coats" and recorded in Map #2006-395, Harnett County Registry.

Submitted electronically by "Tart Law Group, P.A."
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 825 Harnett County Registry. | by Grantor by instrument recorded in Book 1551, Page |
|---|--|
| A map showing the above described property is recorded in Plat Boi | ok <u>2006</u> , Page <u>395</u> , and referenced within this |
| Does the above described property include the primary residence (ye | es/no) ? No |
| TO HAVE AND TO HOLD the aforesaid lot or parcel of land and a in fee simple | |
| And the Grantor coveriants with the Grantee, that Grantor is seized fee simple, that title is marketable and free and clear of all encumbrathe lawful claims of all persons whomsoever except for the exception | ances, and that Grantor will warrant and defend the title against |
| Title to the property hereinabove described is subject to the following 1. 2016 ad valorem taxes which are not yet payable | • |
| 2. Restrictions, easements and rights of way as they appear o | frecord |
| IN WITNESS WHEREOF, the Grantor has hereunto set his ha signed in its corporate name by its duty authorized officer(s), the | nd and seal, or if corporate, has caused this instrument to be e day and year first above written. |
| (990) | Ju Su Per S (SEAL) |
| (Entity Name) | Jerry Lee Coats, Unmarried |
| Ву: | (SEAL) |
| Title: | |
| Ву: | (SEAL) |
| Title: | |
| | (SEAL) |
| | |
| NORTH CAROLINA HARNETT COUNTY | (\mathcal{O}) |
| I certify that the following person(s) personally appeared before me foregoing document: Jerry Lee Coats, Unmarried . With | e this day, each acknowledging to me that he or she signed the ness my hand and official stamp or seal, this the |
| day of July , all | COLSTANCE OF |
| My Commission Expires: | Notary Public |
| WATINA CAMILLE | Print Notary Name Con CO |
| HARLIC O' | |
| E PURIS G | Y(2) |
| THE COUNTY HERE | |
| W. COOM | |
| | 7/3 |
| | |
| | |