

Initial Application Date: 10-22-14

Application # 1450034800

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: cesar castaneda Mailing Address: 455 raymack drive
City: lillington State: nc Zip: 27546 Contact No: 919-353-3339 Email: n/a

APPLICANT: Clyde L Patterson Mailing Address: _____
City: _____ State: _____ Zip: _____ Contact No: _____ Email: _____

CONTACT NAME APPLYING IN OFFICE: cesar castaneda Phone # 919-353-3339

PROPERTY LOCATION: Subdivision: _____ Lot #: 3 Lot Size: .75
State Road # 194 State Road Name: Lee County Line Rd Map Book & Page: 2014, 232
Parcel: 13 91080 0108 12 PIN: 9681-30-6108-000
Zoning: R2000 Flood Zone: X Watershed: MA Deed Book & Page: 2911, 313 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 14 x 72) # Bedrooms: 3 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: 1 Other (specify): _____

Required Residential Property Line Setbacks:

| | | | | |
|------------------------------|---------|------------|--------|--------------|
| Front | Minimum | <u>120</u> | Actual | <u>120</u> |
| Rear | | | | <u>25+</u> |
| Closest Side | | <u>16</u> | | <u>10/16</u> |
| Sidestreet/corner lot | | | | |
| Nearest Building on same lot | | | | |

Comments: _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: _____

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.

Cesar Castorena Flores
Signature of Owner or Owner's Agent

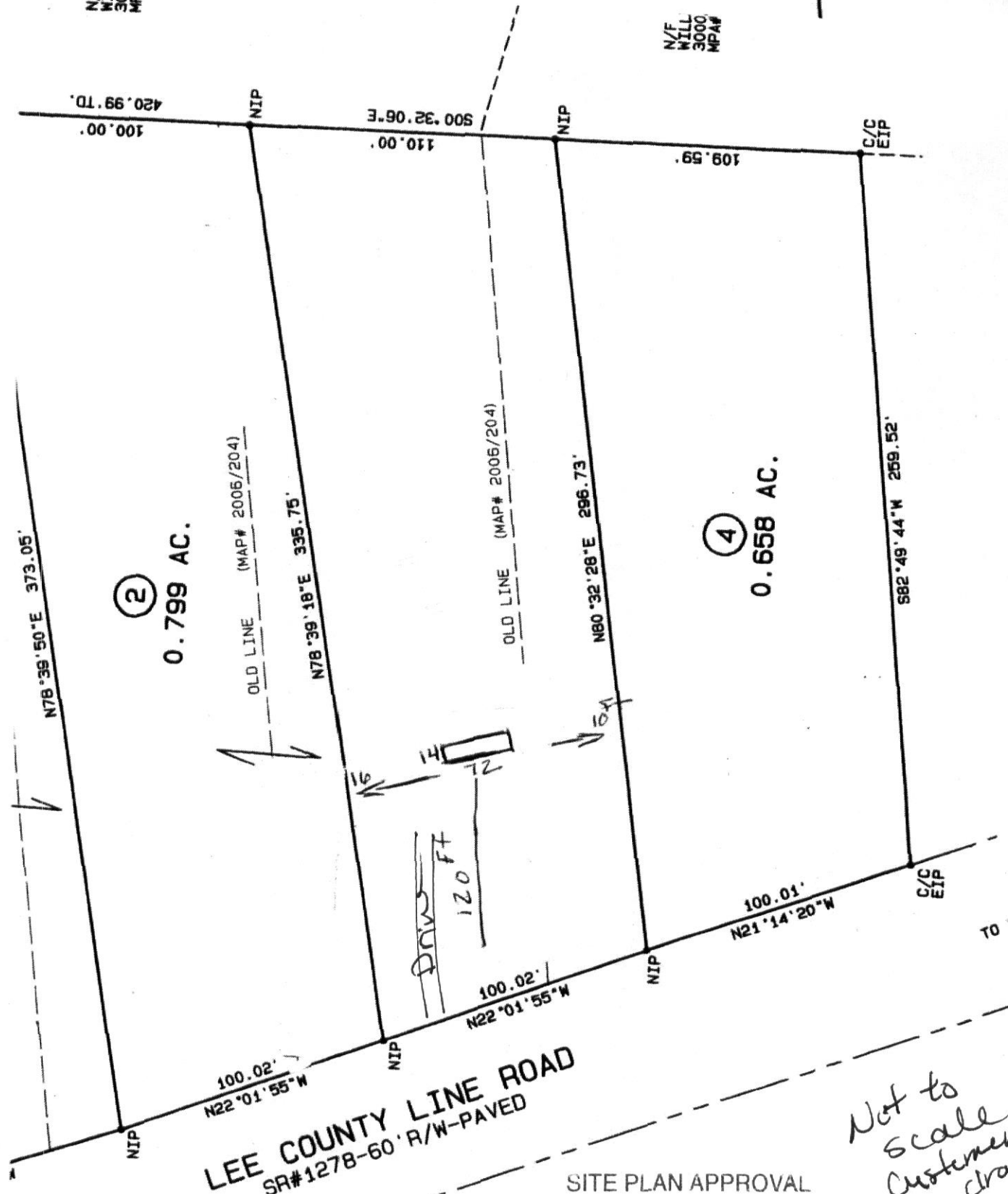
9-26-14
Date

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

N/F
WILL
3000
MPA#

N/F
WILL
3000
MPA#



LEE COUNTY LINE ROAD
SR#1278-60' R/W-PAVED

SITE PLAN APPROVAL

DISTRICT RA20R USE SMH

#BEDROOMS 3

Date 10-22-14 Zoning Administrator [Signature]

Not to
Scale
Customer
drawn

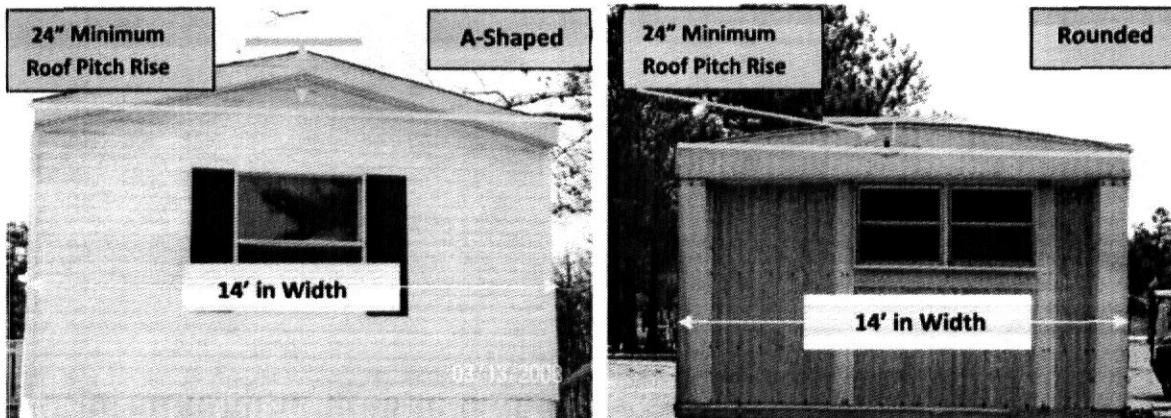


PROCEDURES AND GUIDELINES FOR MANUFACTURED HOME INSPECTIONS

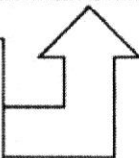
RA-20R & RA- 20M Certification Criteria

I, Cesar Castaneda, 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.)

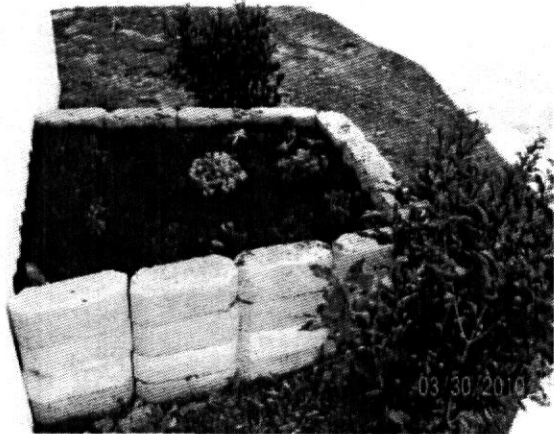
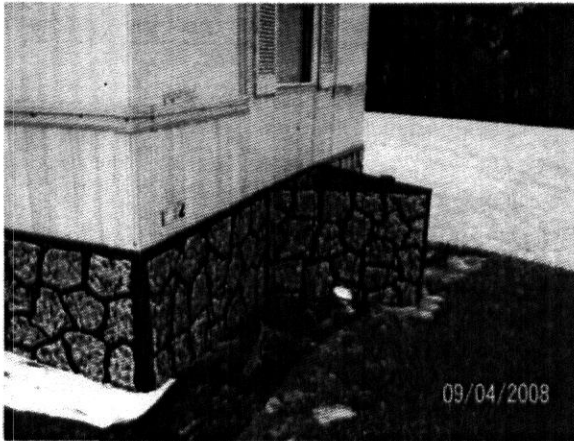


Note: Most Rounded Roofs **Will Not** Meet The Roof Pitch Requirement As Illustrated. The Measurement From The Peak Of The Roof To The Base Line Of The Roof Must Be 12" For Every 7' Of Total Width Of The Home. (Ex: 14' Wide Home = 24" Roof Rise)



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.

Cesar Castanedo 9-26-14

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: Cesar Castaneda

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.

Cesar Castaneda
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

9-26-14
DATE

TBD

919-353-9002

OFFER TO PURCHASE AND CONTRACT

Cesar Castaneda Flores 682-18-3679

as Buyer, as Seller, hereby offers to purchase and

Clyde L Patterson

upon acceptance of said offer, agrees to sell and convey, all of that plot, piece or parcel of land described below, together with all improvements located thereon and such personal property as is listed below (the real and personal property are collectively referred to as "the Property"), in accordance with the Standard Provisions on the REVERSE SIDE HEREOF and upon the following terms and conditions:

1. REAL PROPERTY: Located in the City of _____, County of Harnett

State of North Carolina, being known as and more particularly described as:

Street Address _____ Zip _____ Legal Description Lot 3 Hayes

2. PERSONAL PROPERTY: N/A

3. PURCHASE PRICE: The purchase price is \$ 17,000e plus Improvements and shall be paid as follows:

(a) \$ 1500e in earnest money paid by _____ (cash, bank, certified, or personal check) with the delivery of this contract, to be held in escrow by _____ as agent, until the sale is closed, at which time it will be credited to Buyer, or until this contract is otherwise terminated and it is disbursed in accordance with the Standard Provisions on the REVERSE SIDE HEREOF;

(b) \$ N/A by assumption of the unpaid principal balance and all obligations of Seller on the existing loan secured by a deed of trust on the Property;

(c) \$ TBD by a promissory note secured by a purchase money deed of trust on the Property with interest prior to default at the rate of 10% per annum payable as follows: 12 years 120 payments Payment and late fee 5% if over 10 days. Prepayment restrictions and/or penalties, if any, shall be: NO prepayment penalty. Assumption or transfer rights, if any, shall be: None.

(d) \$ _____ the balance of the purchase price in cash at closing.

4. CONDITIONS: (State N/A in each blank of paragraph 4(a) and 4(b) that is not a condition to this contract.)

(a) The Buyer must be able to obtain a firm commitment on or before _____, effective through the date of closing, for a _____ loan in the principal amount of \$ _____ for a term of _____ year(s), at an interest rate not to exceed _____ % per annum, with mortgage loan discount points not to exceed _____ % of the loan amount. Buyer agrees to use his best efforts to secure such commitment and to advise Seller immediately upon receipt of the lender's decision. If Seller is to pay any loan closing costs, those costs are as follows: _____

(b) The Buyer must be able to assume the unpaid principal balance of the existing loan described in paragraph 3(b) above for the remainder of the loan term, at an interest rate not to exceed _____ % per annum fixed (or describe type of loan) _____ with mortgage loan assumption and/or discount points not to exceed _____ % of the loan balance. (See Standard Provision No. 2). If such assumption requires the lender's approval, approval must be granted on or before _____. Buyer agrees to use his best efforts to secure such approval and to advise Seller immediately upon his receipt of the lender's decision. If Seller is to pay any loan assumption costs, those costs are as follows: _____

(c) There must be no restriction, easement, zoning or other governmental regulation that would prevent the reasonable use of the real property for _____ purposes.

5. ASSESSMENTS: Seller warrants that there are no special assessments, either pending or confirmed, for sidewalk, paving, water, sewer or other improvements on or adjoining the Property, except as follows: _____

(Insert "None" or the identification of such assessments, if any. The agreement for payment or proration of any assessments indicated is to be set forth in paragraph 6 below.)

6. OTHER PROVISIONS AND CONDITIONS:

(a) All of the Standard Provisions on the REVERSE SIDE HEREOF are understood and shall apply to this instrument, except the following numbered Standard Provisions shall be deleted: (If none are to be deleted, state "None").

I will pay for water and septic and all to cost by lot. will determine monthly pay and exact date when we know the amount to be financed.

Closing cost \$ 2000e. I will only pay for the water tap and septic system.

IF THERE ARE ANY ADDENDA TO THIS CONTRACT, INDICATE ABOVE AND ATTACH HERETO.

7. CLOSING: All parties agree to execute any and all documents and papers necessary in connection with closing and transfer of title on or before 12-1-14 at a place designated by Seller

The deed is to be made to Cesar Castaneda Flores

8. POSSESSION: Possession shall be delivered 6-18-14

In the event that Buyer has agreed that possession is not delivered at closing, then Seller agrees to pay to Buyer the sum of \$ 20e per day from and including the date of closing to and including the date that possession is to be delivered as above set forth.

9. COUNTERPARTS: This offer shall become a binding contract when signed by both Buyer and Seller. It is to be signed in 2 counterparts with a signed counterpart being retained by each party hereto and the escrow agent, if any.

Date of Offer: 6-18-14

Date of Acceptance: 6-18-14

Buyer Cesar Castaneda Flores (SEAL)

Seller Clyde L Patterson (SEAL)

Buyer _____ (SEAL)

Seller _____ (SEAL)

I hereby acknowledge receipt of the earnest money herein set forth and agree to hold and disburse the same in accordance with the terms hereof.

Date _____ Firm _____ By _____

Name of Selling Agent/Firm _____ Name of Listing Agent/Firm _____

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: Cesar Castaneda Flores Address: 495 Raumack Dr

City: Lillington State: NC Zip: 27546 Daytime Phone: 919-353-9002

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

Name: Same 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: Cesar Castaneda Flores

Phone: 919-353-9002 Address: 495 Raumack Dr

City: Lillington State: NC Zip: 27546

State Lic# Self Email: N/A

B. Electrical Contractor Company Name: Cesar Castaneda Flores

Phone: 919-353-9002 Address: 495 Raumack Dr

City: Lillington State: NC Zip: 27546

State Lic# Self Email: N/A

C. Mechanical Contractor Company Name: Cesar Castaneda Flores

Phone: 919-353-9002 Address: 495 Raumack Dr

City: Lillington State: NC Zip: 27546

State Lic# Self Email: N/A

D. Plumbing Contractor Company Name: Cesar Castaneda Flores

Phone: 919-353-9002 Address: 495 Raumack Dr

City: Lillington State: NC Zip: 27546

State Lic# Self Email: N/A

Part III - Manufactured Home Information

Model Year: 5/15/92 Size: 14 x 76 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.

Cesar Castaneda Flores
Signature of Home Owner or Agent

11-25-14
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.



MOBILE HOME MOVING PERMIT

COUNTY OF AREVET
STATE OF NORTH CAROLINA

PERMIT NUMBER 1778
Date 11-25-2014

Permission is granted to:

Michelle Tracy 7 CESAR E. JONES
Address 495 RAYMACK DR. GILLINGHAM, NC 27546

Carrier RAVEN ROCK MT MOVERS Address 3335 NC 87 S. STANFORD, NC 27332
to move the following mobile home:

Make 1992 PALM HARBOE Size 14x72 Serial Number PH144051

From: Address 495 RAYMACK DR. GILLINGHAM, NC 27546

To: Address 194 GEE COUNTY FIVE RD BRADLEY, NC 27505

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

THIS PERMIT VALID FOR THIS MOVE ONLY.

P. Bausfoot
County-City Tax Collector
JAR Redrum Assistant

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 14-50034800 Date 11/25/14
Property Address 194 LEE COUNTY LINE RD
PARCEL NUMBER 13-9680- - -0108- -12-
Application type description CP MANUFACTURED HOME RA20R/RA20M CRITERI
Subdivision Name
Property Zoning PENDING

Owner

Contractor

PATTERSON CLYDE
4271 LEAFLET CHUCH RD
BROADWAY NC 27505

OWNER

Applicant

CASTANEDA CESAR
455 RAYMACK DR
LILLINGTON NC 27546
(919) 353-3339

--- Structure Information 000 000 14X72 3BDR SWMH
Flood Zone FLOOD ZONE X
Other struct info # BEDROOMS 3000000.00
PROPOSED USE SWMH
SEPTIC - EXISTING? NEW TANK
WATER SUPPLY COUNTY

Permit LAND USE PERMIT
Additional desc
Phone Access Code 1063296
Issue Date 11/25/14
Expiration Date 5/24/15

Valuation 0

Permit MANUFACTURED HOME PERMIT
Additional desc
Phone Access Code 1063304
Issue Date 11/25/14
Expiration Date 11/25/15

Valuation 0

Special Notes and Comments

T/S: 10/22/2014 10:33 AM JBROCK ----
LEE COUNTY LINE RD LOT 3

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 | 14-50034800 | Page | 2 |
| Property Address | 194 LEE COUNTY LINE RD | Date | 11/25/14 |
| PARCEL NUMBER | 13-9680- - -0108- -12- | | |
| 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 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 | _____ | ___/___/___ |