		10 500001011
Initial Application Date: 12/30/13	Application #	1350032084
	RESIDENTIAL LAND USE APPLICATION	CU#
Central Permitting 108 E. Front Street, Lillington, NC 27546 A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER-TO PUR		893-2793 www.harnett.org/permits
	Mailing Address: 451 VIC K	
	_ Mailing Address: 757 VIC. R Contact No: 916-574- Email:	
Company of the Control of the Contro	0.968	Co
APPLICANT*: State: Zin:	ess:	· · · · · · · · · · · · · · · · · · ·
City: State: Zip: (	Contact No: Email: _	1
		. 0
CONTACT NAME APPLYING IN OFFICE:	Phone #	
PROPERTY LOCATION: Subdivision: Weller VC	Mage Prot SIC hor	#: 4 G Lot Size: , 4 C
State Road Name:	<u>//                                   </u>	Book & Page: <u>F 7310</u> 5
Parcel: 09.95 5.05.0185.4	PIN: 95 15.52. 10	144
Zoning: KA W Noed Zone: Watershed: WA Deed Bo	ook & Page: <u>9/75 / 49</u> Power Com	pany*:
*New structures with Progress Energy as service provider need to suppl	y premise number	from Progress Energy.
PROPOSED USE:		
☐ SFD: (Sizex) # Bedrooms: # Baths: Basemente	w/wo bath): Garage: Deck: Cra	Monolithic wl Space: Slab: Slab:
(Is the bonus room finished? () yes (	_) no w/ a closet? () yes () no (if yes ad	d in with # bedrooms)
Mod: (Sizex) # 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	s () no
Manufactured Home:SW DWTW (Size 30 \$\)	) # Bedrooms: 4 Garage: (site built?	) Deck:(site built?)
☐ Duplex: (Sizex) No. Buildings: No. B	odanomo Mos I Inik	
	<del>- "</del>	
☐ Home Occupation: # Rooms: Use:	Hours of Operation:	#Employees:
Addition/Accessory/Other: (Sizex) Use:		Closets in addition? () yes () no
Water Supply:  County Existing Well New Well (#	of dwellings using well   *Must have	a aparable water before final
Sewage Supply: New Septic Tank (Complete Checklist)		
Does owner of this tract of land, own land that contains a manufactured l		
Does the property contain any easements whether underground or overt	• 🗸	
Structures (existing or proposed): Single family dwellings:	Manufactured Homes:	Other (specify):
Required Residential Property Line Setbacks: Comments	PRTICE	ll (1
Required Residential Property Line Setbacks: Comments  Front Minimum Actual / O		
Rear 25 100		
Closest Side 10		
Sidestreet/corner lot		
Nearest Building		
on same lot  Residential Land Use Application	Page 1 of 2	03/11

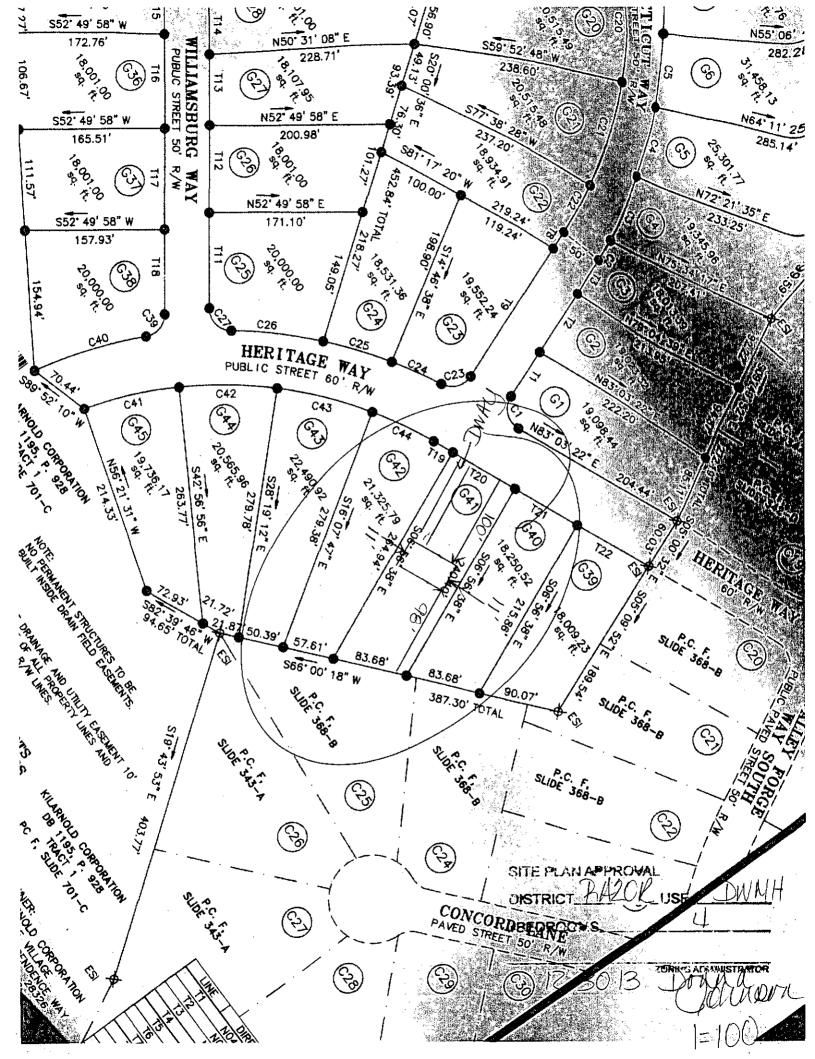
SPECIFIC DIRECTION	S TO THE PROPERTY FROM LILLINGTON: 27 WEST TO LEFT	
·	BUTTALO LAKES RD LETT BY GAS STATE	m
	TURNICEFT ON 87 SOUTH-	
A.S. M. DODES T. N	MEXITY EXITY TO 27 WISTER GOTO HEROAUE VI	wh
t with the	LIFTING MARGERIA INDEPENDENCE IST RA	10
	TURN RIGHT ON HURLINGE WITY COTS ON LETT AT EN	O
	ROAD ON THE LEFT -	
If permits are granted I hereby state that for	agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submit poing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.  12-30-13	tted.
-	Signature of Owner or Owner's Agent Date	

20 Page 1997

\*\*\*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\*\*

38. Q



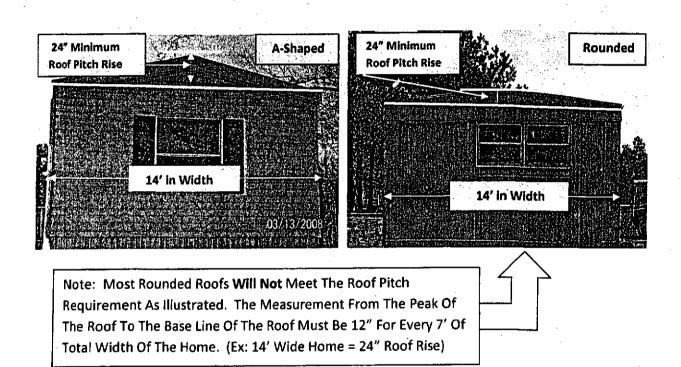
### PROCEDURES AND GUIDELINES FOR MANUFACTURED HOME INSPECTIONS

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

I, That'S M QUILLIN 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.

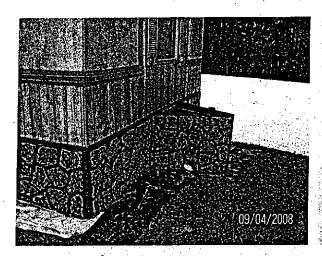
1. The home must have a pitched roof, for a manufactured home, whether A-shaped or rounded, which has a minimum rise (measured at the center of the home) of twelve (12) inches for every seven (7) feet of total width of the home. (Example: A home measuring fourteen (14 ft.) in width must have a twenty four (24) inch rise as measured from the center of the roofline to the baseline of the roof.) (See Illustrations Below.)

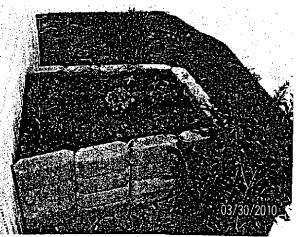


Continued......



- 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.

Signature of Property Owner / Agent

malit

Date

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

NAME: JAMB M'QUILKAR APPLICATION #: 135003268
*This application to be filled out when applying for a septic system inspection.*
- 4 Tt-14 D 4 - A militation for Improvement Permit And/OF AULIOFIZATION TO CONSTRUCT
IF THE INFORMATION IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALLEADD, THEN THE IMPROVEMENT
depending upon documentation submitted. (Complete site plan = 60 months; Complete plan = without explanation
910-893-7525 option 1
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.
minne through have accountable of Asch Corner of the proposed Structure. Also you diversays, unlauds, ucuns,
- it buildings quite made atc. Place tight her gift high developed attlet Control Formitting.
<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 clean out the <u>undergrowth</u> to allow the soil</li> </ul>
avaluation to be performed. Increators should be spir to Walk I (early atout to site. Do not strate 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.
At a management of a sell-the voice permitting system at 910-093-7323 UVIIOH 1 to schedule and use code
800 (after selecting notification permit if multiple permits exist) for Environmental Health inspection. Flease 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.
O Environmental Health Existing Tank Inspections Code 800
Follow above instructions for placing flags and card on property.
possible) and then put lid back in place. (Unless inspection is for a septic tank in a mobile home park)
an Notice up aff of Ceptic 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 recules.
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 ONO Do you plan to have an irrigation system now or in the future?
(_)YES 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 {\omega_} 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

10/10

FOR REGISTRATION
Kimberly S. Hargrove
REGISTER OF DEEDS
Harnett County, NC
2013 NOV 26 09:59:27 AM
BK:3175 PG:49-50
FEE:\$26.00
EXCISE TAX: \$30.00
INSTRUMENT # 2013019058



Excise Tax \$30.00	Recording Time, Book and Page			
Parcel ID No. <u>09957503 0185 40</u> 09957503 0185 42; 09957503 01	; 09957503 0185 41; Verified by Co 85 43; 09957503 0185 44	unty on the _	day of	, 20
Ву:		· · · · · · · · · · · · · · · · · · ·		
Mail/Box to: Tart Law Group, P	.A. 700 West Broad Street, Dunn, NC 28334	<u></u>		
This instrument was prepared by:	Joseph L. Tart, Attorney at Law	NO TITL	E CERTIFICAT	TION
Brief description for the Index:	Lots G40, G41, G42, G43, G44 & 45, Herit	gage Village,	Phase VII	
NIOPETE				

#### NORTH CAROLINA GENERAL WARRANTY DEED

This deed made this 25th day of October, 2013 by and between:

#### **GRANTOR:**

Horizon Developers, LLC
a North Carolina Limited Liability Company

2919 Breezewood Avenue, Suite 200

Fayetteville, NC 28303

### **GRANTEE:**

Equity Trust Company Custodian FBO James R. McQuilkin, Jr., IRA

451 Vic Keith Road Sanford, NC 27332

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 Grantee, the receipt of which is hereby acknowledged, has and by these presents doth grant, bargain, sell and convey unto the Grantee in fee simple, all that certain lot or parcel of land situated near the City of \_\_\_\_\_\_, Johnsonville Township, Harnett County, North Carolina, and more particularly described as follows:

Being all of Lots G40, G41, G42, G43, G44 and G45, Heritage Village, Phase VII, Block G, ection I, as shown on plat map recorded in Map Number 98-37, Harnett County Registry.

Less and Excepted from Lot Number G45 is that portion which lies in Lot 62 of the Ashford Subdivision as shown on page S-1 of the survey recorded in Map Number 2008-504-510, Harnett County Registry.

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)

•	Home (	Owner Information:  Dwner Information (To	be completed by o	owner of the manufactured home)  Address:		
	Name:					
	City:	5 AN FORO	State: ひこ	_Zip: <u>Z}}332</u>	Daytime Phone: (🎢 o - 3	579-0768
	Landow	ner Information (To be				
	Name:	SANT AS	ABAR	_ Address:	_ Daytime Phone: ( )	
	City:		State:	_ Zip:	_ Daytime Phone: ( )	
	Part II -	- Contractor Informat	tion (To be complet	ed by Contractors	or Homeowner, if applicable.	
	A.	Set-Up Contractor C	Name, address. :ompany Name	, & phone must ma	MASILE HOME SET 4	P5
		Phone: 9/0-770-	<u> </u>	ss: 125 8 B	LITCK MOND	
		City: Chmpron	State:	NC	zip: <b>28326</b>	
 Da0.		State Lic#	Email	:	2 5 CTRUS	
CS WCA	CB. <b>N</b> :	Electrical Contracto	r Company Name:	7500 0	NUSTAY PURP	
0-309-	6502	City: Hofe MIL	Addre	ss: <u>(0000</u> N. c	Zip: 28348	<del></del>
	•.	181	001121			
	<b>C</b>	Mechanical Contrac	tor Company Nam	ie: AFFW	20 ABW HOAT + AH	2
	<b>.</b>	Phone: 919-770	3060 Addre	ss: 112	10. WAD 211	
		City: 5 ANFINE				
		State Lic# 195				
	D.	Plumbing Contracto	r Company Name	MARKS	MOBILE HONNE SET 4	<u> </u>
		$\Delta A \sim \Delta A$	0-4879 Addre	ss: <u>1258 (</u>	SUTCK FORD	
		2015	1		_ Zip: <b>28326</b>	·
		State Lic#	<u>t</u> ⊨ma⊪			
		- Manufactured Hom				
	Model \	/ear: <u>1999</u> Size:	# 8×48	Complete & fo	llow zoning criteria sheet	
	Park Na	ame: Hernite	VILLAGE	Lot Nu	mber: 41	
	informat	ion and have obtained to on will conform to the ce. I understand that if	heir permission to p applicable manufact	urchase these per ured home set-ur	the application is correct include mits on their behalf, and that o requirements, and the Harn tion has been provided that th	the construction or ett County Zoning.
*	/	M		•	FFB 3,20)4  Date	
•	-6	Signature of Home O	wner or Agent	<b>-</b>	Date	
		//				

\*Effective July 2004, a County <u>Tax Department Moving Permit</u> 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 JOHNSTON

Johnston County Tax Collector P.O. Drawer 451

0297 PERMIT #

STATE OF NORTH CAROLINA

Smithfield, N.C. 27577

Date\_02/03/2014

Permission is granted to:

27332 ပ္က SANDFORD Address **451 VIC KEITH RD EQUITY TRUST CO. CUSTODIAN FBO** OWNER MCQUICKIN

28326

Ž

CAMERON

Address

1258 BLACK RD MARKS MH SETUP Carrier

to move the following mobile home:

HUGA18300137AB	Serial number	27542	
		S	
28X48	Size	KENLY	
1999	Model	TRINITY HOMES 7065 HWY 301 N	SS
OAKWOOD	Make	From: TRINITY HOM	Address

28326

Š

CAMERON

Address

**LOT 41 HERITAGE VILLAGE** 

ۻ

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

Dennis-C-Woodward

THIS PERMIT VALID FOR THIS MOVE ONLY.



STATE OF NORTH CAROLINA COUNTY OF JOHNSTON

Johnston County Tax Collector P.O. Drawer 451 Smithfield, N.C. 27577

Date\_02/03/2014 PERMIT #

0298

Permission is granted to:

SANDFORD **451 VIC KEITH RD** 

Address **EQUITY TRUST CO. CUSTODIAN FBO** OWNER MCQUICKIN

ZOO DLAGK RD

Address

SAMERON

2

**38739** 

27332

S

to move the following mobile home:

ပ္က KENLY Size 28X48 OAKWOOD

Serial number

27542

28326

HOGA19J00137AB

TRINITY HOMES 7065 HWY 301 N

From:

CAMERON

Š

Address

**LOT 41 HERITAGE VILLAGE** 

ۻ

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

Dennis C. Woodward

THIS PERMIT VALID FOR THIS MOVE ONLY.

P.O. BOX 65 LILLINGTON, NC 27546 For Inspections Call: (910) 893-79 Bldg Insp scheduled before 2pm ava	525 Fax: (910) 893- ailable next busines	2793 s day.	
 Application Number 13-500 Property Address 2108 PARCEL NUMBER	032684 D HERITAGE WAY 75-03018541- NUFACTURED HOME RA20	ĺ	/03/14
Owner	Contractor		
MCQUILKIN, JAMES R	MARKS MOBILE HOME 1256 BLACK ROAD	SET-UP	
451 VICK KEITH ROAD SANFORD NC 27330	CAMERON (919) 499-2768	NC 28	3326
 (919) 498-2617 Structure Information 000 000 30X50		OR PORCE	HES
SEPTIC	OMS D USE - EXISTING?	DWMH NEW COUNTY	.00
Permit MANUFACTURED HOM	ME PERMIT		
Phone Access Code . 1017763 Issue Date 2/03/14 Expiration Date 2/03/15	Valuation	•	0
 Permit LAND USE PERMIT Additional desc			
Phone Access Code . 1017771 Issue Date 2/03/14 Expiration Date 8/02/14	Valuation		0
 Special Notes and Comments T/S: 12/31/2013 08:04 AM DJOHNSON HERITAGE VILLAGE PHS 7 SEC 1 LOT 410			
		j	

HARNETT COUNTY CENTRAL PERMITTING

P.( LII Fo)	D. BOX LLINGT Insp	65 ON, NC ections	Call: (910)	HITTING 893-7525 Fax: (9 2pm available next	10) 893-2793 business day	7.
Proper PARCEI Applic Subdiv	ty Ade NUMB: ation ision	dress ER descri Name		13-50032684 2108 HERITAGE WAY 09-9575-030189 CP MANUFACTURED HO	541-	2/03/14
			Required	Inspections		
	Phone Insp#		Description		Initials	Date
Permit	type		. MANUFACTU	RED HOME PERMIT		
10 10 20 20 30 999 999	501 307 818 814 507	T501 P307 Z818 A814 T507 H824 H828	R*MOBILE HOI R*PLUMB WATT PZ*ZONING II ADDRESS CONI R*MANUFACTU	ME FOUND./ M. WALL ER CONNECTION NSPECTION FIRMATION RED HOME FINAL ATIONS PERMIT L PERMIT		
999 9 <b>9</b> 9	818 820		PZ*ZONING IN			_/,_/,_

Application # 13 5 00 32 684

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 910-893-2793 - www.hamett.org/permits
Certification of Work Performed By Owner/Contractor (Individual Trade Application)

Owner (s) of Structure:	Phone:
Owner (s) Mailing Address:	
Land Owner Name (s):	Phone:
	The state of the s
PIN #	Parcel #
Job Cost:Description or	Work to be done
Mechanical: New Unit With Ductwor	k New Unit Without Ductwork Gas Piping Other
	Service Change Service Reconnect Other customers we need the premise number
Plumbing: Water/Sewer Tap	Number of Baths Water Heater
Specific Directions to Job from Lillingto	on:
Subdivision:	Lot #:
(Contractors Name)	vide thelabor on this structure.  (Trade)
am the building owner or my NC state	license number is, which entitles me to
perform such work on the above struct	ure legally. All work shall comply with the State Building Code and a
other applicable State and local laws, o	ordinances and regulations.
AFFONDABLE HEAT!	ry JA: R COND 919-498-2791
Contractor's Company Name ユンノア インター ハノの - c .	Telephone
HIS LEE AVE SA Address HOUGE	Email Address
JOUYS License #	
Structure Owner / Contractor Signature	Edwal 1/2th Date: 3 18-19
By signing this application you affirm th	at you have obtained permission from the above listed license holde

By signing this application you affirm that you have obtained permission from the above listed license holder to purchase permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or sell the listed property for 12 months after completion of the listed work.

\*Company name, address, & phone must match information on license

• . 

# **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: **Permit Numbers** Building: Electrical: Insulation: Plumbing: \_\_\_\_\_ Mechanical: MF9 Home: 13 5 326 84 **Building Official:**

PREPARED 3/18/14, 14:13:37
Harnett County

INSPECTION TICKET INSPECTOR: IVR

PAGE DATE

3/19/14

13

ADDRESS : 2108 HERITAGE WAY

CONTRACTOR : MARKS MOBILE HOME SET-UP

PHONE : (919) 499-2768

SUBDIV:

OWNER . . : MCQUILKIN, JAMES R

PHONE : (919) 498-2617

\_\_\_\_\_

T/S: 03/17/2014 03:55 PM DJOHNSON -----

PARCEL . . : 09-9575-03- -0185- -41-

APPL NUMBER: 13-50032684 CP MANUFACTURED HOME RA20R/RA20M CRITERIA

DIRECTIONS: T/S: 12/31/2013 08:04 AM DJOHNSON --

HERITAGE VILLAGE PHS 7 SEC 1 LOT 41G

STRUCTURE: 000 000 30X50 4 BR DWMH NO DECKS OR PORCHES

FLOOD ZONE . . . : FLOOD ZONE X

# BEDROOMS . . . . . . : 4.00 MOBILE HOME YEAR . . . . . : 1999.00

\_\_\_\_\_\_

PROPOSED USE . . . . . : DWMH SEPTIC - EXISTING? . . . : NEW

WATER SUPPLY . . . . . . : COUNTY

PERMIT: CPDW 00 CP MOBILE HOME DOUBLEWIDE

REQUESTED INSP DESCRIPTION

TYP/SO COMPLETED RESULT RESULTS/COMMENTS

\_\_\_\_\_\_\_\_\_\_ 2/10/14 OT ENVIR. OPERATIONS PERMIT TIME: 17:00 VRU #: 002492965 H824 01 2/10/14 AP T/S: 02/11/2014 09:46 AM SSTEWART -----T/S: 02/11/2014 09:47 AM SSTEWART -----R\*MOBILE HOME FOUND./ M. WALL VRU #: 002498595 T/S: 03/04/2014 03:06 PM FSPIVEY ------3/04/14 FS T501 01 3/04/14 AP 3/17/14 TW ADDRESS CONFIRMATION TIME: 17:00 VRU #: 002503480 A814 01 2108 heritage way cameron 28326 3/17/14 AP T/S: 03/17/2014 01:42 PM TWARD ------T/S: 03/17/2014 02:11 PM TWARD -----PZ\*ZONING INSPECTION TIME: 17:00 VRU #: 002503472 RB Z818 01 3/17/14 T/S: 03/14/2014 01:19 PM DJOHNSON ------3/17/14 APA 3/19/14 R\*MANUFACTURED HOME FINAL TIME: 17:00 VRU #: 002504256 T507 01

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