

Initial Application Date: 8.2.16

Application # 1650039305

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: Edith + Arvin Johnson Mailing Address: 7356 Colliers Chapel Church Rd
City: Linden State: NC Zip: 28356 Contact No: _____ Email: _____

APPLICANT: Dorinda Frederici Mailing Address: 1232 Bethel Baptist Rd
City: Spring Lake State: NC Zip: 28390 Contact No: 910-574-1812 Email: _____
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: _____ Phone # _____

PROPERTY LOCATION: Subdivision: Arvin Johnson + Wife Edith Lot #: 26 Lot Size: 1.28 AC
State Road # 2048 State Road Name: Bethel Baptist Rd Map Book & Page: 2016, 17
Parcel: 01.0524.0034.03 PIN: 0524.74.5156
Zoning: RA20M Flood Zone: X Watershed: NA Deed Book & Page: 07P Power Company*: SLUCCR

*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/w/o bath): _____ Garage: _____ Deck: _____ Crawl Space: _____ 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/w/o 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 28.5x4) # 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): existing metal shed
proposed

Required Residential Property Line Setbacks:

| | Minimum | Actual |
|------------------------------|-----------|------------|
| Front | <u>35</u> | <u>116</u> |
| Rear | <u>25</u> | <u>25+</u> |
| Closest Side | <u>10</u> | <u>67</u> |
| Sidestreet/corner lot | <u>20</u> | |
| Nearest Building on same lot | <u>10</u> | |

Comments:

1 nuh smth being removed

nd Utility Easement
t.

R/W
BETHEL BAPTIST ROAD 60' R/W (PUBLIC)

EX. PK NAIL IN THE CL OF BETHEL BAPTIST RD

(TIELINE)
N22° 25' 40"W
30.14

NOT TO SCALE

SITE PLAN APPROVAL
DISTRICT RA20M USE DMMH

3 BEDROOMS
6-2-16
ZONING ADMINISTRATOR

0524-74-6320.000
LARRY W. GIBBS and Wife
DB 2234, PG 681
PB 2006, PG 117

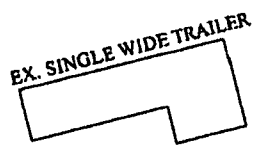
CM

N71° 30' 03"E
236.95

35' FRONT SETBACK

PROPOSED 50' INGRESS/EGRESS
TO SERVE BOTH LOTS

10' SIDE SETBACK
10' SIDE SETBACK
10' SIDE SETBACK



2A

.90 ACRES



25' REAR SETBACK

N70° 13' 08"E
224.72

50.00' SRB

10' SIDE SETBACK
N26° 21' 00"W
174.31

SRB

35' FRONT SETBACK

2.18 Acres
DB 2848, PG 512
PB 2006, PG 117

2

10' SIDE SETBACK
10' SIDE SETBACK
S22° 25' 53"E
225.36

0524-74-1085.000
GE J. CRAIG and Wife
DB 2309, PG 047
PB 2006, PG 554

40'

EX.



PROPOSED
28456
3BE
DMMH

2B

1.28 Acres

25'

10' SIDE SETBACK
N26° 21' 00"W
293.57

25' REAR SETBACK

212.25
S51° 57' 13"W

ERB

NAME: Dorinda Frederici

APPLICATION #: 165003

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.

Dorinda Frederici
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

8/2/16
DATE

SATISFACTION: The debt evidenced by this Note has been satisfied in full this

_____ day of _____, _____
Signed: _____

PROMISSORY NOTE

Spring Lake _____, N. C.
Date March 17 2016

\$ *****15,000.00

FOR VALUE RECEIVED the undersigned, jointly and severally, promise to pay to Arvin L. Johnson Edith B. Johnson

_____ or order,
the principal sum of --Fifteen Thousand and 00/100 -----

DOLLARS (\$ *****15,000.00), with interest from March 17, 2016 , at the rate of Six

per cent (6.000 %) per annum on the unpaid balance until paid or until default, both principal and interest payable in lawful money of the United States of America, at the office of Arvin L. Johnson Edith B. Johnson

7356 Colliers Chapel Church Rd, Linden, NC 28356

or at such place as the legal holder hereof may designate in writing. It is understood and agreed that additional amounts may be advanced by the holder hereof as provided in the instruments, if any, securing this Note and such advances will be added to the principal of this Note and will accrue interest at the above specified rate of interest from the date of advance until paid. The principal and interest shall be due and payable as follows:

In 60 successive monthly installments of \$289.99 each, commencing on May 1, 2016, and continuing on the 1st day of each and every month thereafter until all principal and interest has been fully paid, except that the final payment of all principal and interest, if not sooner paid, shall be due and payable on April 1, 2021.

Purchase Money Note

If not sooner paid, the entire remaining indebtedness shall be due and payable on April 1, 2021

If payable in installments, each such installment shall, unless otherwise provided, be applied first to payment of interest then accrued and due on the unpaid principal balance, with the remainder applied to the unpaid principal.

Unless otherwise provided, this Note may be prepaid in full or in part at any time without penalty or premium. Partial prepayments shall be applied to installments due in reverse order of their maturity.

In the event of (a) default in payment of any installment of principal or interest hereof as the same becomes due and such default is not cured within ten (10) days from the due date, or (b) default under the terms of any instrument securing this Note, and such default is not cured within fifteen (15) days after written notice to maker, then in either such event the holder may without further notice, declare the remainder of the principal sum, together with all interest accrued thereon and, the prepayment premium, if any, at once due and payable. Failure to exercise this option shall not constitute a waiver of the right to exercise the same at any other time. The unpaid principal of this Note and any part thereof, accrued interest and all other sums due under this Note and the Deed of Trust, if any, shall bear interest

at the rate of Six per cent (6.0000 %) per annum after default until paid.

All parties to this Note, including maker and any sureties, endorsers, or guarantors hereby waive protest, presentment, notice of dishonor, and notice of acceleration of maturity and agree to continue to remain bound for the payment of principal, interest and all other sums due under this Note and the Deed of Trust notwithstanding any change or changes by way of release, surrender, exchange, modification or substitution of any security for this Note or by way of any extension or extensions of time for the payment of principal and interest; and all such parties waive all and every kind of notice of such change or changes and agree that the same may be made without notice or consent of any of them.

Upon default the holder of this Note may employ an attorney to enforce the holder's rights and remedies and the maker, principal, surety, guarantor and endorsers of this Note hereby agree to pay to the holder reasonable attorneys fees not exceeding a sum equal to fifteen percent (15%) of the outstanding balance owing on said Note, plus all other reasonable expenses incurred by the holder in exercising any of the holder's rights and remedies upon default. The rights and remedies of the holder as provided in this Note and any instrument securing this Note shall be cumulative and may be pursued singly, successively, or together against the property described in the Deed of Trust or any other funds, property or security held by the holder for payment or security, in the sole discretion of the holder. The failure to exercise any such right or remedy shall not be a waiver or release of such rights or remedies or the right to exercise any of them at another time.

This Note is to be governed and construed in accordance with the laws of the State of North Carolina.

This Note is given As Evidence of Money Owed _____, and is secured by a

Deed of Trust

_____ which is a First lien upon the property therein described.

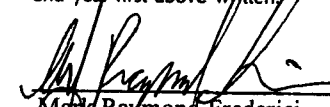
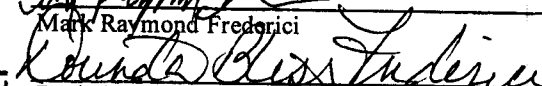
IN TESTIMONY WHEREOF, each corporate maker has caused this instrument to be executed in its corporate name by its _____ President, attested by its

_____ Secretary, and its corporate seal to be hereto affixed, all by order of its Board of Directors first duly given, the day and year first above written.

(Corporate Name)

By:

IN TESTIMONY WHEREOF, each individual maker has hereunto set his hand and adopted as his seal the word "SEAL" appearing beside his name, the day and year first above written.

 _____ (SEAL)
Mark Raymond Frederici
 _____ (SEAL)
Dorinda Bliss Frederici

3/22/17

Application # 39365

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: Mark Fredrick Address: 1232 Bethel Baptist Rd
City: Spring Lake State: NC Zip: _____ Daytime Phone: () 910 574-1226

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: James Freeman Mobil Home Movers
Phone: 336 215 1624 Address: _____
City: _____ State: _____ Zip: _____
State Lic# 2161 Email: _____

B. **Electrical Contractor** Company Name: Jonny Hardin Electric Service
Phone: 910 740-6694 Address: _____
City: _____ State: _____ Zip: _____
State Lic# 19728 Email: _____

C. **Mechanical Contractor** Company Name: Swain Electric Heat & Air Inc
Phone: _____ Address: _____
City: 336 685 9722 State: _____ Zip: _____
State Lic# 13074 Email: _____

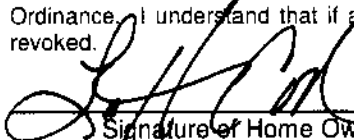
D. **Plumbing Contractor** Company Name: Adm Contractors Inc
Phone: 910 894 2191 Address: _____
City: _____ State: _____ Zip: _____
State Lic# 28648 Email: _____

Part III - Manufactured Home Information

Model Year: 2017 Size: 28 X 56 **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 of Home Owner or Agent

3/22/17
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: 11/01/2016

BUYER(S): Mark R Frederici

ADDRESS: 1232 Bethel Baptist Rd. Spring Lake NC 28390

DELIVERY ADDRESS: 1232 Bethel Baptist Rd. Spring Lake NC 28390

TELEPHONE: (910) 574-1812

SALES PERSON FULL NAME: Justin Emmons

BASE PRICE: \$ 115,329.70

State Tax 2,382.83
Local Tax _____

1. CASH PRICE \$ 117,712.53

Land Purchase _____
Land Payoff _____
Title Fees _____
Filing Fees 52.00
HPP/HBPP 747.94
HPP tax _____

TOTAL PACKAGE PRICE \$ 118,512.47

Trade Allowance 5,000.00
Less Amount Owed _____
Trade Equity _____
Cash Down Payment 500.00

3. LESS ALL CREDITS \$ 500.00

4. REMAINING BALANCE \$ 113,012.47

| Location | Type of Insulation | Thickness | R-Value |
|----------|--------------------|-----------|---------|
| Floors | batt | 7.32 | 22 |
| Exterior | batt | 3.66 | 11 |
| Ceilings | celulose | 10.98 | 33 |

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

Make: Rockwell Model: 57ROC28563AH17

Year _____ Length 56 Width 28 Stock# _____

Serial No. _____ New Used

TRADE: Make: SKYLINE Model: VICTORY SPECIAL

Year _____ Length _____ Width _____ Title # _____

Serial No. _____
Amount owed will be paid by: Buyer Seller
Owed to: _____

OPTIONS:

Split System Heat Pump

SELLER RESPONSIBILITIES:

Delivery and set up per county codes; includes plumbing and electric to existing systems within 9' of home, steps at all doors per county code, brick skirting not to exceed 36" average height, plastic vapor barrier.

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 \$ _____

SELLER:

CMH Homes, Inc. d/b/a - _____

BUYER:

Signature of: _____

Signature of: _____

Signature of: _____

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 16-50039365 Date 3/22/17
Property Address 1232 BETHEL BAPTIST RD
PARCEL NUMBER 01-0524- - -0034- -03-
Application type description CP MANUFACTURED HOME RA20R/RA20M CRITERI
Subdivision Name
Property Zoning PENDING

Owner

FREDERICI MARK R & DORINDA B
1232 BETHEL BAPTIST RD
SPRING LAKE NC 28390
(910) 497-2507

Contractor

FREEMAN MOBILE HOME MOVERS INC
9015 RACIN ROAD
PLEASANT GARDEN NC 27313
(336) 685-4140

Applicant

FREDERICI DORINDA
1232 BETHEL BAPTIST RD
SPRING LAKE NC 28390
(910) 574-1812

--- Structure Information 000 000 28X56 3 BR DWMH NO DECKS/PORCHES NOW
Flood Zone FLOOD ZONE X
Other struct info # BEDROOMS 3.00
MOBILE HOME YEAR 2016.00
PROPOSED USE DWMH
SEPTIC - EXISTING? EXISTING
WATER SUPPLY COUNTY

Permit MANUFACTURED HOME PERMIT

Additional desc
Phone Access Code 1183706
Issue Date 3/22/17 Valuation 0
Expiration Date 3/22/18

Permit LAND USE PERMIT

Additional desc
Phone Access Code 1183698
Issue Date 3/22/17 Valuation 0
Expiration Date 9/18/17

Special Notes and Comments

T/S: 08/02/2016 03:32 PM DJOHNSON --
210 TO BETHEL BAPTIST RD. HOME IS ON
THE RIGHT. WE ARE JUST BEHIND THE
FIRST ONE WITH ALL THE CARPORTS.
1232 BETHEL BAPTIST RD

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 | 16-50039365 | Page | 2 |
| Property Address | 1232 BETHEL BAPTIST RD | Date | 3/22/17 |
| PARCEL NUMBER | 01-0524- - -0034- -03- | | |
| 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 | _____ | ___/___/___ |