

SCANNED
10/01/08
DATE

Initial Application Date: 9/30/08

Application # 08 500 21 039

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION
Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 Fax: (910) 893-2793 www.harnett.org/permits

LANDOWNER: Kevin L. Spivey Mailing Address: _____

City: Sanford State: NC Zip: 27332 Home #: _____ Contact #: _____

APPLICANT: Clayton Homes Mailing Address: 2128 Hwy 9649

City: Asheboro State: NC Zip: 27203 Home #: 336-629-2000 Contact #: LARRY BLAIN

*Please fill out applicant information if different than landowner
CONTACT NAME APPLYING IN OFFICE: LARRY BLAIN Phone #: 336-302-6862

PROPERTY LOCATION: Subdivision w/phase or section: KEVIN SPIVEY Lot #: 1 Lot Acreage: 1.47

State Road #: 1221 State Road Name: Cox Mill Rd Map Book & Page: 2008-1-227

Parcel: 0396-70500201 PIN: 9670-42-150

Zoning: RA 2012 Flood Zone: X Watershed: N/A Deed Book & Page: 2501 1988 Power Company: PROGRESS

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

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 421 North To Cox Mill Rd
Turn Left go 2 1/2 Turn Left Dist to Grave Drive

PROPOSED USE:

- SFD (Size ___ x ___) # Bedrooms 3 # Baths 2 Basement (w/wo bath) _____ Garage _____ Deck _____ Circle:
Crawl Space / Slab
(Is the bonus room finished? _____ w/ a closet _____ if so add in with # bedrooms)
- Mod (Size ___ x ___) # Bedrooms _____ # Baths _____ Basement (w/wo bath) _____ Garage _____ Site Built Deck _____ ON Frame / OFF
(Is the second floor finished? _____ Any other site built additions? _____)
- Manufactured Home: _____ SW DW _____ TW (Size 32 x 60) # Bedrooms 3 Garage _____ (site built? _____) Deck 4x4 (site built? _____)
- Duplex (Size ___ x ___) No. Buildings _____ No. Bedrooms/Unit _____
- Home Occupation # Rooms _____ Use _____ Hours of Operation: _____ #Employees _____
- Addition/Accessory/Other (Size ___ x ___) Use _____ Closets in addition () yes () no

Water Supply: () County () Well (No. dwellings _____) **MUST** have operable water before final

Sewage Supply: () New Septic Tank (Complete Checklist) () Existing Septic Tank (Complete Checklist) () County Sewer

Property owner of this tract of land own land that contains a manufactured home w/in five hundred feet (500') of tract listed above? () YES () NO

Structures (existing & proposed): Stick Built/Modular _____ Manufactured Homes 1 PROPOSED Other (specify) _____

Required Residential Property Line Setbacks:		Comments:
Front	Minimum <u>35</u> Actual <u>78'</u>	_____
Rear	<u>25</u> <u>135'</u>	_____
Closest Side	<u>10</u> <u>50'</u>	_____
Sidestreet/corner lot	<u>—</u> <u>—</u>	_____
Nearest Building on same lot	<u>—</u> <u>—</u>	_____

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 _____ Date 9/30/08

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

From
lot 352

BK:01132 PG:0569



FOR REGISTRATION REGISTER OF DEEDS
KIMBERLY S. HARGROVE
HARNETT COUNTY, NC
2008 APR 28 02:04:58 PM
BK:2501 PG:988-990 FEE:\$17.00

HARNETT COUNTY TAX ID#

039670 5057

47808 578115

INSTRUMENT # 200806878

Excise Tax \$0.00 CALL SAS GIFT DEED Do NOT write above this line. Recording: Time, Book and Page

North Carolina General Warranty Deed

This instrument prepared by: April E. Stephenson, Attorney at Law DOCUMENT PREPARATION ONLY/NO TITLE EXAM

Brief description for the index

This Deed made this 25th day of April 2008, by and between Grantor and Grantee:

Enter in appropriate block for each party: Name, address, county, state and if appropriate entity (i.e. corporation, partnership). The designation Grantor and Grantee as used herein shall include all parties, their heirs, successors and assigns and shall include singular, plural, masculine, feminine or neuter as required by context.

Grantor:

CLYDE B. SPIVEY and wife, 8694 Cox Mill Rd.
SHIRLEY H. SPIVEY Sanford, NC 27332

Grantee:

KEVIN L. SPIVEY 8694 Cox Mill Rd.
Sanford, NC 27332

Transfer of Ownership: Grantor, for a valuable consideration paid by Grantee, the receipt of which is hereby acknowledged, conveys to Grantee in fee simple, the Property described below:

Property: City of _____ Township of Barbecue, County of Harnett/Lee, North Carolina.

This property was acquired by Grantor by an instrument recorded in Book 428, Page 520, Lee County.

A map showing the property is recorded in Plat Book /Map Number 2008, Page 227, Harnett County.

The legal description of the Property is:

BEING ALL OF TRACT ONE, containing 1.47 acres, more or less, according to a survey entitled, "Minor Subdivision For: Kevin Spivey", prepared by alley, williams, carmen & king, inc., dated January 29, 2008 and recorded at Map Number 2008-227, Harnett County Registry. Reference to said plat is hereby made for greater certainty of description.

TOGETHER with access thereto by that certain 50 foot access easement leading from SR #1221 (Cox Mill Road) to the subject property, all as shown on the above referenced plat.

FILED
LEE COUNTY
MOLLIE A. MCINNIS
REGISTER OF DEEDS

FILED Apr 28, 2008
AT 03:23:27 pm
BOOK 01132
START PAGE 0569
END PAGE 0571
INSTRUMENT # 03295

Continued on Page 2

After recording mail to:
Mr. Kevin L. Spivey
8694 Cox Mill Rd.
Sanford, NC 27332

Tax Lot No. _____
Parcel Identifier No. _____
Verified By _____ County, _____
on the _____ day of _____ 20____
By _____

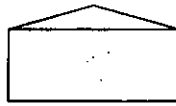
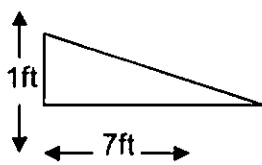
PROCEDURES AND GUIDELINES FOR MANUFACTURED HOME INSPECTIONS

RA-20R Criteria Certification

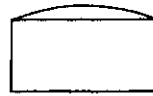
I, LARRY BLAIR, understand that because I'm located in a
(Print Name)

RA-20R 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)



A-Shaped



Rounded

Note: Most Rounded Roofs will not meet this requirement!

2. The home must be underpinned, the underpinning must be 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

Date

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

08500 21039

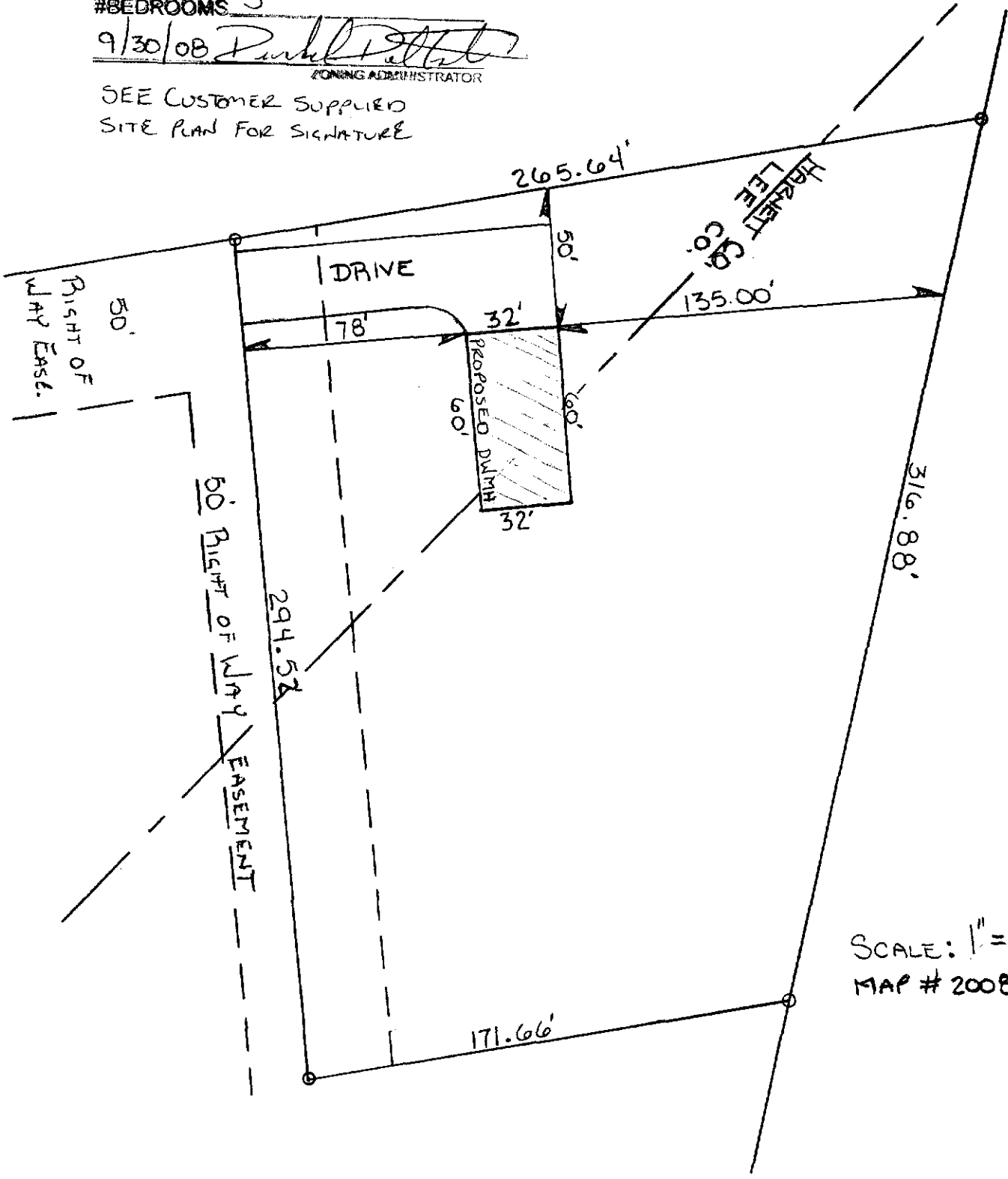
SITE PLAN APPROVAL

DISTRICT RA 20R USE DWMH

#BEDROOMS 3

9/30/08 [Signature]
ZONING ADMINISTRATOR

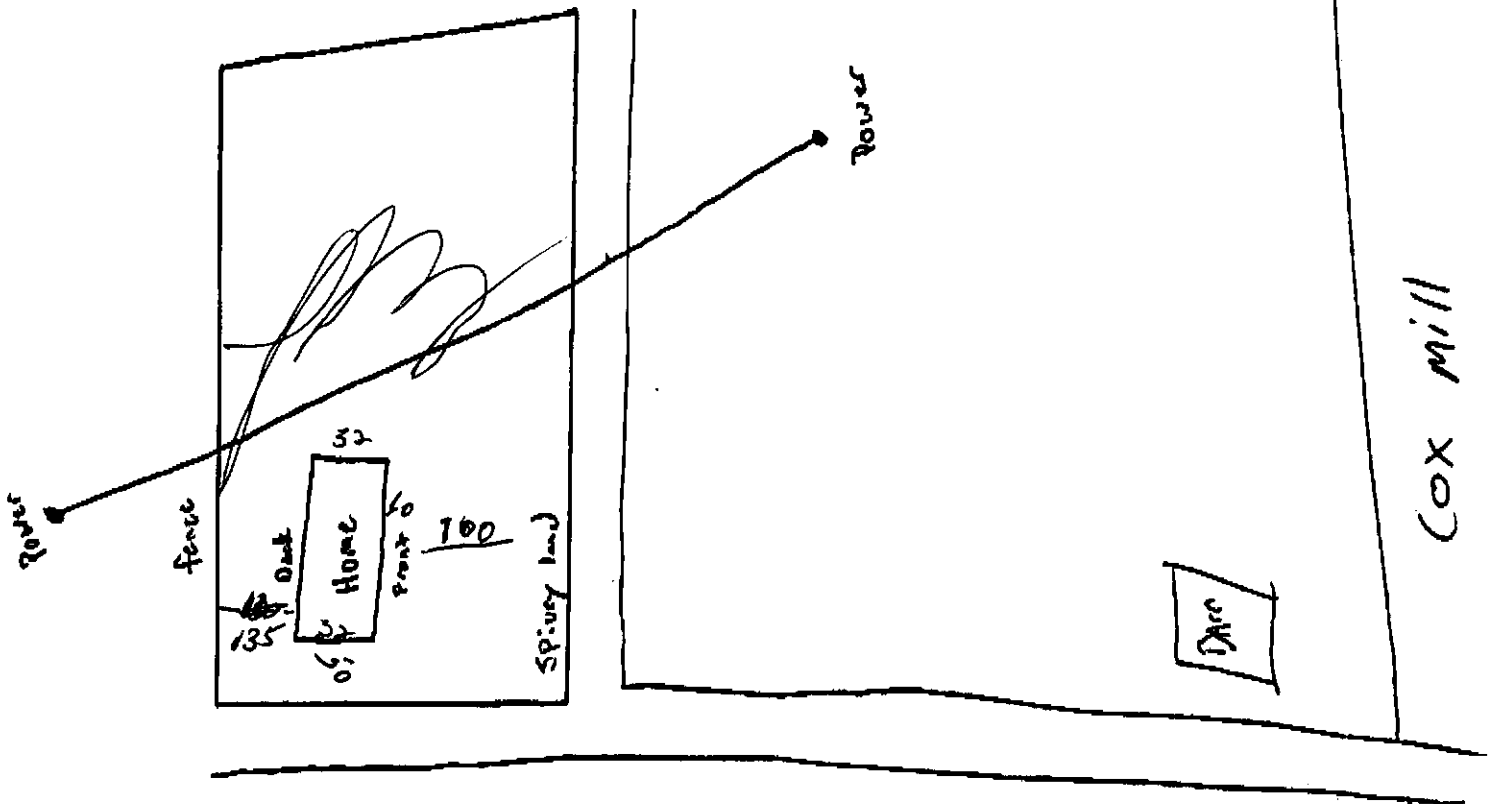
SEE CUSTOMER SUPPLIED
SITE PLAN FOR SIGNATURE



SCALE: 1" = 50'
MAP # 2008-227

0850021039

CUSTOMER SUPPLIED SITE
SIGNED BY APPLICANT



I give Larry Blair permission to apply for
a perk test on my land. Located on Cox mill Rd.

NAME: LARRY BLAIR

APPLICATION #: 08 500 21039

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

- 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.**
- **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 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 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 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.

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

9/30/01
DATE