

Initial Application Date: 7/11/17

Application # 1750041830
CU# _____

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION
Central Permitting 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: Cumberland Farms, Inc Mailing Address: P.O. Box 727
City: Dunn State: NC Zip: 28335 Contact No: 910-892-4385 Email: norrisbuilding@carroll.net
APPLICANT: Crestview Dev. LLC Mailing Address: PO Box 727
City: Dunn State: NC Zip: 28334 Contact No: _____ Email: _____
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: DENNIS NORRIS Phone # 910-985-0468

PROPERTY LOCATION: Subdivision: Carolina Seasons Lot #: 33 Lot Size: .83
State Road # 1323 State Road Name: Ponderosa Rd. Map Book & Page: 2009, 96
Parcel: 09 956702 0000 32 PIN: 9557-81-7187-000
Zoning: R20R Flood Zone: X Watershed: WA Deed Book & Page: OTP Power Company: CEMC

*New structures with Progress Energy as service provider need to supply premise number _____ from Progress Energy.

PROPOSED USE:

- SFD: (Size 62' x 50') # Bedrooms: 4 # Baths: 2 1/2 Basement(w/wo bath): _____ Garage: Deck: Crawl Space: Slab: _____ Slab: _____
(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: _____ #Employees: _____
- Addition/Accessory/Other: (Size _____ x _____) Use: _____ Closets in addition? (yes (no

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) _____ 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 (no
Does the property contain any easements whether underground or overhead (yes (no

Structures (existing or proposed): Single family dwellings: 1 proposed SFD Manufactured Homes: _____ Other (specify): _____

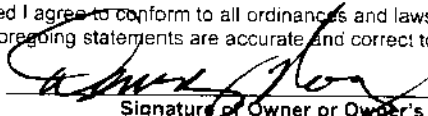
Required Residential Property Line Setbacks:

Front	Minimum	<u>35'</u>	Actual	<u>40'</u>
Rear		<u>25'</u>		<u>260' 10"</u>
Closest Side		<u>15'</u>		<u>17' 4"</u>
Sidestreet/corner lot				
Nearest Building on same lot				

Comments: _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Hwy 27W to Johnson Sch. Rd.
TR to Penderosa Rd. TR to Caroline seasons on left.

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.



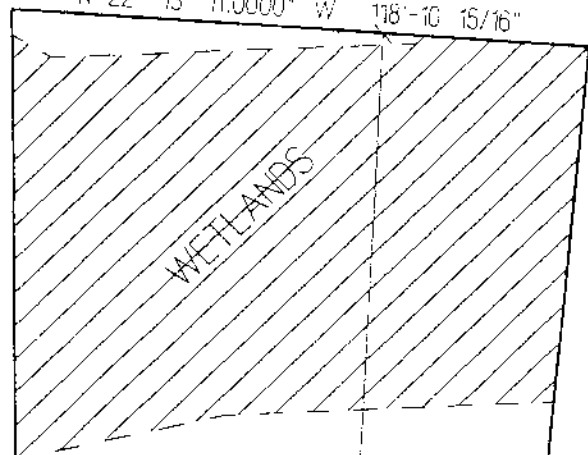
Signature of Owner or Owner's Agent

7/11/17
Date

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

N 22° 13' 11.0000" W 118'-10 15/16"



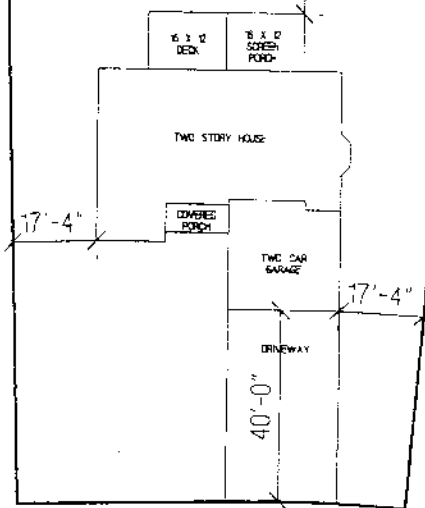
CUMBERLAND HOMES, INC.
LOT # 33 CAROLINA SEASONS
THE LANDON WITH SCREEN PORCH
SCALE: 1"=40'



S 63° 55' 14.0000" W 367'-7 5/8"

N 70° 1' 29.0000" E 363'-6 13/16"

SITE PLAN APPROVAL
DISTRICT RFD 28 SFD
#BEDROOMS 4
7/13/17
Date [Signature]
Zoning Administrator



S 26° 4' 46.0000" E 44'-4 5/16" R=335'-0"
AL=35'-8 1/4"

SPRING FLOWERS DRIVE

NAME: Cumberland Homes, Inc.

APPLICATION #: _____

This application to be filled out when applying for a septic system inspection.

County Health Department Application for Improvement Permit and/or Authorization to Construct

IF THE INFORMATION IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT PERMIT OR AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration depending upon documentation submitted. (Complete site plan = 60 months; Complete plat = without expiration)

910-893-7525 option 1

CONFIRMATION # _____

Environmental Health New Septic System Code 800

- **All property irons must be made visible.** Place "pink property flags" on each corner iron of lot. All property lines must be clearly flagged approximately every 50 feet between corners.
- Place "orange house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks, out buildings, swimming pools, etc. Place flags per site plan developed at/for Central Permitting.
- Place orange Environmental Health card in location that is easily viewed from road to assist in locating property.
- If property is thickly wooded, Environmental Health requires that you clean out the undergrowth to allow the soil evaluation to be performed. Inspectors should be able 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 for failure to uncover outlet lid, mark house corners and property lines, etc. once lot confirmed ready.**
- After preparing proposed site call the voice permitting system at 910-893-7525 option 1 to schedule and use code 800 (after selecting notification permit if multiple permits exist) for Environmental Health inspection. Please note confirmation number given at end of recording for proof of request.
- Use Click2Gov or IVR to verify results. Once approved, proceed to Central Permitting for permits.

Environmental Health Existing Tank Inspections Code 800

- Follow above instructions for placing flags and card on property.
- Prepare for inspection by removing soil over **outlet end** of tank as diagram indicates, and lift lid straight up (if possible) and then **put lid back in place.** (Unless inspection is for a septic tank in a mobile home park)
- **DO NOT LEAVE LIDS OFF OF SEPTIC TANK**
- After uncovering **outlet end** call the voice permitting system at 910-893-7525 option 1 & select notification permit if multiple permits, then use code 800 for Environmental Health inspection. Please note confirmation number given at end of recording for proof of request.
- Use Click2Gov or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.

SEPTIC

If applying for authorization to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.

- Accepted Innovative Conventional Any
 Alternative Other _____

The applicant shall notify the local health department upon submittal of this application if any of the following apply to the property in question. If the answer is "yes", applicant **MUST ATTACH SUPPORTING DOCUMENTATION**:

- YES NO Does the site contain any Jurisdictional Wetlands?
 YES NO Do you plan to have an irrigation system now or in the future?
 YES NO Does or will the building contain any drains? Please explain. _____
 YES 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 NO Is the site subject to approval by any other Public Agency?
 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 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 Site Evaluation Can Be Performed.

[Signature]
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

7/11/12
DATE

NORTH CAROLINA

Harnett COUNTY

CONTRACT TO PURCHASE

This contract made and entered into this 12th day of July, 2017 by and between Crestview Development as SELLER, and Cumberland Homes as BUYER.

WITNESSETH

THAT SELLER hereby contracts to sell and convey to BUYER, and BUYER hereby contracts to purchase from SELLER, the following described residential building lot/s, to wit:

Being all of LOT/S 33 of Subdivision known as Carolina Seasons

A map of which is duly recorded in Book of Plats Map 2009 Page 0096 County Registry.

Price is \$ 30,000.00 payable as follows:

Due Diligence made payable and delivered to Seller \$ _____

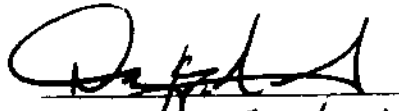
Initial Earnest Money deposit (To be held by Lynn Matthews Law Group) \$ _____

Balance due at closing \$ _____

1. 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.
2. Buyer acknowledges inspecting the property and that no representations or inducements have been made by the SELLER, other than those set forth herein, and that the Contract contains the entire agreement between the parties.
3. Closing (Final Settlement) is to take place no later than Aug. 14th 2017 at the offices of Matthew Law Group. Should BUYER fail to close, the SELLER, at his option, may retain 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.
3. (a) Cumberland Homes has agreed to pay all of the sellers closing costs in regards to the settlement of this property.

4. Due Diligence: Made payable and delivered to Seller by the Effective Date of the contract. Due Diligence period beginning on the effective date and extending through 5:00pm on _____. *Time being of the essence with regard to said date.*

IN WITNESS WHEREOF the parties have executed this contract this day 12th of July, 2017.


SELLER OWNER/MANAGER
CRESTVIEW DA. LLC.


BUYER PROS.
CUMBERLAND HOMES, INC.

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

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

Owner's Name Cumberland Homes, Inc. Date 7/11/17
Site Address Spring Flowers Dr. Phone 910-892-4345
Directions to job site from Lillington Hwy 27W to Johnsonville Sch Rd TR
go to stop TR to Carolina Seasons on left.

Subdivision Carolina Seasons Lot 33
Description of Proposed Work NSF # of Bedrooms 4
Heated SF 2654 Unheated SF 1229 Finished Bonus Room? YES Crawl Space Slab

General Contractor Information

Cumberland Homes, Inc. 910-892-4345
Building Contractor's Company Name Telephone
P.O. Box 727 Dunn, N.C. 28335
Address Email Address
59493 norrisbuildinggroup@
License # yahoo.com

Electrical Contractor Information

Description of Work NEW Residential Service Size 200 Amps T-Pole Yes No
Wester + Pace Electric 919-499-5389
Electrical Contractor's Company Name Telephone
546 Leslie Dr. Sanford, N.C. N/A
Address Email Address
12007-U
License #

Mechanical/HVAC Contractor Information

Description of Work New Single Family Residential
Certified Heating + Air, LLC 919-818-0600
Mechanical Contractor's Company Name Telephone
P.O. Box 1071 Apex, N.C. 28348 N/A
Address Email Address
20012
License #

Plumbing Contractor Information

Description of Work New Residential # Baths
Glover Contract Plumbing, Inc. 919-868-0959
Plumbing Contractor's Company Name Telephone
304 Quail Hollow Ext. Sanford, N.C. N/A
Address Email Address
23160 27332
License #

Insulation Contractor Information

Insulating Inc. 5902 Fayetteville Rd 919-772-9000
Insulation Contractor's Company Name & Address Telephone
Raleigh
27609

*NOTE General Contractor must fill out and sign the second page of this application

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.

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

6/6/17
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, Inc.

Sign w/Title *Cherry Jones* / Agent Date 6/6/17