

Initial Application Date: 03/09/2016

Application # 1050038197

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\*\***

Donnie & **Bobbie Price**  
LANDOWNER: Bobbie Price Mailing Address: 470 DUKE Rd. DUNN, NC 28334  
City: DUNN State: NC Zip: 28334 Contact No: 910 897-7439 Email: \_\_\_\_\_

APPLICANT: Tracy Manning Mailing Address: 470 DUKE Rd  
City: Dunn State: NC Zip: 28334 Contact No: 252-623-8492 Email: tmooremanning@hotmail  
\*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Call ↑ Bobbie M Price Phone # (910) 897-7439

PROPERTY LOCATION: Subdivision: 120 PRICE Lane, DUNN, NC Lot # 070598<sup>016</sup> Lot Size: 3.12 acres

State Road # 2012 State Road Name: Duke Rd / 120 Price Ln Map Book & Page: 00734/0184

Parcel: 07 0598 0116 PIN: 0598-85-6867.000

Zoning: R202M Flood Zone: \_\_\_\_\_ Watershed: \_\_\_\_\_ Deed Book & Page: 070598 0116 Power Company\*: Duke

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

**PROPOSED USE:**

SFD: (Size \_\_\_\_\_ x \_\_\_\_\_) # Bedrooms: 2 # 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 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: 1 Manufactured Homes: 1 Other (specify): \_\_\_\_\_

**Required Residential Property Line Setbacks:**

Front Minimum 35 Actual 35+  
Rear 25 25'  
Closest Side 10 14.5'  
Sidestreet/corner lot \_\_\_\_\_  
Nearest Building on same lot \_\_\_\_\_

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

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Hwy 421 towards <sup>Dunn</sup> Coats - Turn <sup>(L)</sup> on  
Hwy 55 towards Coats - Turn <sup>(L)</sup> on Prospect Church Rd - Turn <sup>(L)</sup>  
on Duke Rd - 2nd House on Left Turn <sup>(L)</sup> @ Price Lane  
Sign - First Mobile Home space on right after you pass  
Brick House.

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.

Bobbie M Price  
Signature of Owner or Owner's Agent

03-07-2016  
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\*\*



NAME: Tracy Mountain

APPLICATION #: 38197

**\*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 # 014612-UB

*Left message to call Tracy*

- 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? *(Septic System) Well shared*
- 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.**

Bobbie M Price  
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

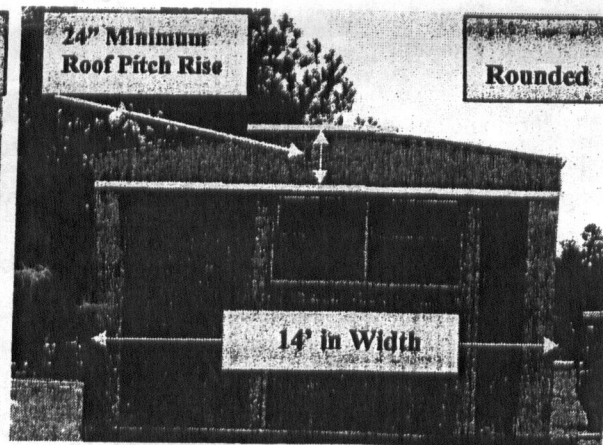
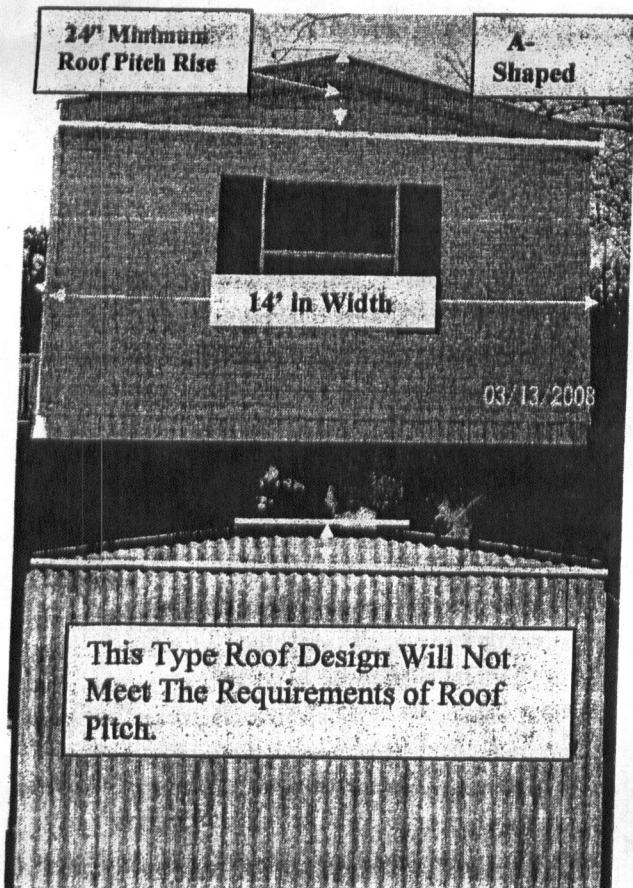
03/07/2016  
DATE

# PROCEDURES AND GUIDELINES FOR MANUFACTURED HOMES

## Replacement & Removal Criteria

I, Robbie M Price, do hereby certify the following:  
(Print Name)

1. That I own a tract of land located on SR 2012 in an RA-30 / RA-40 or RA-20R /RA-20M district which has a functional septic tank;
2. That the existing **single/double-wide** manufactured home is to be removed or was removed on 3/7/2016 (date)
3. That I am replacing an existing **single/double wide** manufactured home with a **single/double wide** manufactured home, and;
4. That the replacement of this manufactured home creates 1 residence(s) on this single tract of land, and; mother + daughter
5. That there will be 2 manufactured home(s) on this single tract of land and (I do/do not own property within 500 feet of this tract that contains a manufactured home.
6. 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. (14' Wide Home = 24" Roof Rise)

7. The home must be underpinned, the underpinning must be designed for manufactured homes & installed in good workmanship-like manner along the entire base of a manufactured home, except for ventilation and crawl space requirements, and consisting of the following: metal with a baked -on finish of uniform color; a uniform design and color vinyl; or brick, cinder block, and stone masonry as well as artificial stone masonry.
8. The homes moving apparatus removed, underpinned or landscaped.
9. Select One of the Following Options Below:
  - a. The current manufactured home will be removed prior to the Zoning Inspection.
  - b. The current manufactured home is scheduled to be removed through Project AMPI
  - c. The current manufactured home will be removed after the final inspection has been performed and the certificate of occupancy has been issued. **(Additional Fees & Requirements Shall Apply)**

**\*(Additional Information for Option C) Temporary approval for replacement of a manufactured home is allowed only under the procedures and limitations stated below.**

*Please initial next to each item to indicate that you understand and have or will comply as necessary.*

- 1) A valid manufactured home moving permit must be submitted for the removal of the existing home located on the property.
- 2) A copy of a Bill of Sale or a Title Transfer of the existing home must be submitted.
- 3) Items 1 & 2 must be submitted to Central Permitting prior to your permit issuance.
- 4) **Property owner/agent** acknowledges that due to the fact that a second zoning inspection is required, in order to facilitate this request, a re-inspection fee in the amount of fifty (\$50.00) dollars shall be paid during the permitting process.
- 5) Once the home has met all other zoning requirements, a temporary approval shall be granted in order to proceed with obtaining a certificate of occupancy. From the date the certificate of occupancy is issued, the property owner shall have five (5) business days to remove the pre-existing manufactured home.
- 6) **Property owner/agent** acknowledges that if the pre-existing manufactured home is not removed by the specified time of five (5) business days that he / or she shall be in direct violation of the Harnett County Zoning Ordinance. And by creating a violation of the Harnett County Zoning Ordinance shall subject themselves to enforcement actions, penalties, and fines specified within Article XV, (Administration, Enforcement, and Penalties) of the Harnett County Zoning Ordinance. Each day the violation continues is a separate offence and is a misdemeanor punishable by a fine not to exceed one hundred (\$100.00) dollars or imprisonment not to exceed thirty (30) days.
- 7) **Property owner/agent** acknowledges and affirms that the guidelines, procedures, and requirements associated with the replacement of a manufactured home and the penalties for creating a violation of the Harnett County Zoning Ordinance have been explained and accepts this document as an initial notice of violation.

Bobbie M Puce  
Signature of Property Owner

03/07/2016  
Date

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



# MOBILE HOME TAX PERMIT

COUNTY OF JOHNSTON

STATE OF NORTH CAROLINA

Permission is granted to:

2000190561

Date 3/9/2016

PERMIT # 0398

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

Owner SHERWOOD ALLEN WEST 1388 ASHE AVE DUNN NC

Carrier BJ'S MOBILE HOME MOVERS 2915 N SPRING BRANCH RD DUNN NC

to move the following mobile home:

Make CLAYTON 2006 16X60 Serial number 0HC16464NC

From: 116 STEELER LN Address CLAYTON NC

To: 120 PRICE LANE Address DUNN NC

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.

THIS PERMIT VALID FOR THIS MOVE ONLY.

Catherine D. Futch  
County-City Tax Collector  
by [Signature]





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: Sherwood Allen West Address: 1388 Ashe Ave.  
 City: Dunn State: N.C. Zip: 28334 Daytime Phone: (910) 987-3166

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

Name: Bobbie M Price Address: 470 Duke Rd.  
 City: Dunn State: NC Zip: 28334 Daytime Phone: 910 897-7439

**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: B.T.'s mobile home movers  
 Phone: 910 892-7972 Address: 2915 Spring Branch Rd  
 City: Dunn State: NC Zip: 28334  
 State Lic# 3076 Email: \_\_\_\_\_

B. **Electrical Contractor** Company Name: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 State Lic# \_\_\_\_\_ Email: \_\_\_\_\_

C. **Mechanical Contractor** Company Name: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 State Lic# \_\_\_\_\_ Email: \_\_\_\_\_

D. **Plumbing Contractor** Company Name: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 State Lic# \_\_\_\_\_ Email: \_\_\_\_\_

**Part III – Manufactured Home Information**

Model Year: 2006 Size: 16 X 60 **Complete & follow zoning criteria sheet**  
 Park Name: Price Ln Lot Number: 120 Price Ln

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.

Sherwood Allen West  
 Signature of Home Owner or Agent

03/07/2016  
 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.*

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 . . . . . 16-50038197 Date 3/17/16  
Property Address . . . . . 120 PRICE LN  
PARCEL NUMBER . . . . . 07-0598- - -0116- - -  
Application type description CP MANUFACTURED HOME RA20R/RA20M CRITERI  
Subdivision Name . . . . . JOHN H PARKER  
Property Zoning . . . . . RES/AGRI DIST - RA-20M

Owner	Contractor
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PRICE DONNIE W & B	B J'S MOBILE HOME MOVERS
RT 3 BOX 743	2915 SPRING BRANCH ROAD
DUNN NC 28334	DUNN NC 28334
(910) 897-7439	(910) 892-7972

Applicant  
-----  
PRICE BOBBIE  
120 PRICE LN  
DUNN NC 28334  
(252) 623-8492

--- Structure Information 000 000 16X60 SWMH 2 BDR  
Flood Zone . . . . . FLOOD ZONE X  
Other struct info . . . . . # BEDROOMS 2.00  
PROPOSED USE SFD  
SEPTIC - EXISTING? EXIST  
WATER SUPPLY WELL

Permit . . . . . LAND USE PERMIT  
Additional desc . . .  
Phone Access Code . 1131044  
Issue Date . . . . . 3/17/16 Valuation . . . . . 0  
Expiration Date . . 9/13/16

Permit . . . . . MANUFACTURED HOME PERMIT  
Additional desc . . .  
Phone Access Code . 1131051  
Issue Date . . . . . 3/17/16 Valuation . . . . . 0  
Expiration Date . . 3/17/17

Special Notes and Comments  
T/S: 03/09/2016 11:35 AM LBENNETT --  
120 PRICE LN HWY 421 TOWARDS DUNN -  
TURN LEFT ON HWY 55 TOWARDS COATS- TURN  
LEFT ON PROSPECT CHURCH RD - TURN LEFT  
ON DUKE RD - 2ND HOUSE ON LEFT - TURN  
LEFT @ PRICE LANE SIGN - FIRST MOBILE  
HOME SPACE ON RIGHT AFTER YOU PASS

\_\_\_\_\_

\_\_\_\_\_

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 . . . . . 16-50038197

Page 2

Date 3/17/16

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Special Notes and Comments

BRICK HOUSE

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

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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Subdivision Name . . . . .	JOHN H PARKER		
Property Zoning . . . . .	RES/AGRI DIST - RA-20M		

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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	_____	___/___/___