SCANNED 9 11 09 DATE

Initial Application Date: 5/8/09	DATE Application # 09 500 22058
COUNTY OF HARNET	TT RESIDENTIAL LAND USE APPLICATION Phone: (910) 893-7525 Fax: (910) 893-2793 www.harnett.org/permi
LANDOWNER: THOMAS B. JACKSON	Mailing Address:
City: State: Zin:	Home #
APPLICANT: DICETT & JUNE SMY DEN	Mailing Address: 5508 1.18 10.11 To 4 1 . CA
City: HOPE MUS State: NZip: 28: *Please fill out applicant information if different than landowner	3 48 Home #:Contact #:
CONTACT NAME APPLYING IN OFFICE: SAME	Phone #:
PROPERTY LOCATION: Subdivision w/phase or section:	Lot #:Lot Acreage: 10,75
State Road #: 1128 State Road Name: DARROCH RO	
Parcel: 010527-0011-01	DIN 0527 11 - 12 12 0000
Zoning: RAZOR Flood Zone; X Watershed: NA	Deed Book&Page: 1063 / 522 Power Company*: South Ration
*New homes with Progress Energy as service provider need to supply p	Power Company*: South / Mich
SPECIFIC DIRECTIONS TO THE PROPERTY FROM IN LINGTON.	210 SOUTH. TURN RIGHT ON DANKOCH
NO 2.1 MAKES. ON RIGHT	SOLTH. TWAN RIGHT ON DANKOCH
Mod (Size x ) # Bedrooms # Baths Baseme (Is the second floor finished? Any other site built addition  Manufactured Home: SW DW TW (Size 3 & x 8 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	ent (w/wo bath) Garage Site Built Deck ON Frame / OFF ons?)  # Bedrooms Garage (site built?) Deck (site built?)  #/ Cosets in addition(_) yes (_) no  ## MUST have operable water before final  ( Fristing Section Tock (Complete Office of the Attrice)
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
Bouled Resident Services Sick Bully Modular Manu	factured Homes   PKOPOSEO Other (specify)
Required Residential Property Line Setbacks: Comments:  Front Minimum 35 Actual 277.48	
Rear 25	
Closest Side (O 328.00	
Sidestreet/corner lot 20	
Nearest Building 6	
If permits are granted I agree to conform to all ordinances and laws of the SI	tate of North Carolina regulating such work and the specifications of plans submitted.
releasely state that foregoing statements are accurate and correct to the best	of my knowledge. Permit subject to revocation if false information is provided.
Buttling Charles	5-8-9
Signature of Owner or Owner's Agent	Date

\*\*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

22058

5-8 09 5095

FOR REGISTRATION REGISTER OF DEEDS HARNETY SOUNTY, NC 2009 MAY 08 02:00:57 PM BK:2624 PG:607-609 FEE:\$17.00 NC REV STAMP:\$80.00 INSTRUMENT # 2009006957

Excise Tax \$ 80.

4

Recording Time, Book and Page

Parcel Identifier No: out of 010527 0011 01 No Title Examination

Mail after recording to Bain & McRae, Attorneys at Law, P.O. Box 99, Lillington, NC 27546
This instrument was prepared by Bain & McRae, Attorneys at Law, P.O. Box 99, Lillington, NC 27546

Brief description for index 10.75 Acres Tract 2 / Anderson Creek Township

#### NORTH CAROLINA GENERAL WARRANTY DEED

THIS DEED made this 8th day of May, 2009

by and between

**GRANTOR** 

GRANTEE

Thomas B. Jackson, Widower 2582 Darroch Rd. Lillington, NC 27546 Brett A. Snyder and wife Elizabeth J. Snyder 5508 Walking Trail Way Hope Mills, NC 28348

Enter in appropriate block for each party: name, address, and, if appropriate, character of entity, e.g., corporation or partnership.

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 lot or parcel of land situated in the City of

Anderson Creek Township, Harnett County, North Carolina and more particularly described as follows:

Being all of that 10.75 acre tract as shown as Tract II upon that survey titled Thomas B. Jackson and Andrew J. Knell by Bennett Surveys dated August 2<sup>nd</sup>, 1995, which is recorded at Plat Cabinet F, Slide 450-B, Harnett County Registry.

This is a portion of the property being conveyed to Thomas B. Jackson and wife Sylvia G. Jackson by deed dated August 16<sup>th</sup>, 1994 and recorded in Deed Book 1063, Page 522, Harnett County Registry.

The property hereinabove described was acquired by Grantor by instrument recorded in **Deed Book 1063**, **Page 522**, **Harnett County Registry**.

A map showing the above described property is recorded at Plat Cabinet F, Slide 450-B, Harnett County Registry.

TO HAVE AND TO HOLD the aforesaid lot or parcel of land and all privileges and appurtenances thereto belonging to the Grantee in fee simple.

And the Grantor covenants with the Grantee, that Grantor is seized of the premises in fee simple, has the right to convey the same in fee simple, that title is marketable and free and clear of all encumbrances, and that Grantor will warrant and defend the title against the lawful claims of all persons whomsoever except for the exceptions hereinafter stated.

Title to the property hereinabove described is subject to the following exceptions:

Any and all restrictions, roadway easements, and utility easements as may appear of record in the Harnett County Registry.

IN WITNESS WHEREOF, the Grantor has hereunto set his hand and seal, or if corporate, has caused this instrument to be signed in its name by its duly authorized officers and its seal to be hereunto affixed by authority of its Board of Directors, the day and year first above written.

Thomas B. Jackson

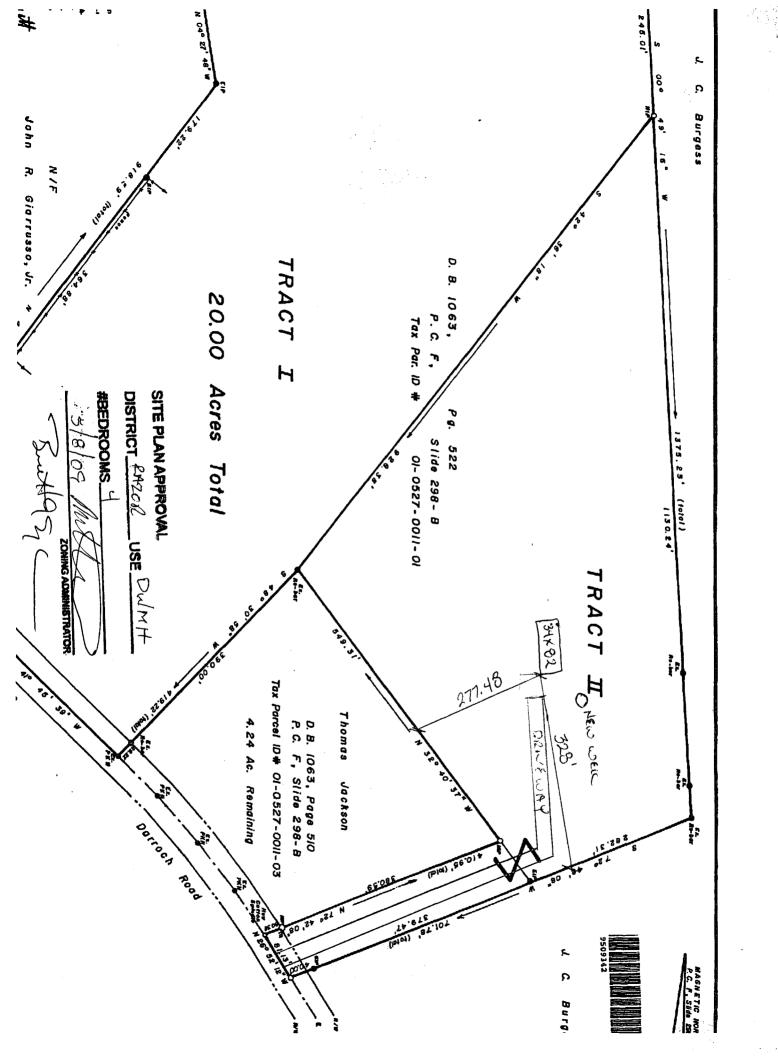
(SEAL)

NORTH CAROLINA, HARNETT COUNTY.

I, Susan Mills, a Notary Public in and for Lee County, North Carolina, certify that **Thomas B. Jackson** personally appeared before me this day and acknowledged the due execution of the foregoing instrument. Witness my hand and official seal this \$7^\tau\$ day of May, 2009.

Notary Public

My Commission Expires:



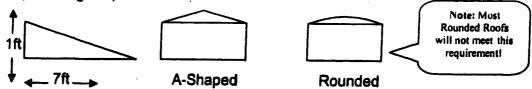
### PROCEDURES AND GUIDELINES FOR MANUFACTURED HOME INSPECTIONS

#### **RA-20R Criteria Certification**

I, BRETT \$ SUWE SNYDER , 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)



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

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

# **Harnett County Department of Public Health**

## **Well Construction Permit Application**

If the information in the application for a Well Construction Permit is falsified, changed, or the site is altered, then the Well Construction Permit shall become <u>invalid</u>.

	•
APPLICANT IN	<b>FORMATION</b>
BRETT & JUNE SNYDER	(GIA) 425 3637
Applicant/Owner SSOR WAYKING TRACK WAY	Phone Number
STOR MALKING THERE WALL	theis Miles Add 282 (1)
Street Address, City, State, Zip Code	1018 MILES 1802 C0398
The Applicant must submit a Site Plan. The Site Plan is a	map/drawing of the property and must show:
<ol> <li>existing and/or proposed property lines and easements with</li> <li>the location of the facility and appurtenance;</li> </ol>	dimensions;
3. the location for the proposed well;	•
4. the location of existing or proposed sewer lines and/or sewa	ge disposal systems within 100 feet or the proposed well-
5. the location of any existing wells within 100 feet of the proj	perty: surface water bodies:
6. above ground and/or underground storage tanks:	
7. and any other known sources of contamination within 100 fe	eet of the proposed well site.
The Applicant shall notify the Harmont Co. A. H. Lit D.	
The Applicant shall notify the Harnett County Health Direction of Environmental Health if any of the following of	ector through or by way of the Harnett County
1. there is a relocation of the proposed facility;	cur prior to well construction:
2. there is a change in the intended use of the facility;	
3. there is a need for installing the waste water system in an arc	ea other than indicated on the well permit; or
4. there are landscape changed that affect site drainage.	·
Contact information: Environmental Health	n Division - 910-893-7547
PROPERTY INF	ORMATION
Proposed use	e of well
Single-Family Multifamily Church	Restaurant  Business  Irrigation
Street Address	Subdivision/Lot #
Parcel #	DIN #
Parcel #	PIN#_
210 South to DANROCH RO.	the Site
210 SOUTH TO DAMPOCH RD.	DIRNI RIGHT ZOL MILLS
on RT.	TOTAL TELEPOOR
0,0	
Lhave thoroughly read and annual a latter to the control of the co	
I have thoroughly read and completed this Application and certify correct to the best of my knowledge and is give in good faith. Repre	that the information provided herein is true, complete and
state officials are granted right of entry to conduct necessary inspec	tions to determine compliance with applicable rules.

I understand that I am solely responsible for the proper identification and labeling of all property lines, underground utility lines, and making the site accessible so that a will can be properly constructed according to the permit.

Property Owner's of Owner's Legal Representative Signature Required

227

Date

NAME: BRETT & SUME SUY DET

APPLICATION #:
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(
*This application to be filled out when applying for a septic system inspection.*  County Health Department Application for New York
IF THE INFORMATION IN THIS Application for Improvement Permit and/or Authorization to Construct
PERMIT OR AUTHORIZATION TO CONSTRUCT STATE OF THE SITE IS ALTERED. THEN THE IMPROVEMENT
depending upon documentation submitted. (complete site plan = 60 months or without expiration
910-893-7525 option 1
<ul> <li>Place "pink property flags" on each corner iron of lot. All property lines must be clearly flagged approximate every 50 feet between corners.</li> </ul>
every 50 feet between corners.
<ul> <li>Place "orange house corner flags" at each corner of the proposed structure. Also flag driveways, garages, deck out buildings, swimming pools, etc. Place flags per site plan developed at for Control Page 1999.</li> </ul>
out buildings, swimming pools, etc. Place flags per site plan developed at/for Central Permitting.  Place orange Environmental Health card in location that is positive to a self-contral permitting.
<ul> <li>Place orange Environmental Health card in location that is easily viewed from road to assist in locating property.</li> <li>If property is thickly wooded, Environmental Health requires that you close and the assist in locating property.</li> </ul>
If property is thickly wooded, Environmental Health requires that you clean out the undergrowth to allow the so evaluation to be performed. Inspectors should be able to walk freely around site. On most of the solution of the solution to be performed.
• Call No Cuts to locate utility lines prior to school line is to the walk meety around site. Do not grade property.
<ul> <li>After preparing proposed site call the value proposed site call the value proposed.</li> </ul>
800 (after selecting notification permit if multiple agent is system at 910-893-7525 option 1 to schedule and use cod
confirmation number given at and of recording for proof of Environmental nearm inspection. Please not
TOO CHOICE OF THE TO VALID CARRIES AND THE TABLE OF THE T
UNIOW GDUYG-IDSTRUCTIONS for placing flage and cond on any analysis
Trapara for inspection by removing soil over door on diagram in the
inspection is for a septic tank in a mobile home park)  After preparing transfer cell the union will be union to the contract of the union to the union
After preparing trapdoor call the voice permitting system at 916-893-7525 option 1 & select notification permit if multiple permits, then use code 800 for Environmental Health inspection.
given at end of recording for proof of recuest
Use Click2Gov or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.
approved, proceed to Central Permitting for remaining permits.
SEPTIC  If applying for authorization to account to the second se
If applying for authorization to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.
(1) Conventional (4) Any
{} Alternative () Other
The applicant shall notify the local health department upon submitted.
question. If the answer is "yes", applicant must attach supporting documentation.
A STATE OF THE STA
(_)YES (_) NO Does the site contain any Jurisdictional Wetlands? (_)YES (_)NO Do you plan to have an irrigation system any statement of the st
may all may all may all may all may all may be all may
the building contain any <u>drains</u> ? Please explain
YES ( ) NO Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
12 12 13 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 committee
rave Read 1 his Application And Certify That The Information Provided Herein Is True Complete And C
The conduct recessary inspections to Determine Country in the conductions of the conduction of the
Understand That I Am Solely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making
he Site Accessible So That A Complete Site Evaluation Can Be/Performed.
T-89
ROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)  DATE
DATE