

Initial Application Date: 1-20-16

Application # 1650037908

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: George WATSON Mailing Address: 3966 Pendergrass Rd  
City: Olivia State: \_\_\_\_\_ Zip: 28368 Contact No: \_\_\_\_\_ Email: \_\_\_\_\_

APPLICANT: Chuck Smith Mailing Address: PO Box 3025  
City: Sanford State: NC Zip: 27330 Contact No: 919-708-3351 Email: \_\_\_\_\_

\*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: \_\_\_\_\_ Phone # \_\_\_\_\_

PROPERTY LOCATION: Subdivision: \_\_\_\_\_ Lot #: B Lot Size: 1.00AC  
State Road # 1201 State Road Name: Pendergrass Rd Map Book & Page: 2015/375  
Parcel: 09956705001 PIN: 9567-57-4232.000  
Zoning: R200M Flood Zone: X Watershed: NA Deed Book & Page: 1397, 148 Power Company\*: -

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

**PROPOSED USE:**

- SFD: (Size 16 x 70) # Bedrooms: 3 # Baths: 2 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 70) # 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 1 ext sumat

Structures (existing or proposed) Single family dwellings: \_\_\_\_\_ Manufactured Homes: 1 proposed sumat Other (specify): \_\_\_\_\_

**Required Residential Property Line Setbacks:**

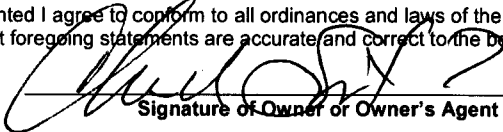
	Minimum	Actual
Front	<u>35</u>	<u>129</u>
Rear	<u>25</u>	<u>35</u>
Closest Side	<u>10</u>	<u>30</u>
Sidestreet/corner lot	<u>2</u>	
Nearest Building on same lot	<u>2</u>	

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.

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

1-26-16  
\_\_\_\_\_  
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\*\***

Scale 10

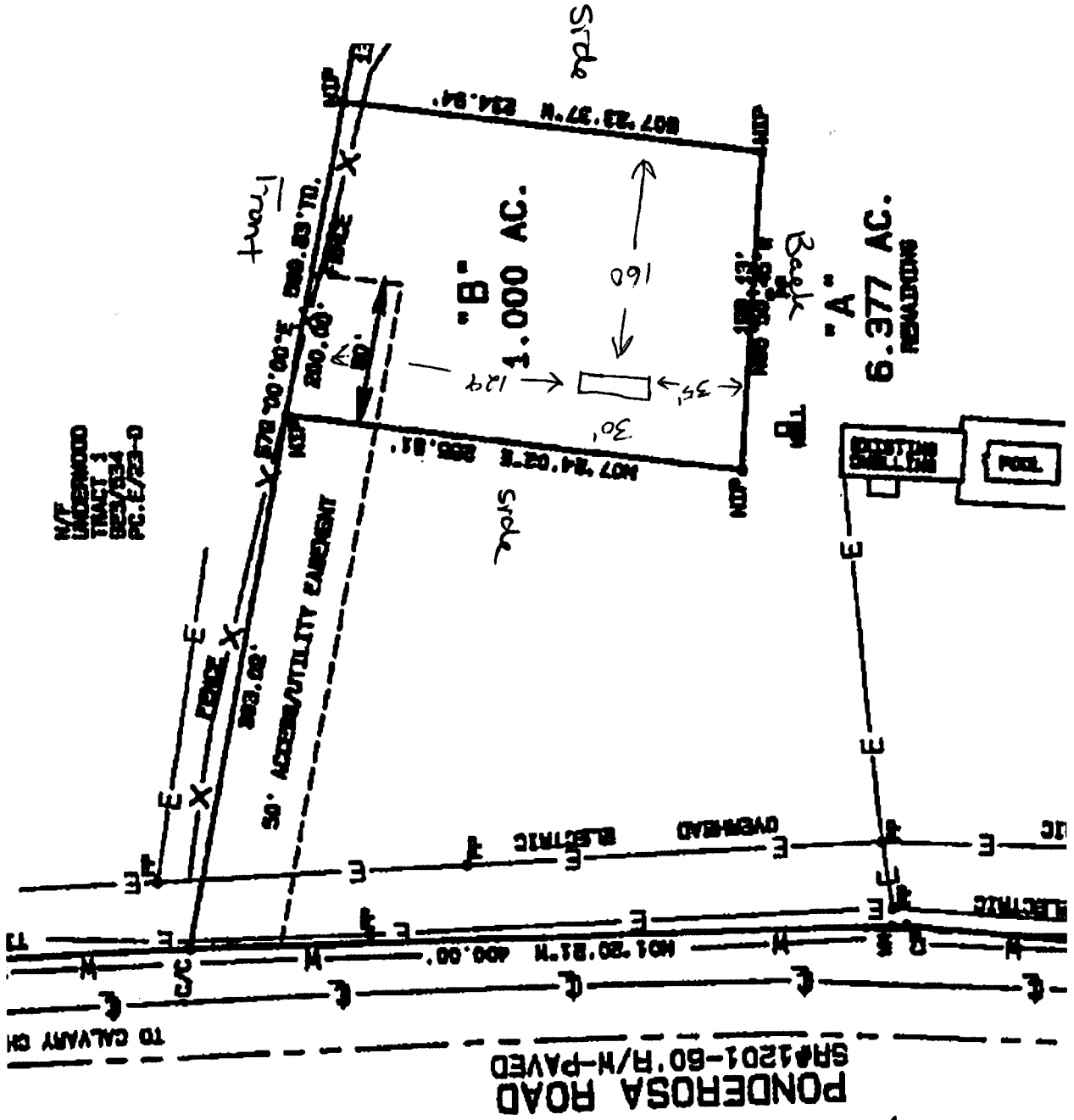
SITE PLAN APPROVAL

DISTRICT RAZON USE SWN H

#BEDROOMS 3

1-26-10

*[Signature]*  
Zoning Administrator



M/T UNDERWOOD TRACT 1 BE2/BE4 PC.E/23-D

George (Mr) WATTS



NAME: Chuck Smith

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.**

Chuck Smith  
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

1-26-16  
DATE

Date: 1-26-16

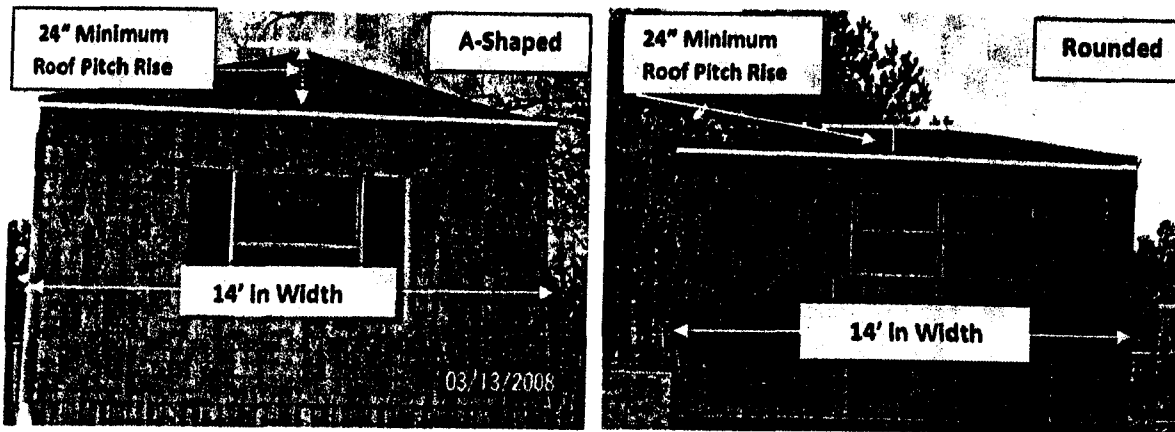
Application# \_\_\_\_\_

### PROCEDURES AND GUIDELINES FOR MANUFACTURED HOME INSPECTIONS

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

I, Chuck Smith 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.....



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: George More Uniton Address: 3966 Pondersosa Road  
City: San Ram State: NC Zip: 27332 Daytime Phone: ( ) \_\_\_\_\_

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: State Mobile Home Movers  
Phone: \_\_\_\_\_ Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
State Lic# 2859 Email: \_\_\_\_\_
- B. **Electrical Contractor** Company Name: Service Solutions  
Phone: 910-635-9363 Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
State Lic# 20934 Email: \_\_\_\_\_
- C. **Mechanical Contractor** Company Name: Swain Elec  
Phone: 336-685-9722 Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
State Lic# 13074-H-3 Email: \_\_\_\_\_
- D. **Plumbing Contractor** Company Name: Priority Plumbing  
Phone: 919-422-4935 Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
State Lic# 18550-P-1 Email: \_\_\_\_\_

**Part III – Manufactured Home Information**

Model Year: 2016 Size: 14x66 **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.

Chuck Smith  
Signature of Home Owner or Agent

3-3-16  
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.



# SALES AGREEMENT

DATE: 12/17/2015

BUYER(S): George Marc Walton, Jr.

ADDRESS: 3966 Ponderosa Road, Sanford, NC 27332

DELIVERY ADDRESS: TBD Ponderosa Road, Sanford, NC 27332

TELEPHONE: (919) 895-0394

SALES PERSON FULL NAME: Sola Edwards

BASE PRICE: \$ 62,636.65

State Tax \_\_\_\_\_  
Local Tax 1,415.41

CASH PRICE \$ 64,052.06

Land Purchase \_\_\_\_\_  
Land Payoff \_\_\_\_\_  
Title Fees \_\_\_\_\_  
Filing Fees \_\_\_\_\_  
HPP/HBPP 747.94  
HPP tax \_\_\_\_\_

TOTAL PACKAGE PRICE \$ 64,800.00

Trade Allowance \_\_\_\_\_  
Less Amount Owed \_\_\_\_\_  
Trade Equity \_\_\_\_\_  
Cash Down Payment 10,500.00

LESS ALL CREDITS \$ \_\_\_\_\_

REMAINING BALANCE \$ 49,575.25

Make: TRU Model: Steal 1  
Year \_\_\_\_\_ Length \_\_\_\_\_ Width \_\_\_\_\_ Stock# \_\_\_\_\_  
Serial No. CWP029524TN  New  Used

TRADE: Make: N/A Model: \_\_\_\_\_  
Year \_\_\_\_\_ Length \_\_\_\_\_ Width \_\_\_\_\_ Title # \_\_\_\_\_  
Serial No. \_\_\_\_\_

Amount owed will be paid by:  Buyer  Seller  
Owed to: \_\_\_\_\_

**OPTIONS:**

Seller agrees to contribute up to 6% towards borrowers closing costs and prepaid items.

**SELLER RESPONSIBILITIES:**

Delivery/set, survey, septic re-eval., septic system, gutters, vinyl skirting, permits, lot clearing, additional septic lines, water tap, electrical and plumbing connections, 2(4x5) steps/stoops and site clean up.

**BUYER RESPONSIBILITIES:**

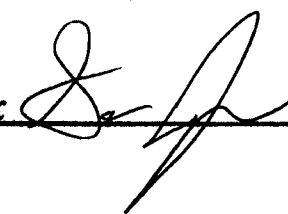
*May not meet local codes and standards. New homes meet Federal Manufactured Home Standards.*

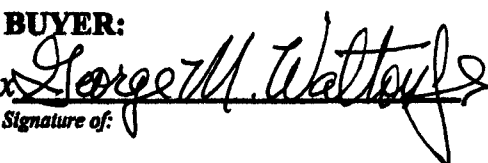
I UNDERSTAND THAT I HAVE THE RIGHT TO CANCEL THIS PURCHASE BEFORE MIDNIGHT OF THE THIRD BUSINESS DAY AFTER THE DATE THAT I HAVE SIGNED THIS AGREEMENT. I UNDERSTAND THAT THIS CANCELLATION MUST BE IN WRITING. IF I CANCEL THE PURCHASE AFTER THE THREE-DAY PERIOD, I UNDERSTAND THAT THE DEALER MAY NOT HAVE 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 \_\_\_\_\_ % NUMBER OF YEARS \_\_\_\_\_  
ESTIMATED MONTHLY PAYMENTS \$ \_\_\_\_\_

Location	Type of Insulation	Thickness	R-Value
Floors	fiberglass	7.0"	22
Exterior	fiberglass	3.5"	11
Ceilings	fiberglass	7.93"	33

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

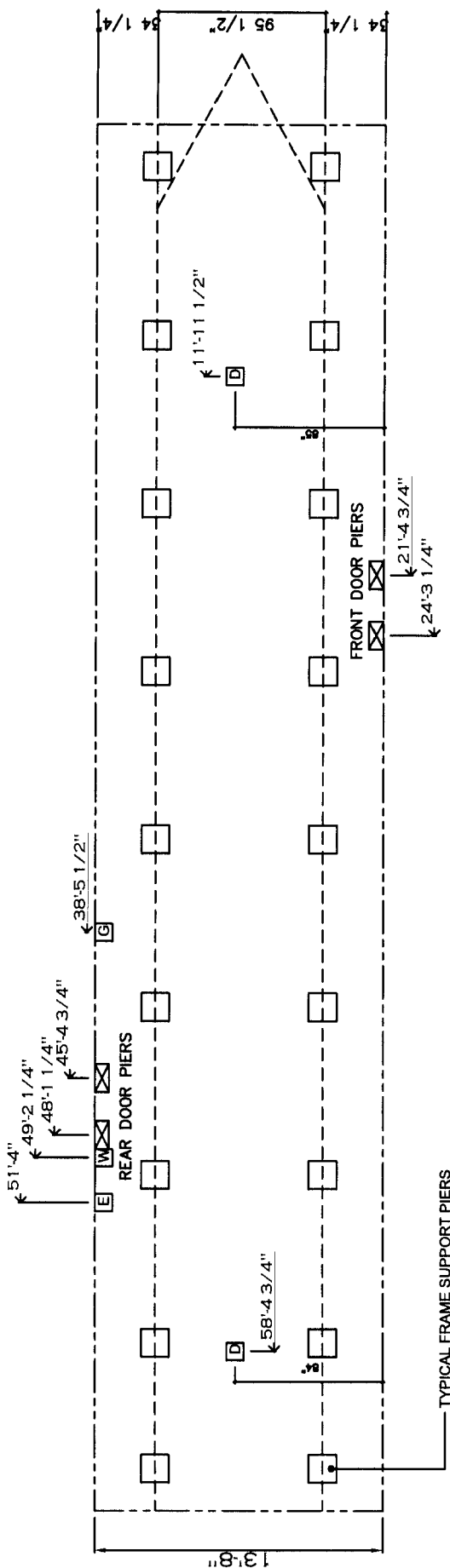
**SELLER:**  
CMH Homes, Inc. d/b/a -



**BUYER:**  
   
Signature of: \_\_\_\_\_  
 \_\_\_\_\_  
Signature of: \_\_\_\_\_  
 \_\_\_\_\_  
Signature of: \_\_\_\_\_  
 \_\_\_\_\_  
Signature of: \_\_\_\_\_

20 lb ROOF LOAD SIDEWALL OPENING PIER LOAD 14' BOX WIDTH	SIDEWALL OPENING (FT)					
	3	4	5	6	8	10
	1175	1330	1485	1640	1950	2260

\*FOR 30 lb & 40 lb ROOF LOAD REFER TO TABLES 7 & 7a IN THE INSTALLATION MANUAL.



- NOTES:
- REFER TO TABLES 6 AND 6a IN THE INSTALLATION MANUAL FOR LOAD ON FRAME PIER FOOTINGS FOR HOMES THAT DO NOT REQUIRE PERIMETER BLOCKING. REFER TO TABLES 7 AND 7a IN THE INSTALLATION MANUAL FOR LOAD ON FRAME PIER FOOTINGS FOR HOMES THAT REQUIRE PERIMETER BLOCKING. REFER TO TABLES 10 AND 10a TO DETERMINE FOOTING SIZE FOR ALL PIERS.
  - REFER TO TABLE 9 FOR PIER CONFIGURATION AND MAXIMUM ALLOWABLE HEIGHTS. CROSS REFERENCE THE PIER HEIGHT WITH THE MAXIMUM ALLOWABLE FLOOR HEIGHT LISTED IN THE FRAME TIEDOWN CHARTS (TABLE 18, 19, AND 20).
  - THE MAXIMUM SPACING FOR FRAME SUPPORT PIERS FOR 8" I-BEAMS IS 8 FEET, 10" & 12" I-BEAMS IS 10 FEET.
  - SERVICE DROP LOCATIONS IDENTIFIED ARE APPROXIMATE.
  - FLOOR WIDTH SHOWN IS FOR STANDARD PRODUCT ONLY. CONTACT THE MFG FACILITY FOR SPECIFICATIONS OF OPTIONS ORDERED.

SERVICE DROP LEGEND	
□	= ELECTRICAL DROP
□	= WATER INLET
□	= DWV PLUMBING DROP
□	= P.A.C. INLET

PIER LEGEND	
□	= PIER MAIN BEAM
■	= PIER PERIMETER
■	= PIER PORCH/RECESS ENTRY

902 SQ.FT. (STD PLAN "CONDITIONED")  
 SQ.FT. (W/OPT. PORCH/RECESS "CONDITIONED")

**TRU**  
 Model #: TRUJ14663A | Drawing #:  
 Date: 1-9-12 | Scale: NTS | 365072

Product Designer: HARMBOND | 14' X 66' STEAL I

**EDMONT DTRDC**

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 . . . . . 16-50037908 Date 3/03/16  
Property Address . . . . . 3966 PONDEROSA RD  
PARCEL NUMBER . . . . . 09-9567- - -0050- -01-  
Application type description CP MANUFACTURED HOME RA20R/RA20M CRITERI  
Subdivision Name . . . . .  
Property Zoning . . . . . PENDING

Owner Contractor  
-----  
WALTON, GEORGE/KAREN STATE MOBILE HOME MOVERS  
PO BOX 680 1085 A AQUILLA RD  
OLIVIA NC 28368 BENSON NC 27504  
(910) 894-8038

Applicant  
-----  
SMITH CHUCK  
PO BOX 3025  
SANFORD NC 27330  
(919) 708-3351

--- Structure Information 000 000 16X70 3BDR SWMH  
Flood Zone . . . . . FLOOD ZONE X  
Other struct info . . . . . # BEDROOMS 3000000.00  
MOBILE HOME YEAR 2016.00  
PROPOSED USE SWMH  
SEPTIC - EXISTING? NEW TANK  
WATER SUPPLY COUNTY

-----  
Permit . . . . . LAND USE PERMIT  
Additional desc . . . . .  
Phone Access Code . 1128594  
Issue Date . . . . . 3/03/16 Valuation . . . . . 0  
Expiration Date . . 8/30/16

-----  
Permit . . . . . MANUFACTURED HOME PERMIT  
Additional desc . . . . .  
Phone Access Code . 1128586  
Issue Date . . . . . 3/03/16 Valuation . . . . . 0  
Expiration Date . . 3/03/17

-----  
Special Notes and Comments  
T/S: 01/26/2016 09:50 AM JBROCK ----  
LOT NEXT TO 3966 PONDEROSA RD

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

HARNETT COUNTY CENTRAL PERMITTING  
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PARCEL NUMBER . . . . . 09-9567- - -0050- -01-  
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	_____	___/___/___
999		H828	ENVIRO. WELL PERMIT	_____	___/___/___
999	307	P307	R*PLUMB WATER CONNECTION	_____	___/___/___