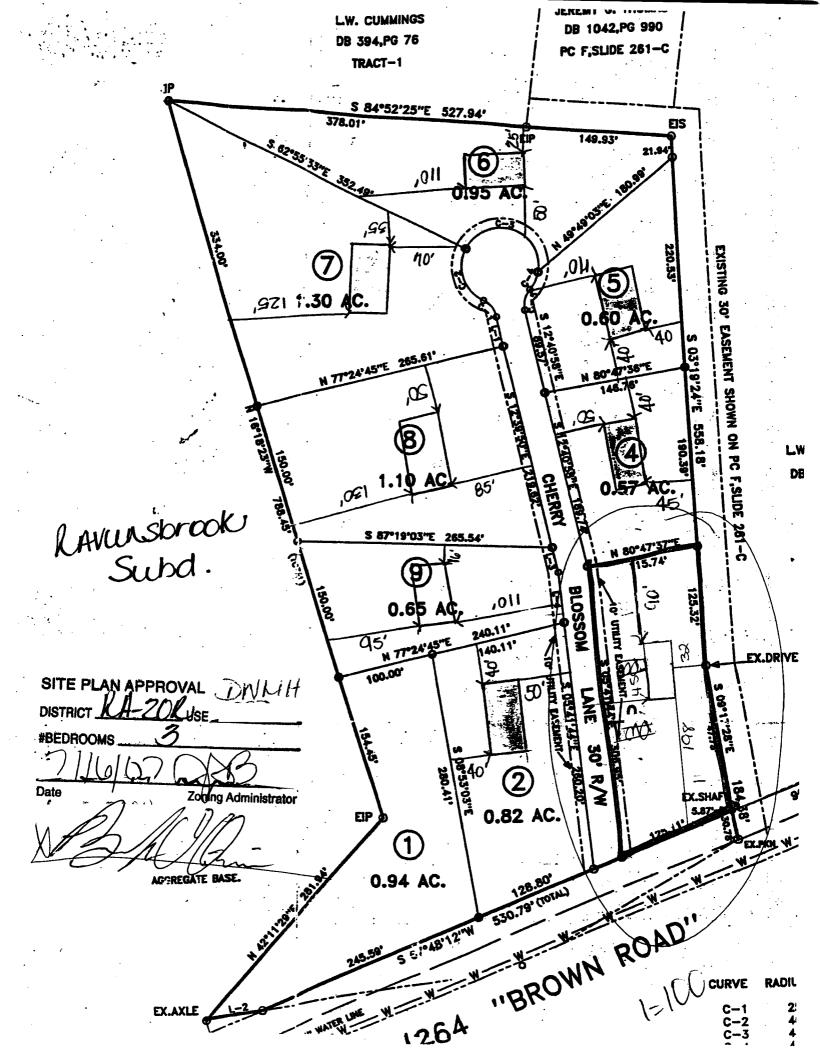
| Initial Application Date: 7/11/07 | Application # |
|--|--|
| COUNTY OF HAR Central Permitting 108 E. Front Street, Lillington, NC 27546 P | NETT LAND USE APPLICATION |
| | hone: (910) 893-7525 Fax: (910) 893-2793 www.harnett.org |
| LANDOWNER: Brooks ! Leanne O'Quinn | Mailing Address: 585 Cool Springs Kd |
| City: LillingTon State: NC Zip: 37.54 | 6Home #: 893-6934 Contact #: 890-4665 |
| APPLICANT: Brooks O'Quinn | Mailing Address: 585 Cool Springs Rd. |
| | C Home #: 893 - 6934 Contact #: 890 - 4665 |
| PROPERTY LOCATION: Subdivision: Ravensbrook | Lot #: 3 Lot Size: 0.77 acres |
| Parcel: 13-0621-0125-04 | PIN: 0021-12-4120.000 |
| | Deed Book&Page: 2367/843 ap Book&Page: 99/505 |
| SPECIFIC DIRECTIONS TO THE PROBERTY FROM LILL MOTOR | in the state of th |
| turn right onto Cool Springs | Rol travel ~/ mile turn Fight |
| onto Brown Rd. travel 2 | Imile Organite is an the last |
| | THIS PROPERTY SONTHE IEFT |
| ☐ Modular:On frameOff frame (Sizex) # Bedrooms ☐ Multi-Family Dwelling No. UnitsNo. Bedrooms/ | (w/wo bath) Garage Deck Crawl Space / Slab # Baths Garage (site built?) Unit |
| Manufactured Home:SWDWTW (Size 56 x 28) | # Bedrooms 3 Garage N (site built?) Deck N (site built?) |
| U Industry Sq. FtType | # Employees:Hours of Operation: # Employees:Hours of Operation: |
| Church Seating Capacity # Bathrooms | Kitchen |
| Home Occupation (Size x) #Rooms Accessory/Other (Size x) Use Use | - route of Operation. |
| ☐ Accessory/Other (Sizex) Use ☐ Addition to Existing Building (Sizex) Use | |
| / | Closets in addition()yes ()no |
| Water Supply: (County () Well (No. dwellings) | UST have operable water before final |
| Sewage Supply: (New Septic Tank (Must fill out New Tank Checklist) | Existing Septic Tank (County Sewer Other |
| Property owner of this tract of land own land that contains a manufactured h Structures on this tract of land: Single family dwellings Manu | factured Homes One (specify) |
| Required Residential Property Line Setbacks: Comments: | |
| Front Minimum 35 Actual 45 | |
| Rear 25 3.2 | |
| ide <u>10</u> <i>90</i> | |
| irlestreet/corner Int 20 | |
| learest Building6 | |
| permits are granted I agree to conform to all ordinances and the laws of | of the State of North Carolina regulating such work and the specifications of plan |
| ubmitted. I hereby state that the foregoing statements are accurate and | correct to the best of my knowledge. This permit is subject to revocation if fals |
| formation is provided on this form. | |

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

7-15-07

Signature of Owner or Owner's Agent



This application to be filled out only when applying for a new septic system. County Health Department Application for Improvement Permit and/or Authorization to Construct

IF THE INFORMATION IN THIS APPLICATION IS FAI SIFIED. CHANGED OF THE SITE IS ALTEDED. THEN THE

| 60 | PROVI months piration | EMENT PER | MIT OR AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either spiration depending upon documentation submitted. (complete site plan = 60 months; complete plat = without | | | |
|----------|-----------------------------|-----------------|---|--|--|--|
| DE | VELO | PMENT IN | FORMATION | | | |
| | New: | single family | residence | | | |
| | Expar | sion of existi | ng system | | | |
| | Repai | r to malfuncti | oning sewage disposal system | | | |
| | Non-r | esidential type | e of structure | | | |
| W | ATER: | SUPPLY | | | | |
| a | New v | well | | | | |
| 0 | Existing well | | | | | |
| | _ | nunity well | | | | |
| 2 | Public | water | | | | |
| Q | Spring | Ş | | | | |
| Are | there a | ny existing w | rells, springs, or existing waterlines on this property? | | | |
| { | } yes | ⊘ no {_ | } unknown | | | |
| Ifa | | | ion to construct please indicate desired system type(s): can be ranked in order of preference, must choose one. | | | |
| - | } Acc | - | [_] Innovative | | | |
| | | mative | | | | |
| - | | | {}} Any | | | |
| | | | 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 NO | Does the site contain any existing Wastewater Systems? | | | |
| { | YES | (W) NO | Is any wastewater going to be generated on the site other than domestic sewage? | | | |
| { | YES | {LYNO | Is the site subject to approval by any other Public Agency? | | | |
| { | YES | NO 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. | | | |
| í Ha | ve Reac | l This Applica | tion And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And | | | |
| | | | d Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules. | | | |
| | | | olely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making | | | |
| The | Site Ac | cessible So Tha | at A Complete Site Evaluation Can Be Performed. | | | |
| Z | 5 | Y OWNERS | OR OWNERS LEGAL DEPOPESENTATIVE SIGNATURE (REQUIRED) | | | |

3/07

Application Number: 67500/8028

Harnett County Central Permitting Department

PO Box 65, Lillington, NC 27546 910-893-7525

Environmental Health New Septic Systems Test

Environmental Health Code

- Place "property flags" on each corner iron of lot. All property lines must be clearly flagged approximately every 50 feet between corners.
- Place "house corner flags" at each corner of where the house/manufactured home will sit. Use additional flagging to outline driveways, garages, decks, out buildings, swimming pools, etc.
- Place flags at locations as developed on site plan by Customer Service Technician and you.
- Place Environmental Health "orange" card in location that is easily viewed from road.
- 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. No grading of property should be done.
- Call No Cuts to locate utility lines prior to scheduling inspection. 800-632-4949 (This is a free service)
- After preparing proposed site call the voice permitting system at 910-893-7525 and give code **800** for Environmental Health confirmation. 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 permits.

☐ Environmental Health Existing Tank Inspections

Environmental Health Code 80

- Place Environmental Health "orange" card in location that is easily viewed from road. Follow above instructions for placing flags on property.
- Prepare for inspection by removing soil over door as diagram indicates. Loosen trap door cover. (Unless inspection is for a septic tank in a mobile home park)
- After preparing trapdoor call the voice permitting system at 910-893-7525 and give code **800** for Environmental Health confirmation. **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.

☐ Health and Sanitation Inspections

- After submitting plans for food and lodging to Central Permitting, please allow approximately 7-10 working days for plan status. Use Click2Gov or IVR to hear results.
- Once all plans are approved, proceed to Central Permitting for remaining permits.

☐ Fire Marshal Inspections

- After submitting plans for Fire Marshal review to Central Permitting, please allow approximately 7-10 working days for approval. Use Click2Gov or IVR to hear results. Once <u>all</u> plans are approved, proceed to Central Permitting for permits.
- Fire Marshal's letter must be placed on job site until work is completed.

→ Public Utilities

- Place stake with "orange" tape/name thirty feet (30) from the center of the road at the location you wish to have water tap installed.
- Allow four to six weeks after application for water/sewer taps. Call Utilities at 893-7575 for technical assistance.

Building Inspections

- After submitting plans for Building Inspections, please allow approximately 3 working days for review. Use Click2Gov or IVR to hear results. Once all plans are approved, proceed to Central Permitting for permits.
- For new housing/set up permits must meet E 911 / Addressing guidelines prior to scheduling final inspection.
- Use Click2Gov or IVR to hear results.

E911 Addressing

Addressing Confirmation Code 814

- Address numbers shall be mounted on the house, 3 inches high (5" for commercial).
- Numbers must be a contrasting color from house, must be clearly visible night and day at entrance of driveway if home is 100 ft or more from road, or if mailbox is on opposite side of road.
- Once you purchase permits and footing inspection has been approved call the voice permitting system at 910-893-7525 and give code 814 for address confirmation. This must be called in even if you have contacted E911 for verbal confirmation. Check Click2Gov for results and address.

| Inspection results can be viewed onl | ine at <u>http://www.harnett.or</u> g | g/services-2 | <u>13.asp</u> then select <u>Click2Gov</u> |
|--|---------------------------------------|--------------|--|
| Applicant/Owner Signature | | | 7-16-07 |
| | | | |



FOR RECISTRATION RESISTER OF DEEDS NAMED TO COUNTY INC. 2007 APR 25 63:17:58 PM BK:2367 PG:843-846 FEE:\$20.00

INSTRUMENT 1 2007 00 1365

| NORTH CAROLINA G | GENERAL WARRANTY DEED |
|--|--|
| ixcise Tex: 0 | |
| arcel Identifier No. 130621 0125 04 Verified by | County on the day of, 20 |
| | |
| Sail Box to: REGINALD B. KELLY, POBOX 1718, LI | LLINGTON, NC 27546 |
| his instrument was prepared by: REGINALD B. KELLY. | 900 SMAIN STREET, LILLINGTON, NC 27546 |
| | |
| brief description for the Index: | |
| HIS DEBD made this 13th day of April 20 | 07, by and between |
| GRANTOR | GRANTEE |
| OBERT LEWIS STOKES, Unmarried | BROOKS C. O'QUINN and wife, |
| 03 KENAN STREET | LEANNE C. O'QUINN |
| JLLINGTON, NC 27546 | / P9-BOjk 597 |
| | (MAMERS/NC 27552 |
| | |
| | |
| | |
| he designation Grantor and Grantee as used herein shall in | clude said parties, their heirs, successors, and assigns, and shall include |
| ingular, plural, masculine, feminine or neuter as required b | by context. |
| UFFNEODETH that the American for a unbodyle consideration | an anid harden Carress Sha and the grantesh in homber and resident har |
| vill NESSE in, met me Chambr, for a variable consideration of by these typeents does orant become sell and convey in | on paid by the Grantee, the receipt of which is hereby acknowledged, has nto the Grantee in fee simple, all that cartain let or parcel of land situated |
| the City of Upper Little R | iver Township, HARNEPT County, North Carolina and |
| nore particularly described as follows: | |
| ee Attached | |
| | |
| | |
| | |
| he property hereinabove described was acquired by Grant | tor by instrument recorded in Book 1445 page 849 |
| map showing the above described property is recorded in | n Plat Book page |
| , , | |
| IC Bar Association Form No. L-3 © 1976, Revised © 197 | SoftPro Corporation, 333 E. Six Forks Rd., Raleigh, NC 27609 |
| with a transfer with the tack to the transferrent - 1201 | Contro Composition, 255 C. On Point Res., restrict, restrict, restrict, res |
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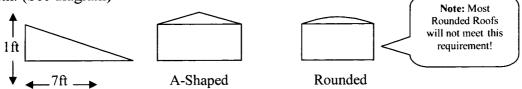
PROCEDURES AND GUILDELINES FOR MANUFACTURED HOME INSPECTIONS

RA-20R Criteria Certification

I, Broks Oburn, understand that because I'm located in a RA-20R (Print Name)

Zoning District and wish to place a manufactured home in this district I must meet the following criteria before I will be issued a certificate of occupancy for this home.

1. The home must have a pitched roof, for a manufactured home, whether A-shaped or rounded, which has a minimum rise of twelve (12) inches for every seven (7) feet of width. (See diagram)



- 2. The home must be underpinned, the underpinning must be designed for manufactured home & installed in good workmanship-like manner along the entire base of a manufactured home, except for ventilation and crawl space requirements, and consisting of the following: metal with a baked —on finish of uniform color; a uniform design and color vinyl; or brick, cinder block, and stone masonry as well as artificial stone masonry.
- 3. The homes moving apparatus removed, underpinned or landscaped.

Signature of Property Owner/Agent

*By signing this form the owner/agent is stating that they have read and understand the information on this form

7-16-07