Initial Application Date:_

Application #	75004	1423
	CU#	

Central Permitting

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

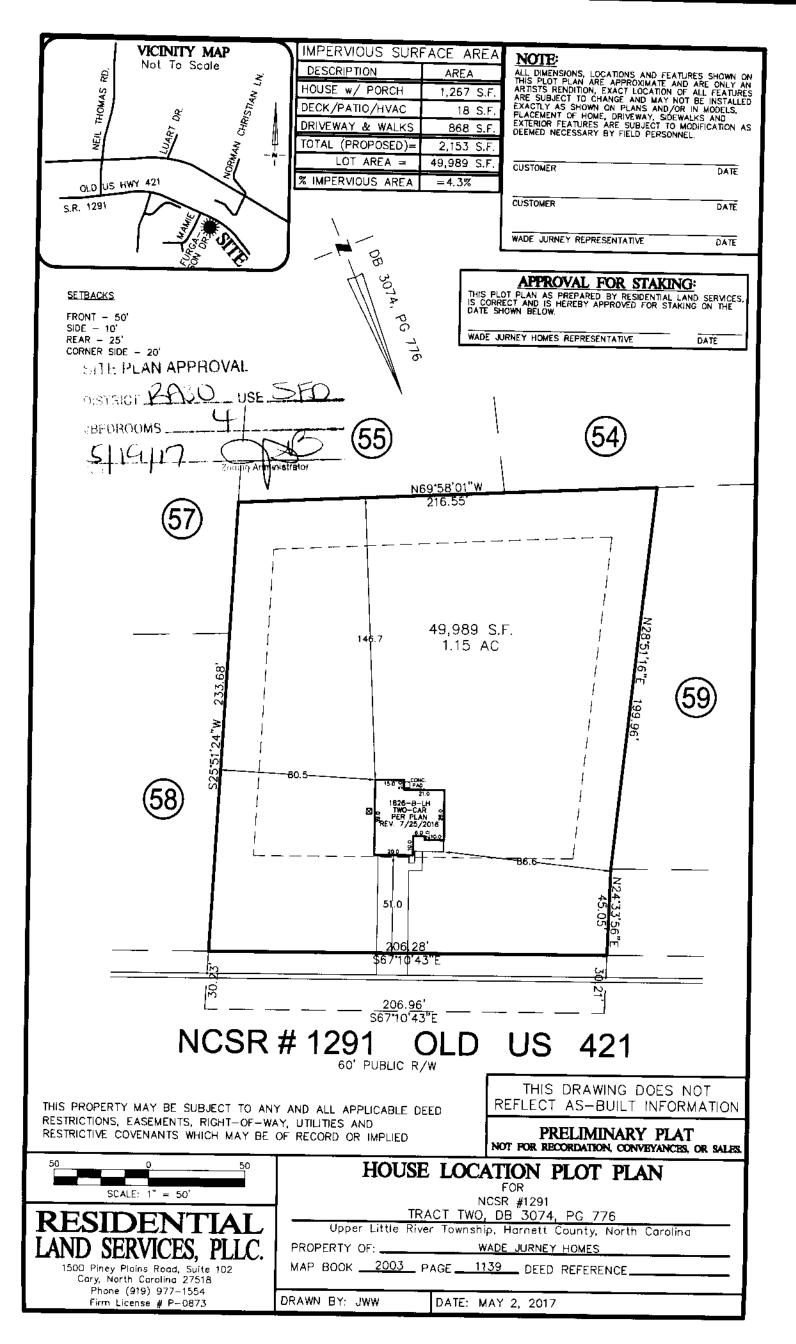
"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION"

LANDOWNER: Dakota Land Partne	rs, LLC	Mailing Address: 5511 Ran	nsey Street, Suite 100
City: Fayetteville	State:_NCZip:_28311	Contact No: 910-401-5504	nsey Street, Suite 100 Email:Elkins@mossycreekmgmt.com
APPLICANT*: Dakota Land Partner	s, LLC Mailing	Address:	Email:
City:*Please fill out applicant information if differe	State:Zip:ent than landowner	Contact No:	Email:
BUYEVE W 31- CONTACT NAME APPLYING IN OFF	ICE: Jeri Elkins		Phone # 910-401.5504
PROPERTY LOCATION: Subdivision:	Mamie Bell Ridge H	cosh m Ray	Lot #: Lot Size: 1.1 3ACMap Book & Page: 2001/1050
State Road # 1291 State	Road Name: Old US 421		Map Book & Page: 2001/ 1050
Parcel: 130630 0029	161	PIN: <u>0630 65</u>	3590
Zoning: RA-30 Flood Zone:	Watershed: NA Der	ed Book & Page: 3074 / 77	© Power Company*:
			from Progress Energy.
PROPOSED USE:			No. 2011
			Deck:Crawl Space:Slab:Slab:) no (if yes add in with # bedrooms)
		nent (w/wo bath) Garage: s () no	Site Built Deck: On Frame Off Frame tions? () yes () no
☐ Manufactured Home:SW	_DWTW (Sizex_) # Bedrooms; Garage;	(site built?) Deck:(site built?)
□ Duplex: (Sizex) No. I	Buildings:N	lo. Bedrooms Per Unit:	
☐ Home Occupation: # Rooms:	Use:	Hours of Operation:_	#Employees:
☐ Addition/Accessory/Other: (Size _	x) Use:		Ciosets in addition? () yes () no
Water Supply: County E	Existing Well New We	ell (# of dwellings using well) *Must have operable water before final
Sewage Supply:			
			500') of tract listed above? () yes (✔) no
Does the property contain any easeme			,
Structures (existing of proposed): Singl			Other (specify):
Change (Change)	e talling discounts.	INESTERACION CONTROL CON	Onler (specify).
Required Residential Property Line	Setbacks: Comm	ents:	
Front Minimum 35 Actua	al_ <u>5</u> }		
Rear <u>ƏS</u>	1467		
Closest Side 10	<u>&Ō.</u> 60		
Sidestreet/corner lot			
Nearest Building			

SPECIFIC DIR	ECTIONS TO TI	HE PROPERTY FROM LI	LLINGTON:	421 14	<u>lett</u>	onto	
	Willie	carregon	Rol	Right	<u>ónto</u>	old b	5 421
left	O n	Mamie	FRICI	usco Dr	1cf+	Onto	
		Manie	BeA	Circle			
			•				
							-
						<u>.</u>	
If permits are g I hereby state t	ranted agree to hat foregoing sta	conform to all ordinances tements are accurate and	and laws of correct to the	the State of North Car e best of my knowledg	rolina regulating so ie. Permit subject	ich work and the spito revocation if false	ecifications of plans submitted:
·		/	$\langle \cdot \rangle$		511	7/17	The state of the s
		Signature of Owner of	Owner's Age	ent	-//b	até	
			/				

^{***}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**



		e of the second	
NAME:	Dulota	Land Partners UC	APPLICATION #:
		This application to be filled out when a	pplying for a septic system inspection.
Cou	nty Health [Department Application for Impro	vement Permit and/or Authorization to Construct
PERMIT depending	OR AUTHORIZ	ATION TO CONSTRUCT SHALL BECOME I ation submitted. (Complete site plan = 60 month	
,		l <i>ealth New Septic System</i> Code 800	CONFIRMATION #
	lines must be Place "orange out buildings, Place orange	clearly flagged approximately every 50 house corner flags" at each corner of swimming pools, etc. Place flags per s Environmental Health card in location to	the proposed structure. Also flag driveways, garages, decks, ite plan developed at/for Central Permitting. nat is easily viewed from road to assist in locating property.
•	If property is t evaluation to b	hickly wooded, Environmental Health r be performed. Inspectors should be ab	equires that you clean out the <u>undergrowth</u> to allow the soil to walk freely around site. Do not grade property .
•	All lots to be	addressed within 10 business days	after confirmation. \$25.00 return trip fee may be incurred
•	After preparing 800 (after selection n	g proposed site call the voice permitting ecting notification permit if multiple per umber given at end of recording for pro	
		v or IVH to verify results. Once approve <i>ealth Existing Tank Inspections</i> Cod	ed, proceed to Central Permitting for permits.
		instructions for placing flags and card o	
•	Prepare for in <i>possible</i>) and	spection by removing soil over outlet	end of tank as diagram indicates, and lift fid straight up (if pection is for a septic tank in a mobile home park)
•	After uncoveri if multiple per given at end o	ng outlet end call the voice permitting mits, then use code 800 for Environr of recording for proof of request.	system at 910-893-7525 option 1 & select notification permit nental Health inspection. <u>Please note confirmation number</u>
SEPTIC	Use Click2Go	v or IVR to hear results. Once approved	I, proceed to Central Permitting for remaining permits.
	ng for authorizat	ion to construct please indicate desired system	t type(s): can be ranked in order of preference, must choose one.
() Ac		(_) Innovative (_/) Convent	
{_}} Al	ternative	() Other	
The appli	icant shall notif		al of this application if any of the following apply to the property in
{}YES	(<u>∠</u>) NO	Does the site contain any Jurisdictional V	Vctlands?
{}}YES	ON(X)	Do you plan to have an irrigation system	now or in the future?
()YES	√ NO	Does or will the building contain any dra	ins? Please explain
()YES	{ <u>⊁</u>] NO	Are there any existing wells, springs, wa	terlines or Wastewater Systems on this property?
()YES	{ <u>X</u> } 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	er Public Agency?
()YES	(<u>₹</u>) NO	Are there any Easements or Right of Wa	s on this property?
(<u> </u>)YES	(<u>∠</u>) NO	Does the site contain any existing water,	cable, phone or underground electric lines?
		If yes please call No Cuts at 800-632-49	49 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.

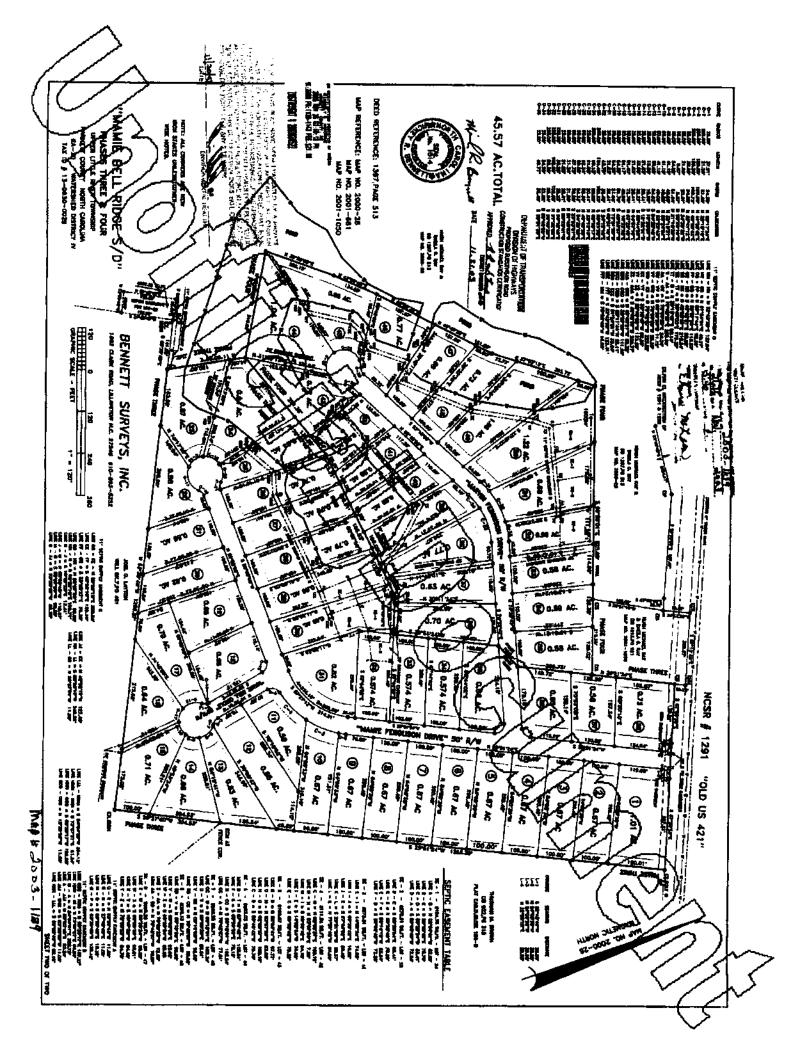
* I Understand That I Am Solely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making

Condensation Final Control Responsibility of the Froper Identification And Labeling Of All Froperty Lines And Corners And Staking

The Site Accessible So	That A Comp	lete Site Evaluation	Can Be	Performed
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PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

DATE



W MEGISTRATION
TO STATE OF THE STATE OF THE

¥X ⊒

NORTHACAROLINA SPECIAL WARRANTY DEED
THIS FORM IN 36 A MORTH CAROLINA BAR ASSOCIATION" FORM

Parcel Identifier No.

Exclae Tax: \$450.00

Prepared by: Richard A. Galt, FLLC, 2537 Ragford Road, Fayetteville, NC 28305

Return after recording to: Richard A. Ghff, PLLC, 2535 Ractord Road, Fayetteville, NC 28305

Brief Description for the Index:

This Deed made this the 11th day of January, 2013 by and bestiegn

NEW CENTURY BANK

* North Carolina Banking Corporation 700 W Camberhand Sc Mailing Address: GRANTOR DAKQIALAND PARTNERS, LLC
A North Capains, Lipsted Liability Company GRANTER

сограсийов от рагенетайр Enter in appropriate block for each party: name, address, and, if approchaffe, chaffe char of cuttry, e.g.,

The designation Grantor and Grantee as used berein shall include said parties, their haris assigns, and shall include singular, plural, masculine, feminine or neuter as required by contests ESSIONS, SELD

WITNESSETH, that the Grantor, for a valuable consideration paid by the Grantee, the feech of which is hereby acknowledged, has and by these presents does grant, bargain, sell and convey unto the Change in the sample, all that certain lot or parcel of land situated in Harnett County, North Carolina and heavy parkentarify

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	PÓR) EGAL DESCRIPTION, SEE EXHIBIT "A" ATTACHED HERETO AND MADE A PART HYPÉTOR.	

B3074 - P777

bove described was acquired by instrument recorded in Book.

the above described property is recorded in Book of Plans_

enty benein conveyed includes or X does not include the primary

said lots or percels of land and all privileges and apputesomess thereto

And the Granter paren with the Granten, that the Granter has done nothing to impair such title as Granter supage and defend the title against the lawful claims of persons claiming by, under of the participar hardinafter stated.

Tide to the property beneatabout described in subject to the following acceptions:

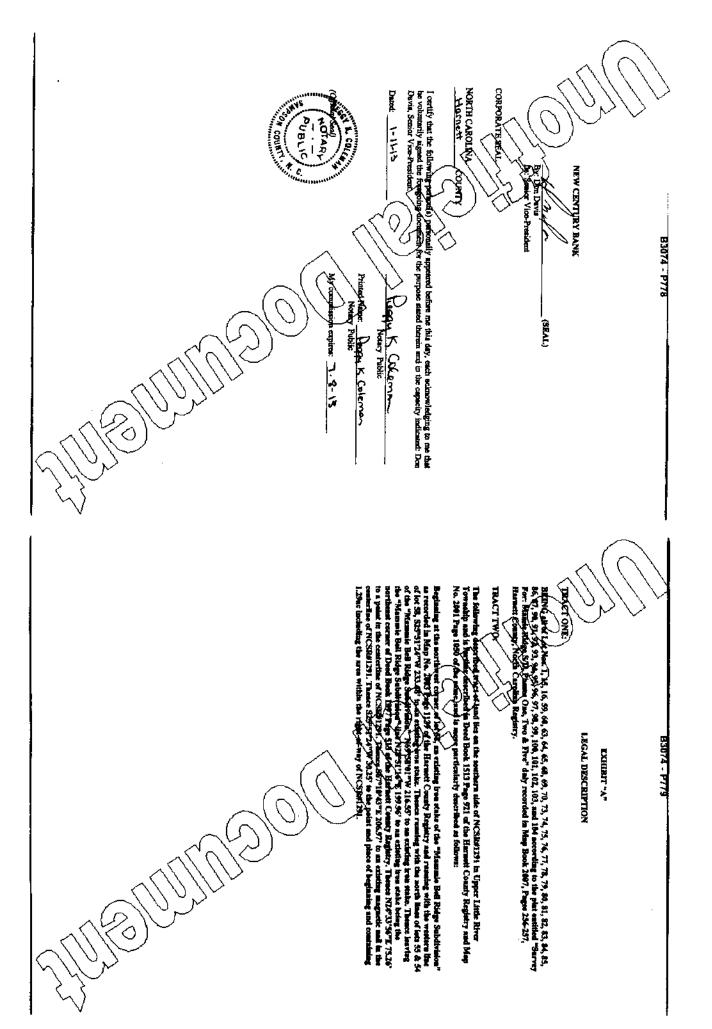
or through Grantor, ex

All valid and enforceable castiments, and rights-of-way of record; and the lien of at valorum tax for

IN WINESS WHEEROF, the Complet has Magnetian per his hand and seal, or if corporate, has caused this instrument to be signed in its corporate paths by its stilly sutherized officers and its seal to be hereunto affixed by sutherity of its Board of Directors, effective the day and year first above written.

ISIGNATURE PAGES BOLLOWI

[REMAINDER OF PAGE INTENTIONALLY LEFT BLANK]



Application #

Harnett County Central Permitting PO Box 65 Lillington NC 27546 910 893 7525 Fax 910 893 2793 www.harnett.org/permits 41453

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

Application for Residential Building and Trades Permit

Owners Name Wade Jurney Homes ILC	Date 4 13 17
Site Address ZQ 0\A\IS 47\	Die Cic Coll Con
Directions to job site from Lillington Take NC Hwy ZIC	75 TOVA LACT MALE
5. main St. Then turn P onto E. Front 5	L TOTAL SETT OFFICE
Subdivision Mamil Bell Ridge	Lot 9
Description of Proposed Work	# of Redrooms 4
Heated SF 1824 Unheated SF 347 Finished Bonus Room? General Contractor Information	D Crawl Space Slab V
414.116.	336-282-3606
Building Contractor's Company Name	Telephone
3300 Battleground AULSTEZ30 Greenstoro	Trabitz Cubde lumen
Address 27410	Email Address
License #	
Description of Work Electrical Contractor Information Service Size	<u>on</u>
Description of Work Electrical Thistal Service Size	200_Amps T-PoleYesNo
Electrical Contractor's Company Name	336-584-909D
· · · · · · · · · · · · · · · · · · ·	Telephone
Address Address	Email Address
10516	
License #	
Mechanical/HVAC Contractor Infor	<u>mation</u>
Description of Work Heating & Air	
Mechanical Contractor's Company Name	334-744-4730 Telephone
P.O. Box 527 Clemmons, 27012	repriorie
Address	Email Address
4218	
License #	
Plumbing Contractor Information	<u>on</u>
Description of Work PIDMOI NG INSTALL	# Baths
Description of Work Plumbing Install Baity Plumbing The Plumbing Contractor's Company Name	<u>334 · 475 · 642</u>] Telephone
4538 Laves Laxe RD.	i eleprioria
Address	Email Address
20809	
License #	
Insulation Contractor Information	<u>on</u>
Insulation Contractor's Company Name & Address	Telephone
	· Jophono

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 Signature of Owner/Contractor/Oncer(s) of Corporation 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 Rabeta Permit Coordinator Date 4/3/

I hereby certify that I have the authority to make necessary application, that the application is correct

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 668453

Filed on: 06/12/2017 Initially filed by: wjh2013

Designated Lien Agent

Investors Title Insurance Company

NC 27601

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

Email: suppontationsne.com --

Project Property

MBR 9

1291 Old US 421 Lillington, NC 27546 Harnett County

Property Type

1-2 Family Dwelling

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.

Owner Information

WJH, LLC 3300 Battleground Ave Suite 230 Greensboro, NC 27410 United States Email: trabitz/@wadejurneyhomes.com Phone: 919-995-5654

View Comments (0)

Technical Support Hotline: (888) 690-7384