

Initial Application Date: 12-6-13

Application # 1350032590

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: Charles W - Mary Hudson Mailing Address: 90 Leslie Rd
City: SANFORD State: NC Zip: 27382 Contact No: 919-499-6470 Email: Hud1256atAol.com

APPLICANT*: Charles W. Hudson Mailing Address: 90 Leslie Rd
City: SANFORD State: NC Zip: 27382 Contact No: _____ Email: _____

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Charles W Hudson Phone # 919-499-6470

PROPERTY LOCATION: Subdivision: _____ Lot #: _____ Lot Size: 1.8 AC
State Road #: _____ State Road Name: Leslie Rd Map Book & Page: 675
Parcel: 03 9578 0088 PIN: 9579-50-7942-000
Zoning: RA20R Flood Zone: X Watershed: NA Deed Book & Page: 693,370 Power Company*: _____

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

PROPOSED USE:

- 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) Monolithic
- 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 14 x 80) # Bedrooms: 3 Garage: _____ (site built?) _____ Deck: _____ (site built?) _____
Moving Decks w/ Home 8x10 @ front
- Duplex: (Size _____ x _____) No. Buildings: _____ No. Bedrooms Per Unit: _____
- Home Occupation: # Rooms: _____ Use: _____ Hours of Operation: _____ #Employees: front
- 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: _____ Manufactured Homes: 1 summt Other (specify): _____

Required Residential Property Line Setbacks:

	Minimum	Actual
Front	_____	_____
Rear	_____	_____
Closest Side	_____	_____
Sidestreet/corner lot	_____	_____
Nearest Building on same lot	_____	_____

Comments: _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: up MS Douglas Rd about
12- to 15 miles, to 1212 Leslie Rd on LEFT.
TURN LEFT go 90 Leslie Rd on RIGHT you
are there

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.

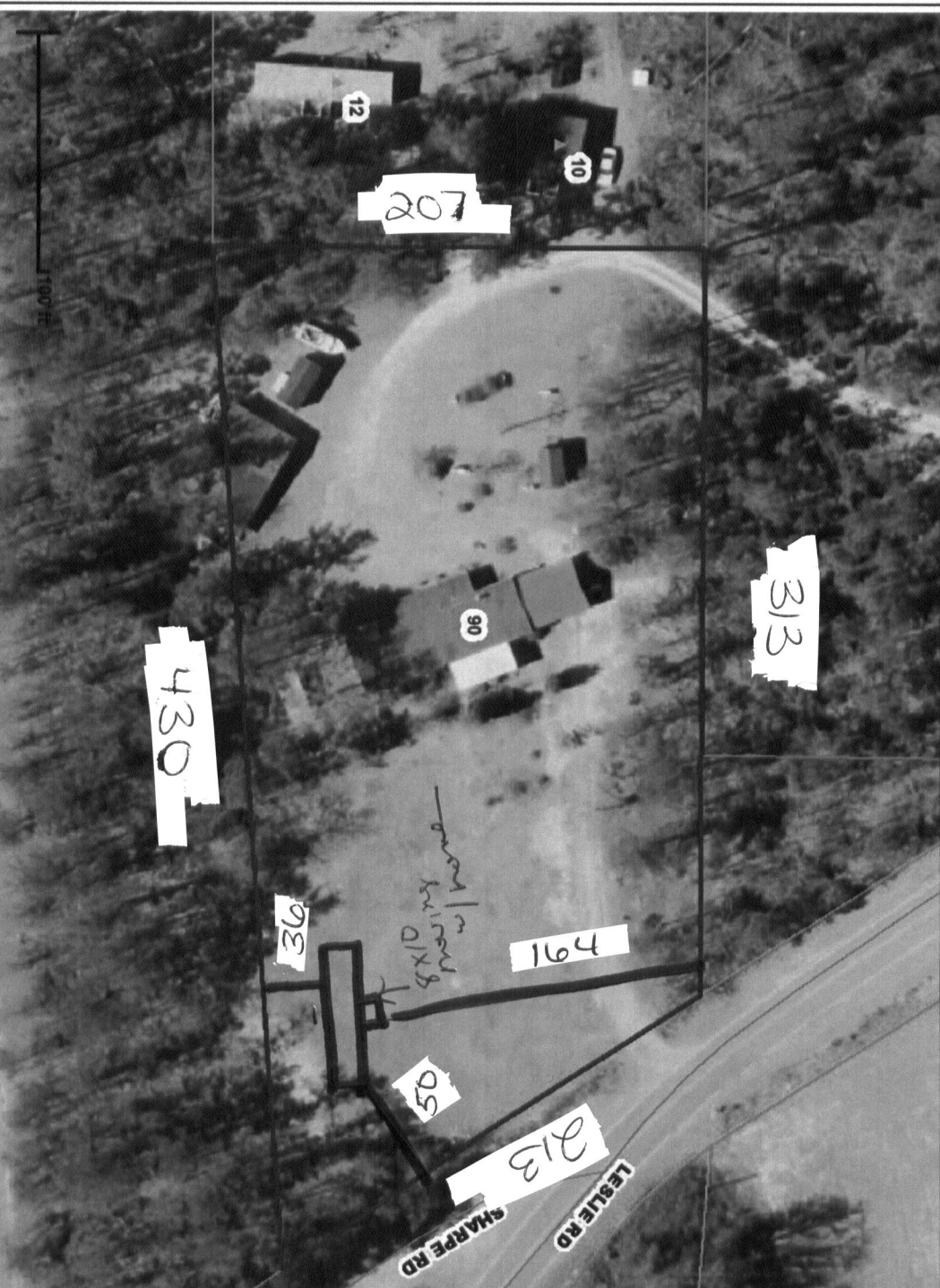
Charles Wayne Anderson
Signature of Owner or Owner's Agent

12-5-13
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.

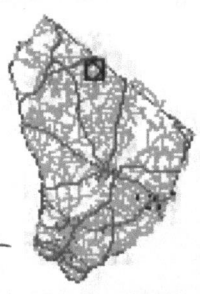
This application expires 6 months from the initial date if permits have not been issued

Handwritten signature



Harnett County GIS
305 W Cornelius Hammett Blvd, Suite 100
Lillington NC 27546
Phone: 910-893-7523 www.hamnett.org

Any use of this map shall be at the sole risk of the user of this map. Although, all effort has been taken to insure accuracy in the data presented, Harnett County makes no warranty, expressed or implied, as to the accuracy of this information represented herein. Any user of this product shall hold harmless Harnett County, its elected officials, employees and agents from and against any claim, damage, loss, action, cause of action, or liability arising from the use of this GIS product.



- AddressPoints
- Road Centerlines
- MajorRoads
- Rivers
- Parcels
- County_Boundary
- CityLimits
- Fort_Bragg_Camp_Maps
- Red: Band_1
- Green: Band_2
- Blue: Band_3
- Hammett.sid
- Red: Band_1
- Green: Band_2
- Blue: Band_3

SIT PLAN APPROVAL
DISTRICT RA20B USE Summit

#BEDROOMS 12-4-13
Date 12-4-13 Zoning Administrator [Signature]

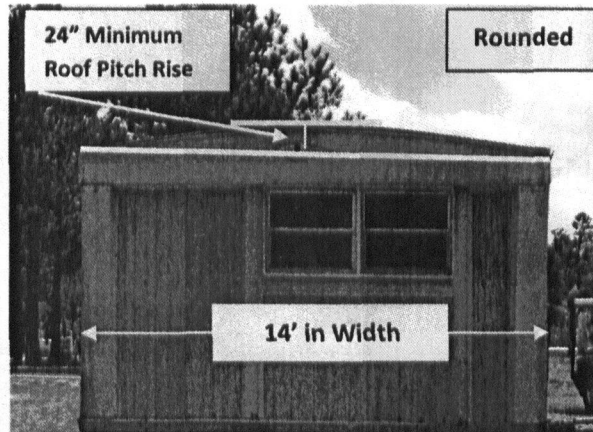
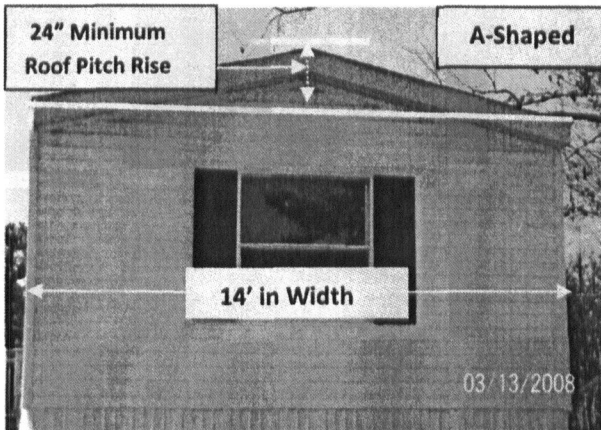


PROCEDURES AND GUIDELINES FOR MANUFACTURED HOME INSPECTIONS

RA-20R & RA- 20M Certification Criteria

I, Charles W Hudson, 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.....

[Handwritten mark]

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.

Bob W + Mary A. [Signature] 12-5-13
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.

NAME: Charles W & Mary Hudson

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 8 00

- **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 **over outlet end** as diagram indicates, and lift lid straight up (if possible) and then close back down. (Unless inspection is for a septic tank in a mobile home park)
- 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.

Charles W & Mary Hudson
 PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

12-5-13
 DATE

Application # _____
Harnett County Central Permitting
PO Box 65 Lillington, NC 27546

32590

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: Charles W Hudson Address: 90 Leslie Rd
City: Seaford State: NC Zip: 27332 Daytime Phone: (919) 499-6470

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: Warren Basson Rodney Bruno
Phone: 919-770-9938 Address: Seaford
City: Seaford ⁹⁹³⁵ State: NC Zip: 27332
State Lic# 3550 Email: _____

B. Electrical Contractor Company Name: Charles W. Hudson
Phone: _____ Address: 90 Leslie Rd Seaford
City: Seaford State: NC Zip: 27332
State Lic# _____ Email: _____

C. Mechanical Contractor Company Name: Charles W. Hudson
Phone: _____ Address: _____
City: _____ State: _____ Zip: _____
State Lic# _____ Email: _____

D. Plumbing Contractor Company Name: Charles W. Hudson
Phone: _____ Address: _____
City: _____ State: _____ Zip: _____
State Lic# _____ Email: _____

Part III - Manufactured Home Information

Model Year: _____ Size: X Complete & follow zoning criteria sheet

Park Name: _____ Lot Number: _____

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.

Charles W. Hudson
Signature of Home Owner or Agent

12-5-13
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.

Donda

~~910-814-6431~~

910-814-6431 weed

LEE COUNTY

Committed Today for a Better Tomorrow

MOBILE HOME TAX PERMIT

COUNTY OF LEE
STATE OF NORTH CAROLINA

PERMIT NUMBER: 5219
DATE: 12/4/2013

CHARLES WAYNE HUDSON 136007
OWNER Acct.#

90 LESLIE LANE SANFORD, NC 27332
ADDRESS

WARREN BROWN
CARRIER ADDRESS

919-774-3045
CARRIER PHONE #

PALM 1986
MAKE MODEL

14X80
SIZE

7.78833E+14
SERIAL NUMBER

2927 PILSON RD
FROM Address

CAMERON NC
City State

LEE
County

90 LESLIE LANE
TO Address

SANFORD NC
City State

HARNI
County

This permit is issued in accordance with the provisions of G.S. 105-316.1 through 105-316.8
the General Statutes of North Carolina.

This permit shall be conspicuously displayed near
the license tag on the rear of the mobile home at all
times during its transportation.

D. FITZPATRICK

Tax Collection Manager
Lee County

THIS PERMIT VALID FOR THIS MOVE ONLY.

HARNETT COUNTY CENTRAL PERMITTING
P.O. BOX 65
LILLINGTON, NC 27546
For Inspections Call: (910) 893-7525 Fax: (910) 893-2793
Bldg Insp scheduled before 2pm available next business day.

Application Number 13-50032590 Date 12/18/13
Property Address 90 LESLIE RD
PARCEL NUMBER 03-9578- - -0088- - -
Application type description CP MANUFACTURED HOME RA20R/RA20M CRITERI
Subdivision Name
Property Zoning PENDING

Owner	Contractor
-----	-----
HUDSON CHARLES W &M	RODNEY BROWN
90 LESLIE RD	23 POLLY LANE
SANFORD NC 27330	SANFORD NC 27330
(919) 499-6470	(919) 775-8871

Applicant

HUDSON CHARLES
90 LESLIE RD
SANFORD NC 27332
(919) 499-6470

--- Structure Information 000 000 14X80 3BDR SWMH
Flood Zone FLOOD ZONE X
Other struct info # BEDROOMS 3000000.00
MOBILE HOME YEAR .00
PROPOSED USE SWMH
SEPTIC - EXISTING? NEW TANK
WATER SUPPLY COUNTY

Permit LAND USE PERMIT
Additional desc
Phone Access Code 1012889
Issue Date 12/18/13 Valuation 0
Expiration Date 6/16/14

Permit MANUFACTURED HOME PERMIT
Additional desc
Phone Access Code 1012897
Issue Date 12/18/13 Valuation 0
Expiration Date 12/18/14

Special Notes and Comments
T/S: 12/06/2013 11:17 AM JBROCK ----
MCDUGALD RD ABOUT 12 TO 15 MILES TO
LESLIE RD ON LEFT TURN GO 90LESLIE RD
ON R

HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

LILLINGTON, NC 27546

For Inspections Call: (910) 893-7525 Fax: (910) 893-2793

Bldg Insp scheduled before 2pm available next business day.

Application Number	13-50032590	Page	2
Property Address	90 LESLIE RD	Date	12/18/13
PARCEL NUMBER	03-9578- - -0088- - -		
Application description	CP MANUFACTURED HOME RA20R/RA20M CRITERI		
Subdivision Name			
Property Zoning	PENDING		

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
Permit type LAND USE PERMIT					
999	818	Z818	PZ*ZONING INSPECTION	_____	__/__/__
999	820	Z820	PZ*ZONING/FINAL INSPECTION	_____	__/__/__
Permit type MANUFACTURED HOME PERMIT					
10	501	T501	R*MOBILE HOME FOUND./ M. WALL	_____	__/__/__
10	307	P307	R*PLUMB WATER CONNECTION	_____	__/__/__
20	818	Z818	PZ*ZONING INSPECTION	_____	__/__/__
20	814	A814	ADDRESS CONFIRMATION	_____	__/__/__
30	507	T507	R*MANUFACTURED HOME FINAL	_____	__/__/__
999		H824	ENVIR. OPERATIONS PERMIT	_____	__/__/__
999		H828	ENVIRO. WELL PERMIT	_____	__/__/__

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: ✓ Home

Name: CHARLES HUNSON

Address: 112 LESLIE ST
SARFORD 27582

Date: 2-11-14 Building Official: _____

Permit Numbers

Building: _____

Electrical: _____

Insulation: _____

Plumbing: _____

Mechanical: _____

MFG Home: 135232598

[Handwritten Signature]

ADDRESS : 112 LESLIE RD SUBDIV:
 CONTRACTOR : RODNEY BROWN PHONE : (919) 775-8871
 OWNER : HUDSON CHARLES W & M PHONE : (919) 499-6470
 PARCEL : 03-9578- - -0088- - -
 APPL NUMBER: 13-50032590 CP MANUFACTURED HOME RA20R/RA20M CRITERIA
 DIRECTIONS : T/S: 12/06/2013 11:17 AM JBROCK -----
 MCDUGALD RD ABOUT 12 TO 15 MILES TO
 LESLIE RD ON LEFT TURN GO 90LESLIE RD
 ON R

STRUCTURE: 000 000 14X80 3BDR SWMH

FLOOD ZONE : FLOOD ZONE X
 # BEDROOMS : 3000000.00 MOBILE HOME YEAR : .00
 PROPOSED USE : SWMH SEPTIC - EXISTING? : NEW TANK
 WATER SUPPLY : COUNTY

PERMIT: CPSW 00 CP MOBILE HOME SINGLEWIDE

TYP/SQ	REQUESTED COMPLETED	INSP RESULT	DESCRIPTION RESULTS/COMMENTS
H824 01	12/27/13	BM	ENVIR. OPERATIONS PERMIT TIME: 17:00 VRU #: 002481406
	12/27/13	AP	T/S: 01/02/2014 12:16 PM S STEWART ----- T/S: 01/02/2014 12:16 PM S STEWART -----
T501 01	12/31/13	FS	R*MOBILE HOME FOUND./ M. WALL TIME: 17:00 VRU #: 002480689
	12/31/13	AP	T/S: 12/30/2013 09:05 AM D JOHNSON ----- T/S: 12/31/2013 02:54 PM F SPIVEY -----
A814 01	1/07/14	TW	ADDRESS CONFIRMATION TIME: 17:00 VRU #: 002481976
	1/23/14	AP	112 LESLIE RD SANFORD 27332 T/S: 01/23/2014 03:06 PM TWARD ----- T/S: 01/23/2014 03:06 PM TWARD -----
Z818 01	1/23/14	RB	PZ*ZONING INSPECTION TIME: 17:00 VRU #: 002487072
	1/23/14	AP	T/S: 01/22/2014 12:33 PM D JOHNSON ----- T/S: 01/23/2014 11:17 AM R BAKER -----
T507 01	2/11/14	TI	R*MANUFACTURED HOME FINAL TIME: 17:00 VRU #: 002492460
	2-11-14	AP	T/S: 02/07/2014 03:42 PM D JOHNSON -----

COMMENTS AND NOTES

FS

50507129

AF

18:58

2-11-14

FS