

Initial Application Date: 3-15-16

Application # 16 500.38246

Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

CU# \_\_\_\_\_

\*\*A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION\*\*

LANDOWNER: Edward & Rubye Smith Mailing Address: 833 Docs Road  
City: Lillington State: NC Zip: 27546 Contact No: 910-309-9441 Email: mikeallamerican68@gmail.com

APPLICANT\*: Same Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Contact No: \_\_\_\_\_ Email: \_\_\_\_\_  
\*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Ron West Phone # 910-309-6615

PROPERTY LOCATION: Subdivision: Ron West Lot #: 7-A Lot Size: 9.24  
State Road # \_\_\_\_\_ State Road Name: Docs Rd Map Book & Page: 214 / 160  
Parcel: 030507 0045 PIN: 0507-24-1937.000  
Zoning: R-20R Flood Zone: X Watershed: NH Deed Book & Page: 1307 / 1044 Power Company: Progress Energy  
\*New structures with Progress Energy as service provider need to supply premise number 00300653 from Progress Energy.

PROPOSED USE:

- SFD: (Size \_\_\_\_\_ x \_\_\_\_\_) # Bedrooms: \_\_\_\_\_ # Baths: \_\_\_\_\_ Basement(w/wo bath): \_\_\_\_\_ Garage: \_\_\_\_\_ Deck: \_\_\_\_\_ Crawl Space: \_\_\_\_\_ Slab: \_\_\_\_\_ Monolithic 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 28 x 48) # 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: 1 Manufactured Homes: 1 Other (specify): \_\_\_\_\_

Required Residential Property Line Setbacks:

	Minimum	Actual
Front	<u>35</u>	<u>156</u>
Rear	<u>25</u>	<u>230</u>
Closest Side	<u>10</u>	<u>41</u>
Sidestreet/corner lot	<u>20</u>	<u>-</u>
Nearest Building on same lot	<u>10</u>	<u>100+</u>

Comments: existing

1 proposed

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Hwy 27 west. Turn left on to Docs Rd.  
Property is 1 mile down on left.  
Home site at rear of property behind barn.

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.

Edward K. Smith  
Signature of Owner or Owner's Agent

10-10-15  
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\*\*

1=100

412'

SITE PLAN APPROVAL

DISTRICT RA20R USE DWYH

#BEDROOMS 3

3.15.16 dyominm  
ZONING ADMINISTRATOR.

581'

← proposed  
dway

← proposed  
28x48  
3bl

230'

156'

4'

1134'

161'

← existing  
SFD



Kurt  
T

NAME: Edward & Rubye Smith

APPLICATION #: 16-50038246

**\*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.

Edward K. Smith  
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

10-10-15  
DATE

Date: 3.15.16

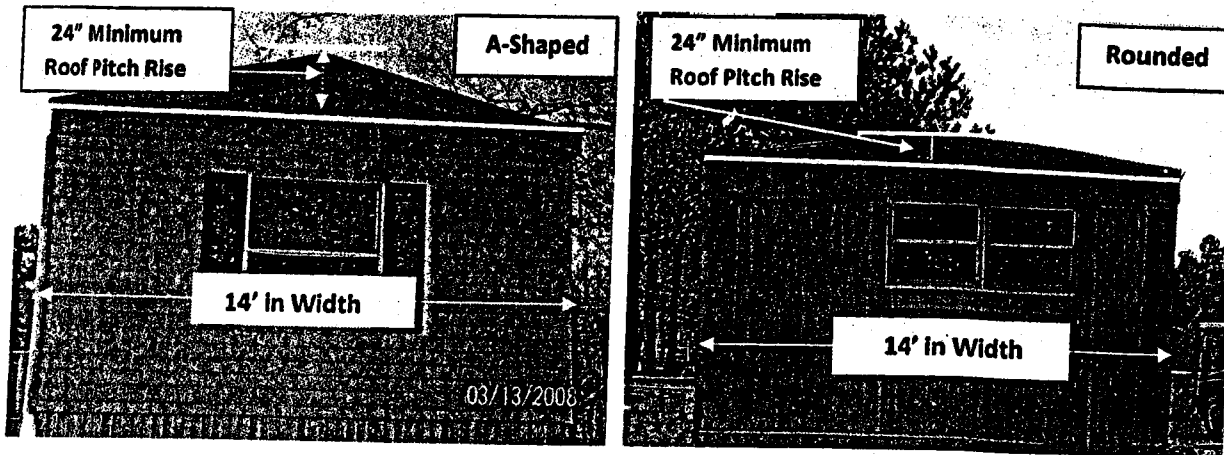
Application# 16 50038240

## PROCEDURES AND GUIDELINES FOR MANUFACTURED HOME INSPECTIONS

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

I, Michael 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.

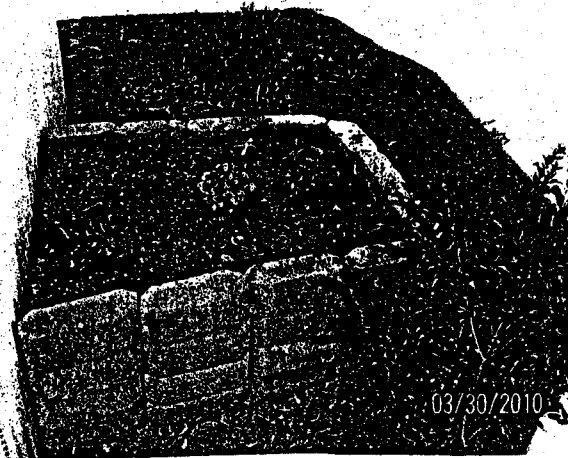
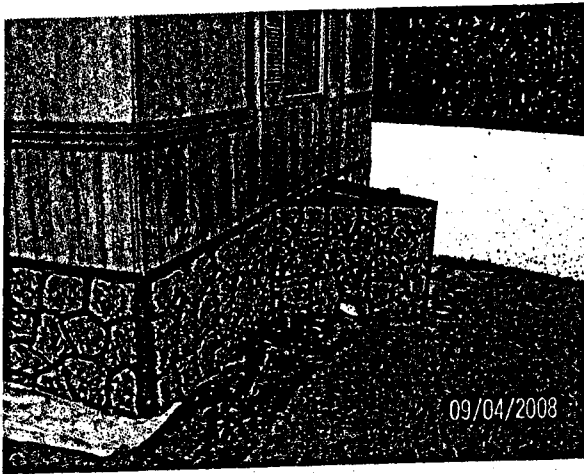
1. The home must have a pitched roof, for a manufactured home, whether A-shaped or rounded, which has a minimum rise (measured at the center of the home) of twelve (12) inches for every seven (7) feet of total width of the home. (Example: A home measuring fourteen (14 ft.) in width must have a twenty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



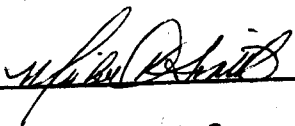
Note: Most Rounded Roofs **Will Not** Meet The Roof Pitch Requirement As Illustrated. The Measurement From The Peak Of The Roof To The Base Line Of The Roof Must Be 12" For Every 7' Of Total Width Of The Home. (Ex: 14' Wide Home = 24" Roof Rise)

Continued.....

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.)



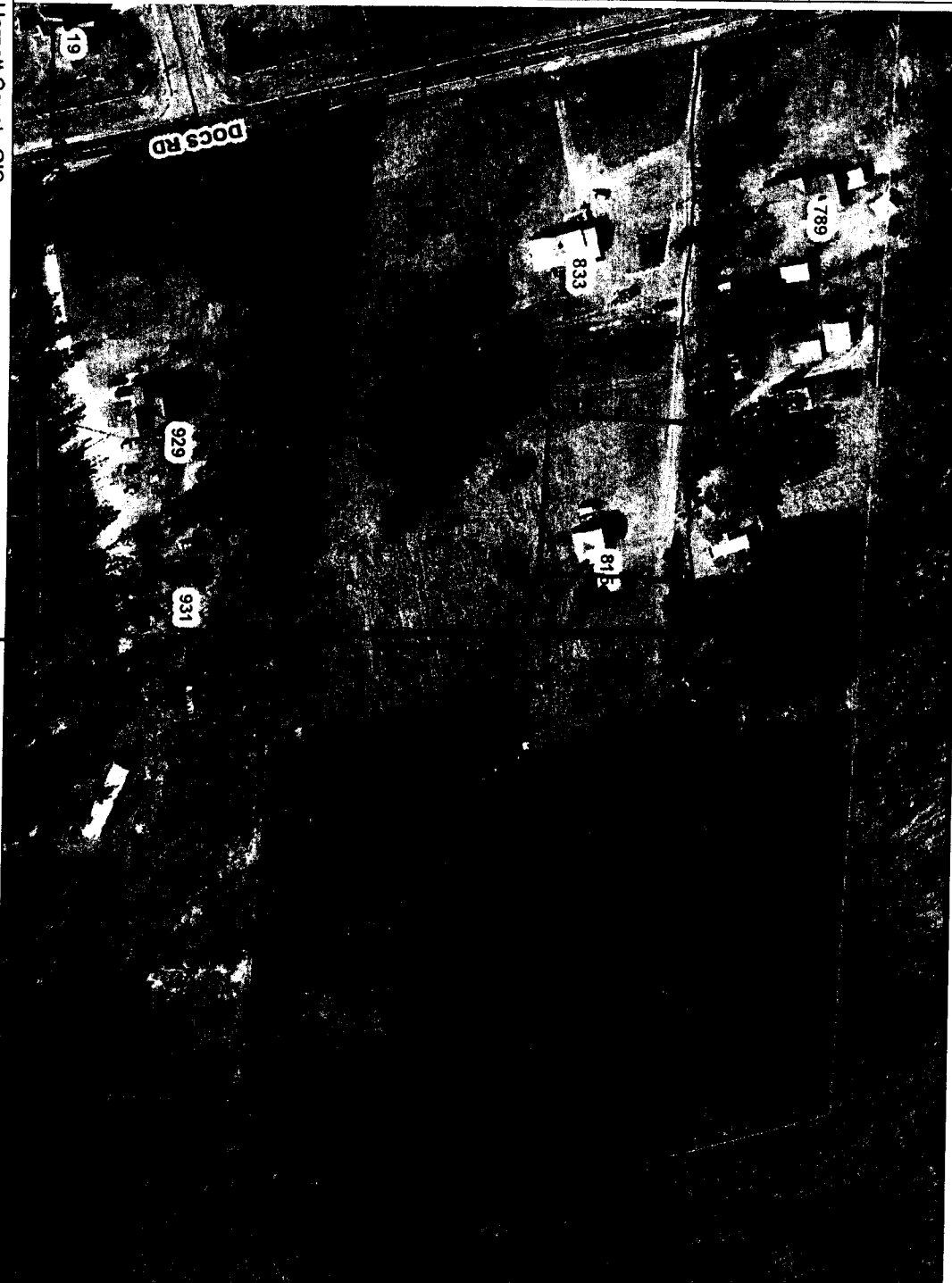
4. The home must have been constructed after July 1<sup>st</sup> 1976.

  
\_\_\_\_\_  
Signature of Property Owner / Agent

3/15/16  
Date

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

**HARNETT COUNTY, NORTH CAROLINA  
GIS/LAND RECORDS**

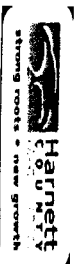


Harnett County GIS  
305 W Cornelius Harnett Blvd, Suite 100  
Lillington NC 27546  
Phone: 910-893-7523 www.harnett.org

Any use of this map shall be at the sole risk of the user of this map. Although, all effort has been taken to insure accuracy in the data presented, Harnett County makes no warranty, expressed or implied, as to the accuracy of this information represented herein. Any user of this product shall hold harmless Harnett County, its elected officials, employees and agents from and against any claim, damage, loss, action, cause of action, or liability arising from the use of this GIS product.



- Address Points
- Road Centerlines
- Major Roads
- Rivers
- Parcels
- County Boundary
- City Limits
- Harnett\_2013.sid
  - Red: Band\_1
  - Green: Band\_2
  - Blue: Band\_3



Application # 16-50038246  
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: Edward & Ruby Smith Address: 833 Docs Rd.

City: Lillington State: NC Zip: 27546 Daytime Phone: 910-309-9441

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: Edward Smith

Phone: 919-498-3783 Address: 833 Docs Rd.

City: Lillington State: NC Zip: 27546

State Lic# \_\_\_\_\_ Email: mikeallamericaw68@gmail.com

B. Electrical Contractor Company Name: Joe Parker Electric, Inc.

Phone: 481-0955 Address: 807 W. Mountain Dr. ✓

City: NC State: Fayetteville Zip: 28306

State Lic# 126852 Email: \_\_\_\_\_

C. Mechanical Contractor Company Name: BASS & HEATING & AIR

Phone: 910-778-1536 Address: 3261 NATAF Rd.

City: Fayetteville State: NC Zip: 28306

State Lic# 1387 Email: \_\_\_\_\_

D. Plumbing Contractor Company Name: Pipework Plumbing

Phone: 919-775-1019 Address: 104 McNeil St. ✓

City: Sanford State: NC Zip: 27330

State Lic# 31056 Email: \_\_\_\_\_

Part III - Manufactured Home Information

Model Year: 1997 Size: 28 X 48 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.

Edward K Smith  
Signature of Home Owner or Agent

10-10-15  
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.





OFFICE OF THE TAX ADMINISTRATOR  
 5<sup>th</sup> Floor, New Courthouse • PO Box 449 • Suite 527 • Fayetteville, NC 28302-0449  
 (910) 678-7507 • Fax (910) 678-7581 • [www.co.cumberland.nc.us](http://www.co.cumberland.nc.us)

# MOBILE HOME MOVING PERMIT

February 16, 2016

County of Cumberland  
 State of North Carolina

Permit No. W-16  
 Agent: Pam Criscoe

Permission is granted to the following person(s) to move the mobile home identified below:

Name: Ronald W West  
 Address: 833 Doc's Rd Lillington NC 27546  
 Phone: \_\_\_\_\_  
 Carrier: \_\_\_\_\_

Name: Norton Stanley Enterprise  
 Address: PO Box 176 Spring Lake NC 28390  
 Phone: \_\_\_\_\_

Property Description:

Make	Year	Size	VIN
Unknown	1987	28X48	Charged as Real Estate

Location Moving From: 925 Locks Creek Rd Fayetteville NC 28312

Location Moving To: 833 Doc's Rd Lillington NC 27546

This permit is issued in accordance with the provisions of North Carolina General Statute §105-316.1 through §105-316.8.

This permit shall be conspicuously displayed near the license tag on the rear of the mobile home at all times during transportation.

THIS PERMIT VALID FOR THIS MOVE ONLY.

Joseph R Utley Jr  
 Cumberland County Tax Administrator

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 . . . . . 16-50038246 Date 4/13/16  
 Property Address . . . . . 19276 \*UNASSIGNED  
 PARCEL NUMBER . . . . . 03-0507- - -0045- - -  
 Application type description CP MANUFACTURED HOME RA20R/RA20M CRITERI  
 Subdivision Name . . . . . W H PARRISH  
 Property Zoning . . . . . PENDING

Owner

Contractor

-----  
 SMITH EDWARD K & RUBY B  
 10 HAYDEN LANE  
 CAMERON NC 28326

OWNER

Applicant

-----  
 SMITH EDWARD AND RUBY #7A  
 833 DOCS RD  
 LILLINGTON NC 27546  
 (910) 309-9441

--- Structure Information 000 000 28X48 3 BR NO DECKS/PORCHES  
 Flood Zone . . . . . FLOOD ZONE X  
 Other struct info . . . . . # BEDROOMS 3.00  
 MOBILE HOME YEAR 1987.00  
 PROPOSED USE DWMH  
 SEPTIC - EXISTING? NEW  
 WATER SUPPLY UNKNOWN

-----

Permit . . . . . MANUFACTURED HOME PERMIT  
 Additional desc . . .  
 Phone Access Code . 1135110  
 Issue Date . . . . . 4/13/16 Valuation . . . . . 0  
 Expiration Date . . 4/13/17

-----

Permit . . . . . LAND USE PERMIT  
 Additional desc . . .  
 Phone Access Code . 1135102  
 Issue Date . . . . . 4/13/16 Valuation . . . . . 0  
 Expiration Date . . 10/10/16

Special Notes and Comments

T/S: 03/15/2016 02:25 PM DJOHNSON --  
 27 W TURN LEFT ONTO DOCS RD. PROPERTY  
 IS 1 MILE DOWN ON LEFT. HOME SITE IS  
 AT REAT OF PROPERTY BEHIND BARN.

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 . . . . .	16-50038246	Page	2
Property Address . . . . .	19276 *UNASSIGNED	Date	4/13/16
PARCEL NUMBER . . . . .	03-0507- - -0045- - -		
Application description . . .	CP MANUFACTURED HOME RA20R/RA20M CRITERI		
Subdivision Name . . . . .	W H PARRISH		
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	_____	___/___/___

HARNETT COUNTY CASH RECEIPTS

\*\*\* CUSTOMER RECEIPT \*\*\*

Oper: JBRDCK

Type: CP Drawer: 1

Date: 1/31/18 52

Receipt no: 231951

Year	Number	Amount
2016	50038246	
817 DOCS RD		
LILLINGTON, NC 27546		
B1		
	BP - PERMIT FEES	\$170.00

TRADE PERMITS

RUBY SMITH

Tender detail		\$170.00
CK CHECK PAYMEN	1016	\$170.00
Total tendered		\$170.00
Total payment		\$170.00

Trans date: 1/31/18 Time: 11:59:35

\*\* THANK YOU FOR YOUR PAYMENT \*\*

HARNETT COUNTY CENTRAL PERMITTING  
P.O. BOX 65  
LILLINGTON, NC 27546  
For Inspections Call: (910) 893-7525 Fax: (910) 893-2793

-----  
Application Number . . . . . 16-50038246 Date 1/31/18  
Property Address . . . . . 817 DOCS RD  
PARCEL NUMBER . . . . . 03-0507- - -0045- - -  
Application type description CP MANUFACTURED HOME RA20R/RA20M CRITERI  
Subdivision Name . . . . . W H PARRISH  
Property Zoning . . . . . PENDING

Owner Contractor  
-----  
SMITH EDWARD K & RUBY B OWNER  
10 HAYDEN LANE  
CAMERON NC 28326

Applicant

-----  
SMITH EDWARD AND RUBY #7A  
833 DOCS RD  
LILLINGTON NC 27546  
(910) 309-9441

--- Structure Information 000 000 28X48 3 BR NO DECKS/PORCHES  
Flood Zone . . . . . FLOOD ZONE X  
Other struct info . . . . . # BEDROOMS 3.00  
MOBILE HOME YEAR 1987.00  
PROPOSED USE DWMH  
SEPTIC - EXISTING? NEW  
WATER SUPPLY UNKNOWN

-----  
Permit . . . . . RESIDENTIAL ELECTRICAL PERMIT  
Additional desc . . . . .  
Phone Access Code . . . . . 1227065  
Issue Date . . . . . 1/31/18 Valuation . . . . . 0  
Expiration Date . . . . . 1/31/19

-----  
Permit . . . . . RESIDENTIAL MECHANICAL PERMIT  
Additional desc . . . . .  
Phone Access Code . . . . . 1227081  
Issue Date . . . . . 1/31/18 Valuation . . . . . 0  
Expiration Date . . . . . 1/31/19

-----  
Permit . . . . . RESIDENTIAL PLUMBING PERMIT  
Additional desc . . . . .  
Phone Access Code . . . . . 1227073  
Issue Date . . . . . 1/31/18 Valuation . . . . . 0  
Expiration Date . . . . . 1/31/19

-----  
Special Notes and Comments  
T/S: 03/15/2016 02:25 PM DJOHNSON --  
-----

HARNETT COUNTY CENTRAL PERMITTING  
P.O. BOX 65  
LILLINGTON, NC 27546  
For Inspections Call: (910) 893-7525 Fax: (910) 893-2793

---

Application Number . . . . .	16-50038246	Page	2
		Date	1/31/18

---

Special Notes and Comments  
27 W TURN LEFT ONTO DOCS RD. PROPERTY  
IS 1 MILE DOWN ON LEFT. HOME SITE IS  
AT REAT OF PROPERTY BEHIND BARN.  
PREMISE # 00300653

---

---

HARNETT COUNTY CASH RECEIPTS

\*\*\* CUSTOMER RECEIPT \*\*\*

Oper: JBROCK      Type: CP    Drawer: 1  
Date: 1/31/18 52    Receipt no: 232003

Year	Number	Amount
2016	50030246	
817 DOCS RD		
LILLINGTON, NC 27546		
B1	BP - PERMIT FEES	\$60.00

T-POLE

RUBY SMITH

Tender detail		
CK CHECK PAYMEN	1018	\$60.00
Total tendered		\$60.00
Total payment		\$60.00

Trans date: 1/31/18      Time: 12:43:00

\*\* THANK YOU FOR YOUR PAYMENT \*\*