

Initial Application Date: 4-28-11

Application # 145-00335-21

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: DONALD WARD Mailing Address: 2366 MARKS RD

City: CAMERON State: NC Zip: 28324 Contact No: 910-695-5663 Email: \_\_\_\_\_

APPLICANT: Dennis Parris A Plus Construction Mailing Address: 5369 US HWY 1 N

City: WASS State: NC Zip: 28394 Contact No: 910-734-0379 Email: aplusconstruction@yahoo.com

\*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Dennis Parris Phone # 910-734-0379

PROPERTY LOCATION: Subdivision: \_\_\_\_\_ Lot #: \_\_\_\_\_ Lot Size: 0.9

State Road # 1111 State Road Name: MARKS Rd Map Book & Page: 2013, 284

Parcel: 09 9574 0007 01 PIN: 9574-21-6899.005

Zoning: RA 20 Flood Zone: X Watershed: III Deed Book & Page: 3206700 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)

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 16 x 60) # 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

Structures (existing or proposed): Single family dwellings: \_\_\_\_\_ Manufactured Homes: \_\_\_\_\_ Other (specify): \_\_\_\_\_

**Required Residential Property Line Setbacks:**

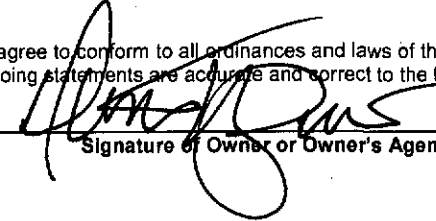
Front Minimum 35 Actual 150  
Rear 15 84  
Closest Side 15 36  
Sidestreet/corner lot 26

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Nearest Building on same lot \_\_\_\_\_

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 27<sup>th</sup> turn Left on 24<sup>th</sup> on  
MARKS Rd 2.5 miles or on the 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.

  
\_\_\_\_\_  
Signature of Owner or Owner's Agent

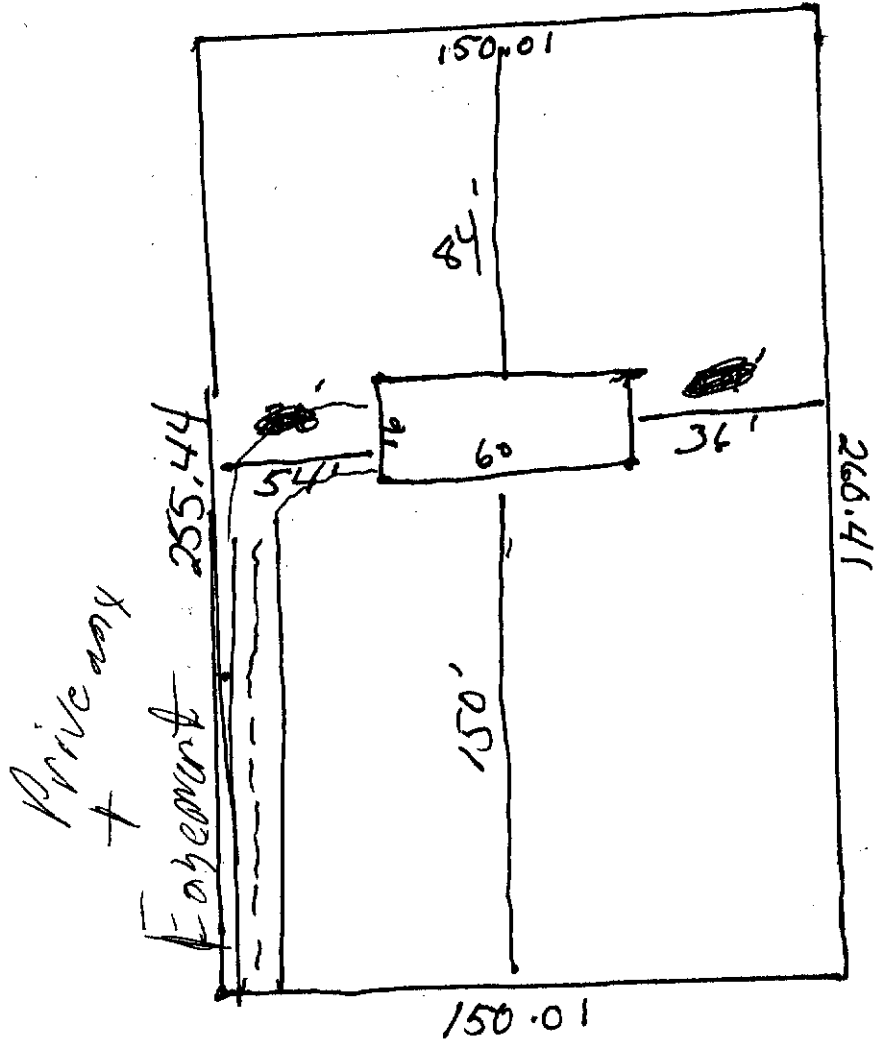
4/28/14  
Date

**\*\*\*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\*\***

~~Not to scale~~  
 SITE PLAN APPROVAL  
 DISTRICT RA 20 USE SWMH  
 #BEDROOMS 2  
4-28-14 VCM  
 Date Zoning Administrator

~~Demolition (A Plus Construction)~~



SH# 1111 Marks Rd

CERTIFICATE OF OWNERSHIP

I HEREBY CERTIFY THAT I AM THE OWNER OF THE PROPERTY DESCRIBED HEREON, WHICH PROPERTY IS WITHIN THE SUBDIVISION JURISDICTION OF HARNETT COUNTY, NORTH CAROLINA, AND THAT I FREELY ADOPT THIS PLAN OF SUBDIVISION.

OWNER Albert J. Shultz DATE 08-01-2013

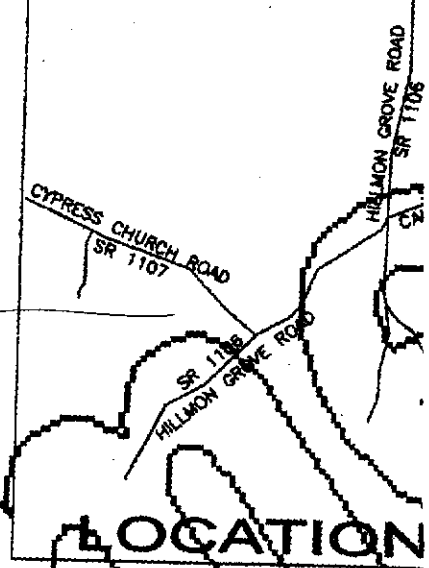
STATE OF NORTH CAROLINA

COUNTY OF HARNETT

REVIEW OFFICER OF HARNETT COUNTY, NORTH CAROLINA, CERTIFY THAT THE MAP OF PLAT WHICH THIS CERTIFICATION IS AFFIXED MEETS ALL STATUTORY REQUIREMENTS FOR RECORDING.

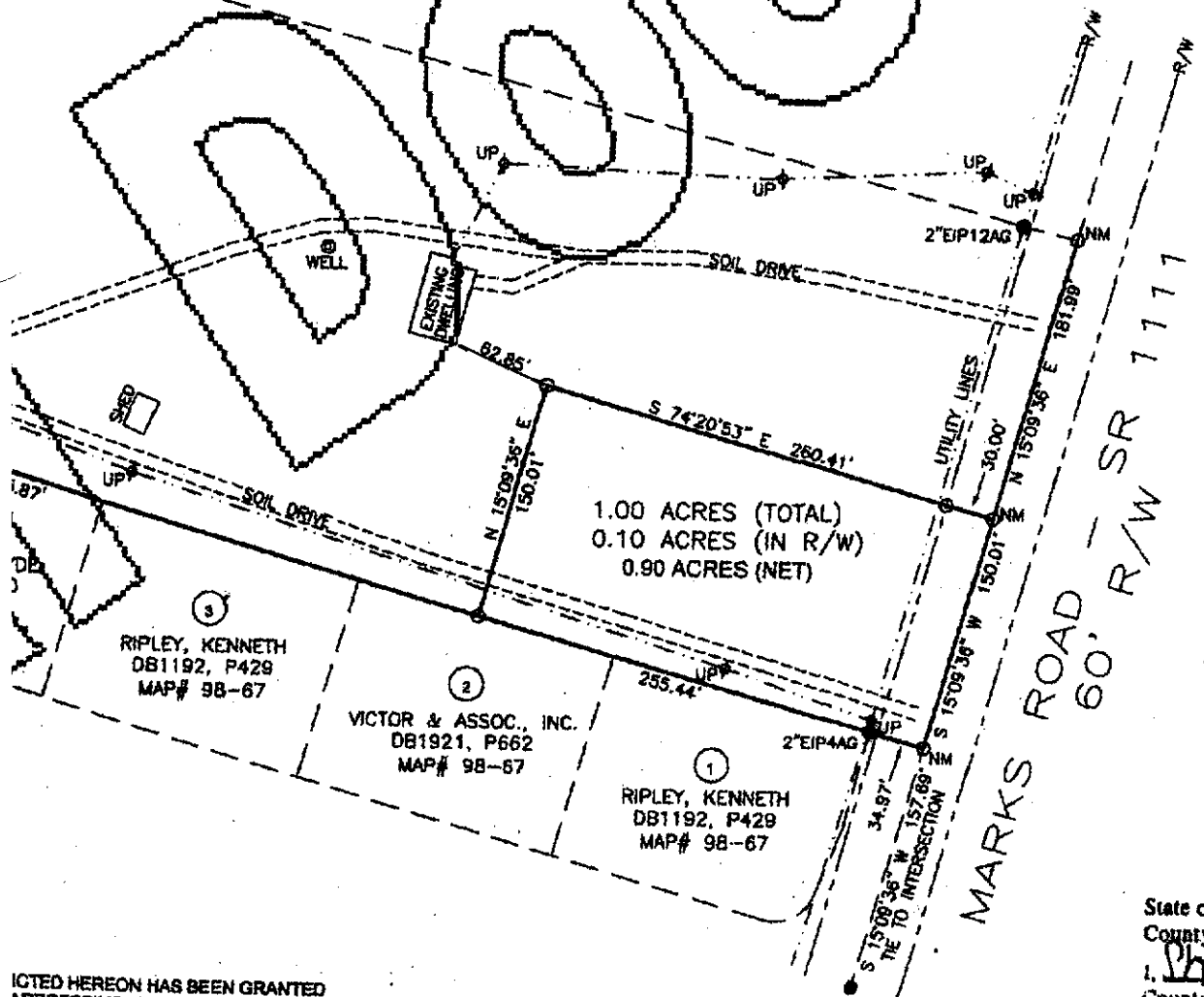
REVIEW OFFICER \_\_\_\_\_

DATE \_\_\_\_\_



ERSHED  
FICE.

19°01' W 1268.00'



1.00 ACRES (TOTAL)  
0.10 ACRES (IN R/W)  
0.90 ACRES (NET)

3  
RIPLEY, KENNETH  
DB1192, P429  
MAP# 98-67

2  
VICTOR & ASSOC., INC.  
DB1921, P662  
MAP# 98-67

1  
RIPLEY, KENNETH  
DB1192, P429  
MAP# 98-67

MARKS ROAD 60' R/W SR 1117

FOR  
KIMBER  
REG.  
HARNETT  
2013 REC  
BK. 201  
Pg  
INSTRUMENT



ICED HEREON HAS BEEN GRANTED  
ADDRESSING, ENVIRONMENTAL HEALTH,  
ROLINA DEPARTMENT OF  
Y AND ALL CONDITIONS STATED BELOW

State of North Carolina  
County of Harnett  
I, Shilak Bennett  
County, certify that the map or plat to whi  
meets all statutory requirements for record

NAME: Donald WARD

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.

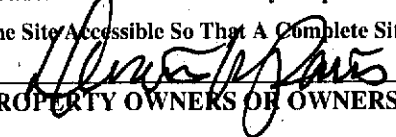
Accepted       Innovative       Conventional       Any  
 Alternative       Other \_\_\_\_\_

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? *see drawing*
- 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)

4-28-14  
 \_\_\_\_\_  
 DATE

# Southeastern Soil & Environmental Associates, Inc.

P.O. Box 9321  
Fayetteville, NC 28311  
Phone/Fax (910) 822-4540  
Email mike@southeasternsoil.com

June 13, 2013

Harnett County Health Department  
307 Cornelius Harnett Blvd.  
Lillington, N.C. 27546

Re: Soil evaluations and final septic recommendations, 1.00 acre tract plus residual,  
Albert Stutz, NCSR 1111, Harnett County, North Carolina

To whom it may concern,

A preliminary soils investigation has been completed for each of the above referenced lots. The property is located on Marks Road as shown on the accompanying map. The purpose of the investigation was to determine the ability of the soil to support any subsurface waste disposal system for each proposed lot. Lots will be served by public water and/or private well. All ratings and determinations were made in accordance with "Laws and Rules for Sanitary Sewage Collection, Treatment, and Disposal, 15A NCAC 18A .1900".

The 1.00 acre lot appears to contain at least one area that meets minimum criteria for a conventional subsurface waste disposal systems for at least a typical 4 bedroom home (60' x 60' box). Soil characteristics in the usable areas were dominantly provisionally suitable to at least 36 inches including .1940, .1941, .1942, .1943, .1944 and .1945. A soil map indicating typical soil areas that meet these criteria is enclosed. The lot appears to contain sufficient available space for a repair area for at least a typical 4 bedroom home.

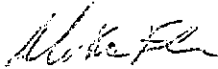
**Any or all lots may require specific design/layout on our part prior to action by the local health department due to space and soil considerations (at separate cost to client). Specific house locations, house sizes, driveway locations and/or side entry garages may be required on any individual lot.**

The residual property appears to contain at least two existing subsurface waste disposal systems. Adequate repair area with provisionally suitable soil (see above) exists on the proposed lots. It appears that existing drain lines will not encroach on the 10 foot setback

requirement from new property lines (because existing septic lines are difficult to locate, we do not guarantee that the property line setback is met. Adequate soil area for new septic and additional repair area exists if lines or tanks should need to be relocated in the future).

As with any property, this report does not guarantee, represent or imply approval or issuance of improvement permit as needed by the client from the local health department (as such, any potential buyers of these properties should obtain appropriate permits from the local health department prior to making and/or completing purchase obligations or financial commitments. Since professional opinions sometimes differ, an actual permit issuance is the only "guarantee" of a site's suitability for a buyers intended use.). This report only addresses rules in force at the time of evaluation. Permits will only be granted if the local health department concurs with the findings of this report. This report only represents my professional opinion as a licensed soil scientist. I trust this is the information you require at this time. If you have any questions, please call.

Sincerely,



Mike Eaker  
NC Licensed Soil Scientist

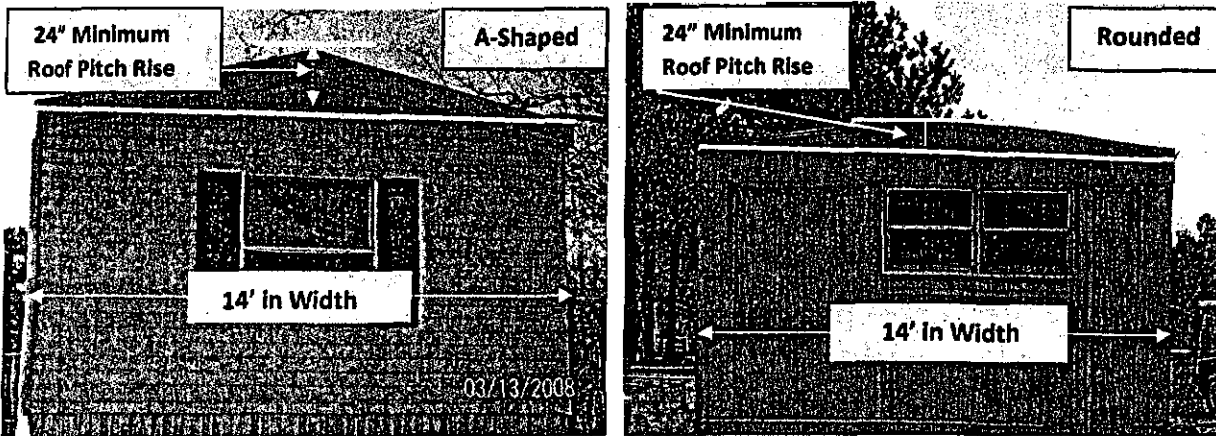


### PROCEDURES AND GUIDELINES FOR MANUFACTURED HOME INSPECTIONS

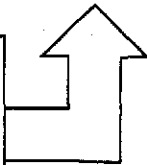
#### RA-20R & RA- 20M Certification Criteria

I, Dennis Arris, 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 signatures and scribbles]*



Application # 14 500 335 21

**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: Donald MAY Ward Address: 2366 MARKS Rd  
City: CAMERON State: NC Zip: 28324 Daytime Phone: 910 695-5663

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

Name: Donald Ward Address: \_\_\_\_\_  
City: CAMERON State: NC Zip: 28324 Daytime Phone: 910 695-5663

**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: A Plus Construction  
Phone: 910 690 9222 Address: 5369 US Hwy 1N  
City: VASS State: NC Zip: 28394  
State Lic# 45570 Email: aplusconstruction5369@yahoo.com
- B. **Electrical Contractor** Company Name: Service Solution  
Phone: 910-635-9363 Address: 5798 Mcdonal Rd  
City: PARKTON State: NC Zip: \_\_\_\_\_  
State Lic# 20934-00 Email: FISS34@aol.com
- C. **Mechanical Contractor** Company Name: Spells Mechanical  
Phone: 910-525 5976 Address: PO BOX 93 ATRYVILLE  
City: ATRYVILLE State: NC Zip: 28318  
State Lic# 10574 Email: \_\_\_\_\_
- D. **Plumbing Contractor** Company Name: A Plus Construction  
Phone: 910 690 9222 Address: 5369 US Hwy 1N  
City: VASS State: NC Zip: 28394  
State Lic# 45570 Email: a plus construction 5369@yahoo.com

**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.

[Signature]  
Signature of Home Owner or Agent

5-16-14  
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.

1097504  
DATE: MAY 16 2014

**SALES AGREEMENT**

BUYER(S): SHERRY DIANNE WARD  
DONALD MAX WARD

ADDRESS: 2366 MARKS RD CAMERON NC 28326

DELIVERY ADDRESS: 2298 MARKS RD CAMERON NC 28326

TELEPHONE: (910) 695-5663

SALES PERSON FULL NAME: Joy Mcgetrick

**BASE PRICE:** \$63,521.10  
  
State Tax \$3,017.26  
Local Tax \$ 00

Make: CMH Model: 29CFT16763AH14  
Year 2014 Length 70 Width 16 Stock# RSO  
Serial No. OHC023637NC  New  Used

**1. CASH PRICE** \$66,538.36

**TRADE:** Make: HENDERSON Model: DESIGNER  
Year 1997 Length 48 Width 28 Title #  
Serial No. HHC009913NCAB

Amount owed will be paid by:  Buyer  Seller  
Owed to: Vanderbilt Mortgage and Finance

TITLE FEES \$40.00  
FILING FEES \$82.00

**OPTIONS:**  
Contractor will deliver and tie down home on customers lot Lay down vapor barrier  
Install new heat pump Construct 2 sets of treated wood steps with a 3x4 landing Hook  
up electric and plumbing Dig and install septic tank Tie in to the county water

**SELLER RESPONSIBILITIES:**  
Install vinyl underpinning Contractor will tear down current home and pull into Home  
Center

**BUYER RESPONSIBILITIES:**  
Buyer is to apply for all utilities Customer to pick out and sign off on home Customer  
must remove all furniture and personal belongs Home should be cleaned as well  
Customer agrees that no verbal promises will be honored

**2. TOTAL PACKAGE PRICE** \$66,660.36

*May not meet local codes and standards. New homes meet Federal  
Manufactured Home Standards.*

Trade Allowance \$18,320.00  
Less Amount Owed \$12,442.93  
Trade Equity \$5,877.07  
Cash Down Payment \$ 00

**3. LESS ALL CREDITS** \$5,877.07

**4. REMAINING BALANCE** \$60,783.29

I UNDERSTAND THAT I HAVE THE RIGHT TO CANCEL THIS PURCHASE BEFORE  
MIDNIGHT OF THE THIRD BUSINESS DAY AFTER THE DATE THAT I HAVE  
SIGNED THIS AGREEMENT. I UNDERSTAND THAT THIS CANCELLATION MUST  
BE IN WRITING. IF I CANCEL THE PURCHASE AFTER THE THREE-DAY PERIOD,  
I UNDERSTAND THAT THE DEALER MAY NOT HAVE ANY OBLIGATION TO GIVE  
ME BACK ALL THE MONEY THAT I PAID THE DEALER. I UNDERSTAND ANY  
CHANGE TO THE TERMS OF THE PURCHASE AGREEMENT BY THE DEALER  
WILL CANCEL THIS AGREEMENT.  
ESTIMATED RATE OF FINANCING 9.43% NUMBER OF YEARS 23  
ESTIMATED MONTHLY PAYMENTS \$574.19

Buyer(s) agree: (1) that the terms and conditions on page two are part of this  
agreement; (2) to purchase the above home including the options; (3) they  
received and acknowledge receiving a completed copy of this agreement; (4)  
that all promises and representations made are listed on this agreement; and (5)  
there are no other agreements, written or verbal, unless evidenced in writing  
and signed by the parties.

Location	Type of Insulation	Thickness	R-Value
Floors	Fiberglass	3.50	11
Exterior	Fiberglass	3.50	11
Ceilings	Fiberglass	5.50	21

*This insulation information was furnished by the  
Manufacturer and is disclosed in compliance with the Federal  
Trade Commission Rule 16CFR, SECTION 460.16.*

**SELLER:**

CMH Homes, Inc. d/b/a -

*[Signature]*

CLAYTON HOMES FAYETTEVILLE, NC  
3340 GILLESPIE ST  
FAYETTEVILLE NC 28306

**BUYER:**

*[Signature]*  
Signature of: SHERRY DIANNE WARD

*[Signature]*  
Signature of: DONALD MAX WARD

*[Signature]*  
Signature of:

*[Signature]*  
Signature of:



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 . . . . . 14-50033521 Date 5/16/14  
Property Address . . . . . \*UNASSIGNED  
PARCEL NUMBER . . . . . 09-9574- - -0007- -01-  
Application type description CP MANUFACTURED HOME RA20R/RA20M CRITERI  
Subdivision Name . . . . .  
Property Zoning . . . . .

Owner Contractor  
-----  
WARD DONALD MAX & SHERRY D OWNER  
  
2366 MARKS RD  
CAMERON NC 28326

Applicant  
-----  
A PLUS CONSTRUCTION

--- Structure Information 000 000 16X60 2BDR SWMH  
Flood Zone . . . . . FLOOD ZONE X  
Other struct info . . . . . # BEDROOMS 2.00  
MOBILE HOME YEAR 1000.00  
PROPOSED USE SWMH  
SEPTIC - EXISTING? NEW TANK  
WATER SUPPLY COUNTY

Permit . . . . . LAND USE PERMIT  
Additional desc . .  
Phone Access Code . 1034669  
Issue Date . . . . . 5/16/14 Valuation . . . . . 0  
Expiration Date . . 11/12/14

Permit . . . . . MANUFACTURED HOME PERMIT  
Additional desc . .  
Phone Access Code . 1034677  
Issue Date . . . . . 5/16/14 Valuation . . . . . 0  
Expiration Date . . 5/16/15

Special Notes and Comments  
T/S: 04/28/2014 01:52 PM VBROWN ----  
MARKS RD CAMERON 28326. 27W, LEFT ON  
24, MARKS RD, 2.5MI ON RIGHT.

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

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.

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Application Number . . . . .	14-50033521	Page	2
Property Address . . . . .	*UNASSIGNED	Date	5/16/14
PARCEL NUMBER . . . . .	09-9574- - -0007- -01-		
Application description . . .	CP MANUFACTURED HOME RA20R/RA20M CRITERI		
Subdivision Name . . . . .			
Property Zoning . . . . .			

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Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
-----					
Permit type . . . . .	MANUFACTURED HOME PERMIT				
10	501	T501	R*MOBILE HOME FOUND./ M. WALL	_____	___/___/___
20	818	Z818	PZ*ZONING INSPECTION	_____	___/___/___
20	814	A814	ADDRESS CONFIRMATION	_____	___/___/___
30	507	T507	R*MANUFACTURED HOME FINAL	_____	___/___/___
999		H824	ENVIR. OPERATIONS PERMIT	_____	___/___/___