

Initial Application Date: 11-22-16

Application # 1050040221

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: Michael Dean Koerner ^{Koern} Mailing Address: 554 Victory Lane
City: Erwin State: NC Zip: 28339 Contact No: 910-658-7487 Email: lccamber752@gmail.com

APPLICANT: Greenfield Housing Center Mailing Address: 2117 US 70 E.,
City: Garner State: NC Zip: 27529 Contact No: 919-772-2220 Email: ken@gogreenfieldhomes.com
*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Ken McGee Phone # 919-795-3851

PROPERTY LOCATION: Subdivision: 544 Victory Lane (NO subdivision) Lot #: 2 Lot Size: 20,360
State Road # N/A State Road Name: Victory Lane (Private Rd.) Map Book & Page: 2510/290
Parcel: 120588 0200 04 PIN: 0555-90-885.2 000
Zoning: RA20R Flood Zone: NR Watershed: NO Deed Book & Page: 1177, 523 Power Company*: _____

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

PROPOSED USE:

- FD: (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 28 x 44) # 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: NO Manufactured Homes: NO Other (specify): N/A

Required Residential Property Line Setbacks:

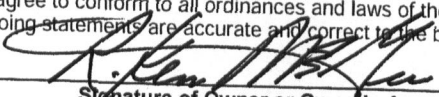
Front	Minimum _____	Actual <u>50'</u>
Rear	_____	<u>51'</u>
Closest Side	_____	<u>183'5"</u>
Sidestreet/corner lot	_____	_____
Nearest Building on same lot	_____	_____

Comments: _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:

Follow 401 S. Proceed 7.9 miles.
Turn Right on Byrds Pond Rd. Go 1.9 miles. Turn Left
On Victory Lane. 544 on left

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

11/11/2016
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: _____

APPLICATION #: 40221

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 # 019198-UB
11-22-16

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.

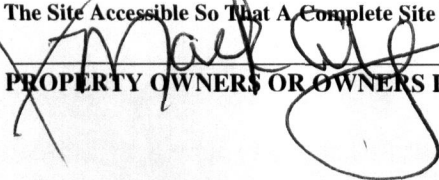
- Accepted Innovative Conventional Any
 Alternative Other _____

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**:

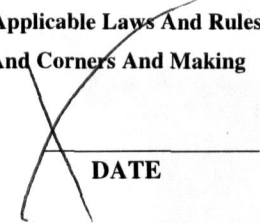
- YES NO Does the site contain any Jurisdictional Wetlands?
 YES NO Do you plan to have an irrigation system now or in the future?
 YES NO Does or will the building contain any drains? Please explain. _____
 YES NO Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
 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.

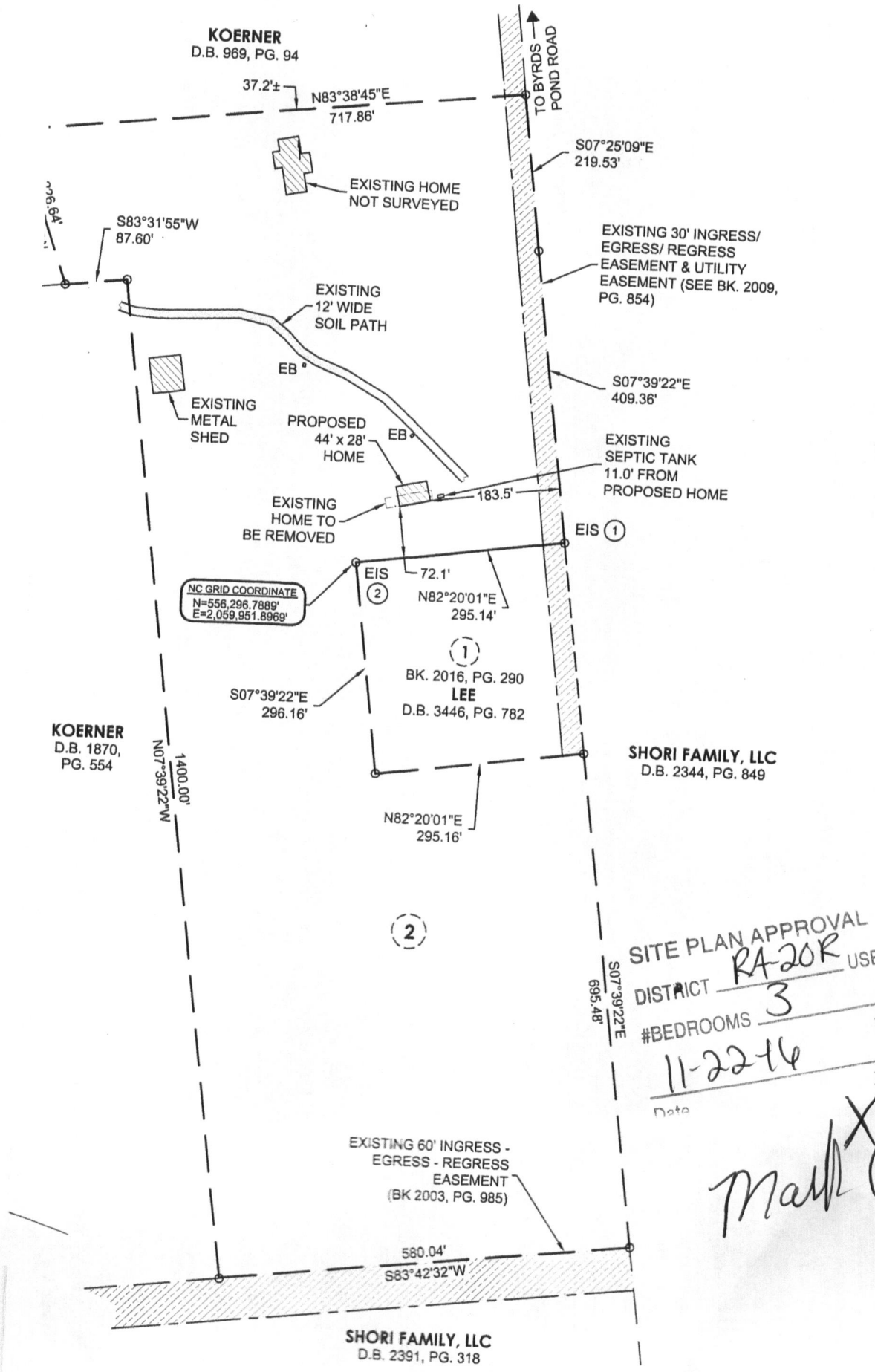
I Understand That I Am Solely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making The Site Accessible So That A Complete Site Evaluation Can Be Performed.



PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)



DATE



NC GRID COORDINATE
 N=556,296.7889'
 E=2,059,951.8969'

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MAP
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 2 RI
 2011
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CORNER	
CORNER #	
①	No 4 I GRAD
②	No 4 F GRAD

SITE PLAN APPROVAL
 DISTRICT RA-20R USE SFD
 #BEDROOMS 3
11-22-16
 Date
 Zoning Administrator
Max Gelfand

STEWART'S CRI
 200 100
 GRAPHIC SCAL

Application # _____
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: MAXINE WOOD Address: 544 VICTORY LANE

City: ERWIN State: NC Zip: 28339 Daytime Phone: (919) 772-6464

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

Name: MICHAEL DEAN KOERNER Address: 544 VICTORY LANE

City: ERWIN State: NC Zip: _____ Daytime Phone: 910 658-7487

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: JMSB SERVICES - MIKE BARBOUR

Phone: (919) 669-7043 Address: 105 ASPEN CIRCLE

City: CLAYTON State: NC Zip: 27502

State Lic# 32512 Email: _____

B. **Electrical Contractor** Company Name: SHOCKEY SERVICE CO, INC

Phone: (919) 710-1300 Address: 7713 FOX KNOLL DRIVE

City: FUQUAY VARINA State: NC Zip: 27526

State Lic# 24742 Email: _____

C. **Mechanical Contractor** Company Name: SHOCKEY SERVICE CO, INC

Phone: (919) 710-1300 Address: 7713 FOX KNOLL DRIVE

City: FUQUAY VARINA State: NC Zip: 27526

State Lic# 12730 Email: _____

D. **Plumbing Contractor** Company Name: PRIORITY PLUMBING

Phone: (919) 422-4935 Address: P.O. BOX 264

City: WILLOW SPRING State: NC Zip: 27592

State Lic# 18550 Email: _____

Part III - Manufactured Home Information

Model Year: 2016 Size: 44 X 28

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.

Mark Craft
Signature of Home Owner or Agent

21 NOV 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.

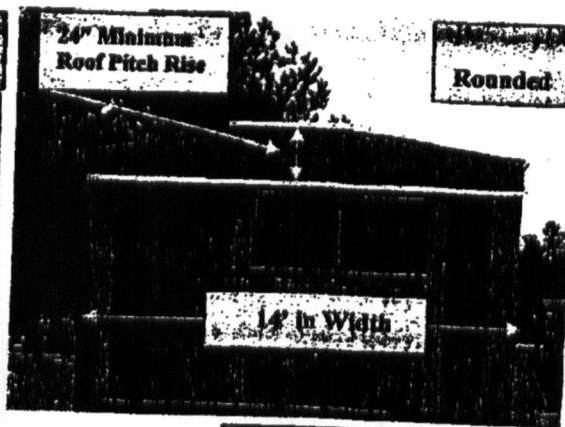
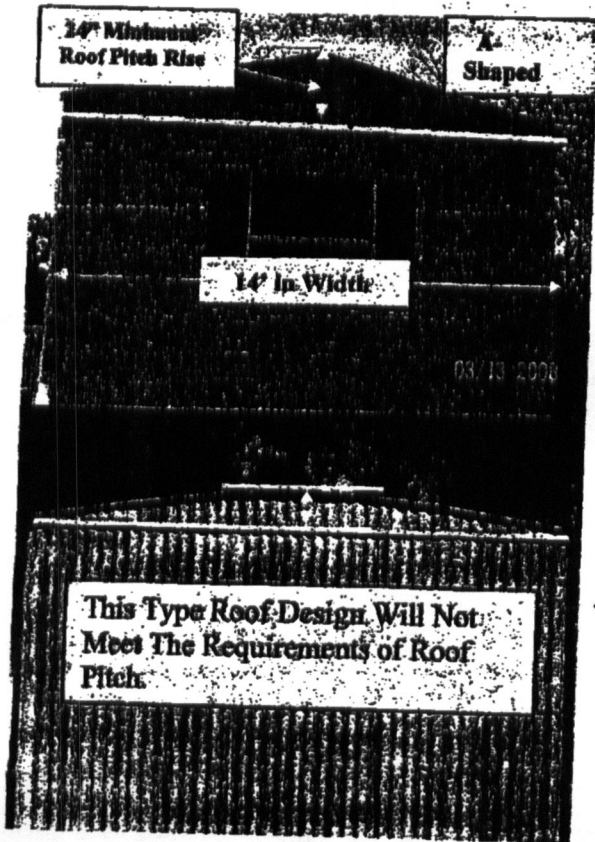
List of inspections and Egress requirements available upon request. Progress Energy customers must provide Premise Number.

PROCEDURES AND GUIDELINES FOR MANUFACTURED HOMES

Replacement & Removal Criteria

I, Robin Koerner, do hereby certify the following:
(Print Name)

1. That I own a tract of land located on SR Victory Lane (Private Rd.) 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 12/15/16 (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;
5. That there will be 1 manufactured home(s) on this single tract of land and I 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.



Signature of Property Owner

Date

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

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 556907

Filed on: 11/07/2016

Initially filed by:

Designated Lien Agent

Chicago Title Company, LLC

Online: www.liensnc.com (<mailto:support@liensnc.com>)

Address: 19 W. Hargett St., Suite 507 / Raleigh, NC 27601

Phone: 888-690-7384

Fax: 913-489-5231

Email: support@liensnc.com (<mailto:support@liensnc.com>)

Project Property

544 Victory Lane
Erwin, NC 28339
Harnett County

Property Type

1-2 Family Dwelling

Print & Post



Contractors:

Please post this notice on the Job Site.

Suppliers and Subcontractors:

Scan this image with your smart phone view this filing. You can then file a Notice to Lien Agent for this project.

Owner Information

Maxine B. Wood
544 Victory Lane
Erwin, NC 28339
United States

Email: patsy@gogreenfieldhomes.com

Phone: 919-772-2220

[View Comments \(0\)](#)

Technical Support Hotline: (888) 690-7384



Customer Bill



2 67

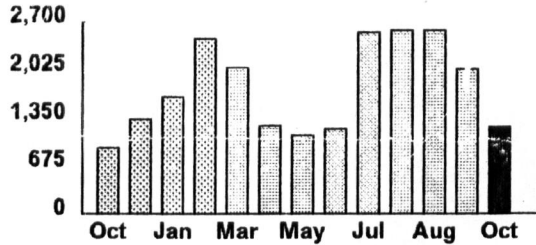
001571 000008976



MORGAN LEE
544 VICTORY LN
ERWIN NC 28339-9122

Account number	868 499 2319
Total due	\$138.86
Current charges past due after	Nov 28
Thank you for your payment	Oct 26 \$242.82
Usage period	Sep 30 - Oct 31
This bill was mailed on	November 1, 2016

kWh Usage History



Usage

Meter number	D54273
Readings: Oct 31	96809
Sep 30	-
kWh usage	1243
Days in period 31	Average kWh per day 40

Billing Residential Service rate

SWMH/8-13 VAC BRKR OFF - 31 Days	
Electric service	128.61
REPS Adjustment	1.17
7% North Carolina sales tax	9.08
Total due	\$138.86

This bill is subject to a 1% per month late payment charge after 11/28/2016.

For your information

Looking for a new home that's built to last and built to save? We help homebuyers find builders who build some of the most comfortable and energy-efficient new homes available. To find a participating builder near you, visit duke-energy.com/mynewhome.

To help us repair malfunctioning streetlights, quickly: 1. Call us at 1.800.452.2777 or visit duke-energy.com/streetlightrepair. 2. Provide us with the light's location and your contact information. 3. Specific addresses, landmarks and directions work best.

Please detach here.

Turn over for helpful phone numbers and customer service tips.

PIN: 837-013-694

Return portion

MORGAN LEE
544 VICTORY LN
ERWIN NC 28339-9122

Account number
868 499 2319

Total due	\$138.86
Current charges past due after	Nov 28

Make checks payable and return to:

Duke Energy Progress
PO BOX 1003
Charlotte NC 28201-1003

BP_BL_DEF_RBL_20161031_220406_1.CSV-1571-000008976

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