

Initial Application Date: 3.7.13

Application # 1350030812

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: Robert Carl Davis Mailing Address: 63 Cucumber Ln
City: Linden State: NC Zip: 28356 Contact No: _____ Email: _____

APPLICANT*: Tori Hollingsworth Mailing Address: 1260 Fire Lane Rd
City: Bunnlevel State: NC Zip: 28323 Contact No: 910-242-2426 Email: _____
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: John Gunn Phone # 893-1050 home
910-514-2240 cell

PROPERTY LOCATION: Subdivision: PREVIOUS Mclean Lot #: - Lot Size: 1 AC
State Road #: _____ State Road Name: Mclean Chapel Ch Rd. Map Book & Page: 2002, 1195
Parcel: 12.0556.0086.09 PIN: 0556.05.7992
Zoning: RA20M Flood Zone: X Watershed: 111 Deed Book & Page: 1701, 858 Power Company*: _____

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

PROPOSED USE: 1985 Champion
MH/MU

SFD: (Size _____ x _____) # Bedrooms: _____ # Baths: _____ 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 17 x 40) # Bedrooms: 2 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 ~~As per deed~~

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

Required Residential Property Line Setbacks:

	Minimum	Actual
Front	<u>35</u>	<u>102</u>
Rear	<u>25</u>	<u>64</u>
Closest Side	<u>10</u>	<u>38</u>
Sidestreet/corner lot	<u>20</u>	<u>-</u>
Nearest Building on same lot	<u>10</u>	<u>-</u>

Comments: _____
Night Light Coming across end of
Lot and one pole at front
of Lot with cable for T.V.

128

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:

Take 210 South from Lillington
turn left on McNeill Hobbs turn right on Thompson
turn left on Mclean Chapel Road then it will
be on right

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.

Jeri Hollingsworth
Signature of Owner or Owner's Agent

3-11-13
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

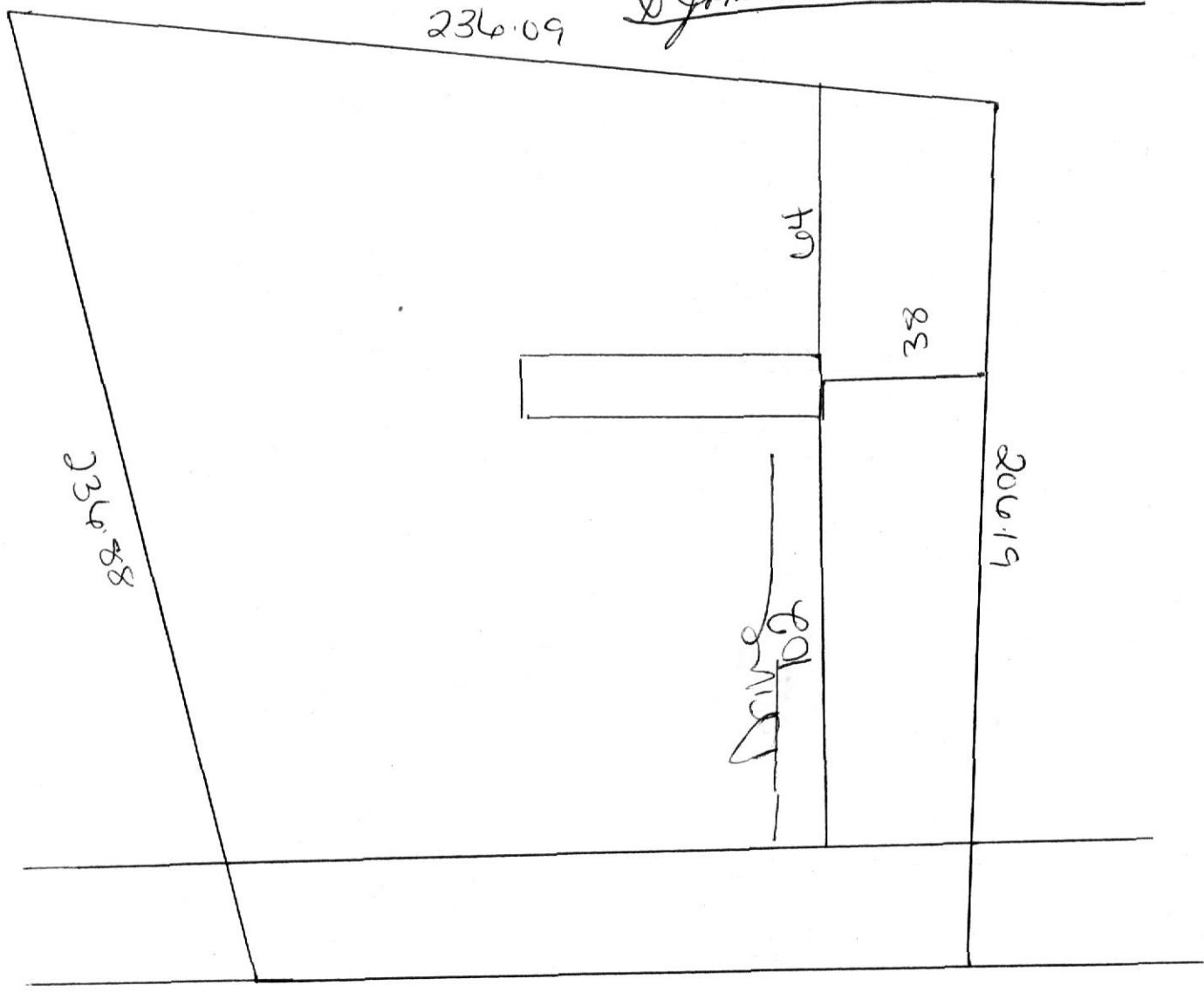
SITE PLAN APPROVAL

DISTRICT BAROM USE SumH

#BEDROOMS 2

Date 3-11-13 JAB
Zoning Administrator

John A. Burn



169.72
McLean Chapel Church Rd
SR # 2030

NAME: _____

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.

Tari L. Hollingworth
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

3-11-13
DATE

Harnett County Central Permitting

North Carolina

I, Robert Earl Davis give permission to Tori L. Hollingsworth to put a mobile home on my property located at 2768 McLean Chapel Church Road in Bunnlevel, NC 28323.

Date: 3-10-13

Robert EARL DAVIS

Print

Robert Earl Davis

Signature

On this 10th day of March, 2013, Robert Earl Davis, personally appeared before me and signed the above statement.

Doris J. Finger
Notary Public

6-28-2013
My commission expires

State of North Carolina

County of Harnett

Notary Seal

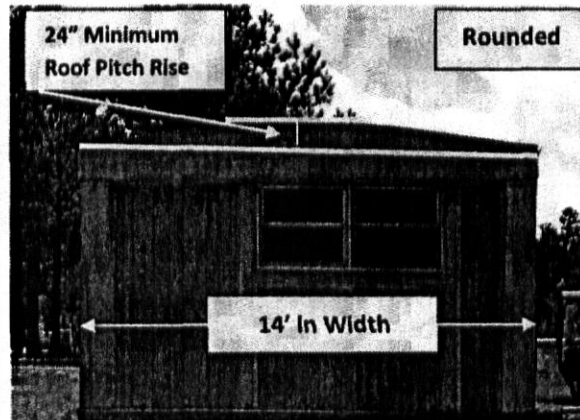
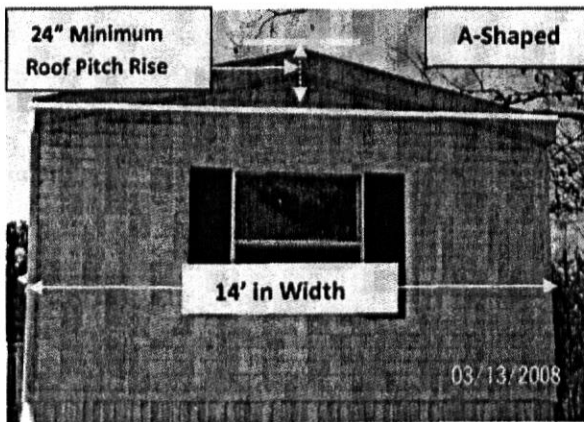


PROCEDURES AND GUIDELINES FOR MANUFACTURED HOME INSPECTIONS

RA-20R & RA- 20M Certification Criteria

I, Tori Hollingsworth understand that because I'm located in a **RA-20R** or **RA-20M** Zoning District and wish to place a manufactured home in this district I must meet the following criteria, verified by zoning inspection approval, 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 (measured at the center of the home) of twelve (12) inches for every seven (7) feet of total width of the home. (Example: A home measuring fourteen (14 ft.) in width must have a twenty four (24) inch rise as measured from the center of the roofline to the baseline of the roof.) (See Illustrations Below.)



Note: Most Rounded Roofs **Will Not** Meet The Roof Pitch Requirement As Illustrated. The Measurement From The Peak Of The Roof To The Base Line Of The Roof Must Be 12" For Every 7' Of Total Width Of The Home. (Ex: 14' Wide Home = 24" Roof Rise)



Continued.....

2. The home must be underpinned, consisting of a brick curtain wall or have galvanized metal sheeting, ABS or PBC plastic color skirting with interlocking edges, installed around the perimeter of the home. Skirting shall be consistent in appearance, in good condition, continuous, permanent, and unpierced except for ventilation and access.
3. The homes moving apparatus must be removed, underpinned, or landscaped. (See examples below.)



4. The home must have been constructed after July 1st 1976.

John A. Gure 3-11-13

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.

Application # _____
Harnett County Central Permitting

PO Box 65 Lillington, NC 27546

Telephone Number: 910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Application for Manufactured Home Set-Up Permit

(Please fill out each part completely)

Part I – Owner Information:

Home Owner Information (To be completed by owner of the manufactured home)

Name: Tori Hollingsworth Address: 1260 Fire Lane Rd
City: Bunnlevel State: NC Zip: 28323 Daytime Phone: 910-242-2426

Landowner Information (To be completed by landowner, if different than above)

Name: _____ Address: _____

City: _____ State: _____ Zip: _____ Daytime Phone: () _____

Part II – Contractor Information (To be completed by Contractors or Homeowner, if applicable.)

Name, address, & phone must match information on license)

A. **Set-Up Contractor** Company Name: William King

Phone: 910-988-0302 Address: Fayetteville, NC

City: 988- State: _____ Zip: _____

State Lic# 2635 Email: _____

B. **Electrical Contractor** Company Name: John a Gunn

Phone: 910 893-1050 Address: 1260 Fire Lane Rd

City: Bunnlevel State: N.C Zip: 28323

State Lic# _____ Email: _____

C. **Mechanical Contractor** Company Name: John a Gunn

Phone: 910 893-1050 Address: 1260 Fire Lane Rd

City: Bunnlevel State: N.C. Zip: 28323

State Lic# _____ Email: _____

D. **Plumbing Contractor** Company Name: John a Gunn

Phone: 910 893-1050 Address: 1260 Fire Lane Rd

City: Bunnlevel State: N.C. Zip: 28323

State Lic# _____ Email: _____

Part III – Manufactured Home Information

Model Year: 1985 Size: 14x70 **Complete & follow zoning criteria sheet**

Park Name: _____ Lot Number: 2768

I hereby certify that I have the authority to apply for this permit, that the application is correct including the contractor information and have obtained their permission to purchase these permits on their behalf, and that the construction or installation will conform to the applicable manufactured home set-up requirements, and the Harnett County Zoning Ordinance. I understand that if any item is incorrect or false information has been provided that this permit could be revoked.

Tori Hollingsworth
Signature of Home Owner or Agent

3/11/13
Date

*Effective July 1, 2004, a County Tax Department Moving Permit must be provided before a Set Up Permit will be issued. It is purchased from the tax office of the county that the home is moved from. If the home is from a dealer, we need proof of year on the Form 500 and if available, the serial number.

List of inspections and Egress requirements available upon request. Progress Energy customers must provide Premise Number.

COUNTY OF HARNETT
Building Inspections Department
Planning Services

Certificate of Compliance: _____ **Occupancy:** ✓

Certificate issued pursuant to the requirements of North Carolina General Statute 153A-363 and Harnett County Zoning Ordinances. This certifies at the time of issuance, this structure was in compliance with the various ordinances of the County of Harnett and the North Carolina State Building Codes. For the following:

Use Classification: SFD

Name: Robert Davis

Address: 2867 McLean Chapel
Church Rd

Date: 5-3-13

Building Official: _____

Permit Numbers

Building: _____

Electrical: _____

Insulation: _____

Plumbing: _____

Mechanical: _____

MFG Home: 13-500-30812

ADDRESS : 2867 MCLEAN CHAPEL CHURCH RD SUBDIV:
CONTRACTOR : WILLIE'S MOBILE HOMES PHONE :
OWNER : DAVIS ROBERT EARL PHONE : (910) 893-9821
PARCEL : 12-0556- - -0086- -09-
APPL NUMBER: 13-50030812 CP MANUFACTURED HOME RA20R/RA20M CRITERIA
DIRECTIONS : T/S: 03/11/2013 01:25 PM JBROCK ----
TAKE 210 S FROM LILLINGTON TURN L ON
MCNEILL HOBBS RD TURN R ON THOMPSON
TURN L ON MCLEAN CHAPEL RD THEN IT WILL
BE ON R \

LAND NOTES : LXMN 9/02/03 GRAY BURG TRAILER
LXMN 10/25/02 completed split from parent, ownership
not changed 1.00 ac split

STRUCTURE: 000 000 14X70 2BDR SWMH

FLOOD ZONE : FLOOD ZONE X
BEDROOMS : 2000000.00 MOBILE HOME YEAR : 1985.00
PROPOSED USE : SWMH SEPTIC - EXISTING? : EXT TANK
WATER SUPPLY : COUNTY

PERMIT: CPSW 00 CP MOBILE HOME SINGLEWIDE

TYP/SQ	REQUESTED COMPLETED	INSP RESULT	DESCRIPTION RESULTS/COMMENTS
T501 01	4/16/13	DT	R*MOBILE HOME FOUND./ M. WALL TIME: 17:00 VRU #: 002367142
	4/16/13	AP	T/S: 04/15/2013 02:35 PM VBROWN ----- T/S: 04/16/2013 11:58 AM DETAYLOR -----
A814 01	5/02/13	TW	ADDRESS CONFIRMATION TIME: 17:00 VRU #: 002375566
	5/02/13	AP	T/S: 04/30/2013 04:10 PM VBROWN ----- ✓ 2867 MCLEAN CHAPEL CHURCH RD BUNNLEVEL 28323 T/S: 05/02/2013 12:57 PM TWARD -----
Z818 01	5/02/13	RB	PZ*ZONING INSPECTION TIME: 17:00 VRU #: 002375558
	5/02/13	AP	T/S: 04/30/2013 04:10 PM VBROWN ----- T/S: 05/02/2013 10:55 AM RBAKER -----
T507 01	5/03/13	TI	R*MANUFACTURED HOME FINAL TIME: 17:00 VRU #: 002376689

5-3-13 APJH

COMMENTS AND NOTES

ADDRESS : 2867 MCLEAN CHAPEL CHURCH RD SUBDIV:
 CONTRACTOR : WILLIE'S MOBILE HOMES PHONE :
 OWNER : DAVIS ROBERT EARL PHONE : (910) 893-9821
 PARCEL : 12-0556- - -0086- -09-
 APPL NUMBER: 13-50030812 CP MANUFACTURED HOME RA20R/RA20M CRITERIA
 DIRECTIONS : T/S: 03/11/2013 01:25 PM JBROCK ----
 TAKE 210 S FROM LILLINGTON TURN L ON
 MCNEILL HOBBS RD TURN R ON THOMPSON
 TURN L ON MCLEAN CHAPEL RD THEN IT WILL
 BE ON R
 LAND NOTES : LXMN 9/02/03 GRAY BURG TRAILER
 LXMN 10/25/02 completed split from parent, ownership
 not changed 1.00 ac split

STRUCTURE: 000 000 14X70 2BDR SWMH
 FLOOD ZONE : FLOOD ZONE X
 # BEDROOMS : 2000000.00 MOBILE HOME YEAR : 1985.00
 PROPOSED USE : SWMH SEPTIC - EXISTING? : EXT TANK
 WATER SUPPLY : COUNTY

PERMIT: CPSW 00 CP MOBILE HOME SINGLEWIDE

TYP/SQ	REQUESTED COMPLETED	INSP RESULT	DESCRIPTION RESULTS/COMMENTS
T501 01	4/16/13	DT	R*MOBILE HOME FOUND./ M. WALL TIME: 17:00 VRU #: 002367142
	4/16/13	AP	T/S: 04/15/2013 02:35 PM VBROWN ----- T/S: 04/16/2013 11:58 AM DETAYLOR -----
A814 01	5/02/13	TI	ADDRESS CONFIRMATION TIME: 17:00 VRU #: 002375566 T/S: 04/30/2013 04:10 PM VBROWN -----
Z818 01	5/02/13	TI	PZ*ZONING INSPECTION TIME: 17:00 VRU #: 002375558 T/S: 04/30/2013 04:10 PM VBROWN -----

5/2/13 RB/AP

----- COMMENTS AND NOTES -----