

Initial Application Date: 4.13.17 Replacement Application # 1750041148 CU# _____

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: Loretta K Anderson Mailing Address: 480 Archie ST
 City: Spring Lake State: NC Zip: 28390 Contact No: 540 922 2174 Email: _____

APPLICANT: Loretta Anderson Mailing Address: 480 Archie ST
 City: Spring Lake State: NC Zip: 28390 Contact No: 540 922 2174 Email: _____
 *Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Pauly Dent Phone # 919 796 6128

PROPERTY LOCATION: Subdivision: Anderson Creek Homes Lot #: 2 Lot Size: 1.46 AC
 State Road # 1156 State Road Name: Archie St Map Book & Page: 2017/115
 Parcel: 01.0515.0210 PIN: 0515.51.8271
 Zoning: R20R Flood Zone: X Watershed: NA Deed Book & Page: 049,508 Power Company*: _____

*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/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: X SW ___ DW ___ TW (Size 14 x 66) # 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: X County _____ Existing Well _____ New Well (# of dwellings using well _____) *Must have operable water before final
 Sewage Supply: _____ New Septic Tank (Complete Checklist) X 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 (X) no
 Does the property contain any easements whether underground or overhead () yes (X) no
 Structures (existing or proposed): Single family dwellings: _____ Manufactured Homes: X Other (specify): proposed

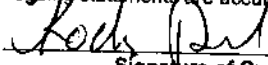
Required Residential Property Line Setbacks:

	Minimum	Actual
Front	<u>35'</u>	<u>92'</u>
Rear	<u>25'</u>	<u>94'</u>
Closest Side	<u>10'</u>	<u>61'</u>
Sidestreet/corner lot	<u>20'</u>	<u>—</u>
Nearest Building on same lot	<u>10'</u>	<u>—</u>

Comments: _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: # Take Hwy 210 towards
Spring Lake, Turn Rt on Overhills Rd. Turn
Rt onto Archie St. Lot is on the Right

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

4-12-17

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

LOT 70
M.B. 17, PG. 39

LOT 69
M.B. 17, PG. 39

LOT 97
M.B. 17, PG. 39

EVANS STREET 60'

EPK C/L INT.
PAVEMENT

N 73°16'39"E
62.09'

N 00°44'45"W 35.22'
A=39.08' R=25.00'

S.R. 1156
(ED ROAD)

TOTAL AREA
39,910 sq. ft.
(0.92 AC.)

LOT 99

LOT 98

SHED

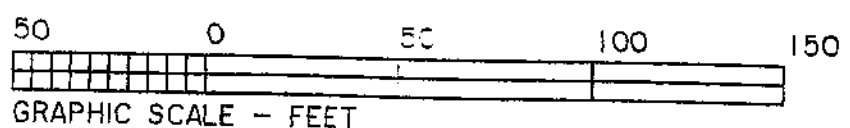
CONTROL CORNER
EXISTING
1 1/4" PINNAC

LOT 54
M.B. 17, PG. 39

CONTROL CORNER
EXISTING
1 1/4" PINNAC IRON

LOT 55
M.B. 17, PG. 39

Replacement
 SITE PLAN APPROVAL
 DISTRICT R20R USE SMNH
 #BEDROOMS 2
4.13.17 *djohnsm*
 ZONING ADMINISTRATOR



NAME: Loletta K Anderson

APPLICATION #: 41148

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 # 021624
4.13.17

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.

John R
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

4-12-17
DATE

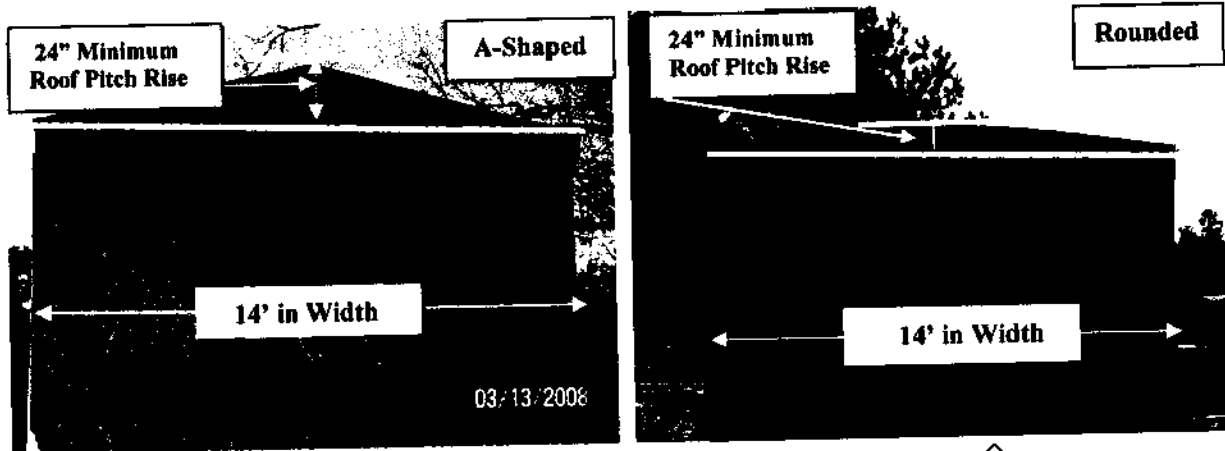
Date: 4-12-17

Application# 41148

PROCEDURES AND GUIDELINES FOR MANUFACTURED HOMES
Replacement & Removal Criteria

I, Rodney Duda, do hereby certify the following:
(Print Name)

1. That I own a tract of land located on SR _____ 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 4-24-17 (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/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. (Ex: 14' Wide Home = 24" Roof Rise)


Continued.....

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 home must have been constructed after July 1st 1976.
9. The homes moving apparatus removed, underpinned or landscaped.
10. 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 with 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

4-12-17
 Date

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

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: Loretta K Andersen Address: 480 Archie St
 City: Spring Lake State: NC Zip: 28390 Daytime Phone: (704) 972-2174
 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: Choo M H Transit
 Phone: 910 850 6572 Address: P.O. Box 35595
 City: Fayetteville State: NC Zip: 28303
 State Lic# 3532 Email: _____
- B. **Electrical Contractor** Company Name: _____
 Phone: _____ Address: Home Owner
 City: _____ State: _____ Zip: _____
 State Lic# _____ Email: _____
- C. **Mechanical Contractor** Company Name: _____
 Phone: _____ Address: Home Owner
 City: _____ State: _____ Zip: _____
 State Lic# _____ Email: _____
- D. **Plumbing Contractor** Company Name: Choo M H Transit
 Phone: 910 850 6572 Address: P.O. Box 35595
 City: Fayetteville State: NC Zip: 28303
 State Lic# 3532 Email: _____

Part III - Manufactured Home Information

Model Year: 2017 Size: 14 x 66 **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] _____ 4-12-17
 Signature of Home Owner or Agent 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.*

Choo Choo Homes
5657 Bragg Blvd.
Fayetteville, N.C. 28303

In this contract the words I, Me, and My refer to the Buyer and Co-Buyer signing this contract.
 The words You and Your refer to the Dealer.

name: Loretta K Anderson salesperson: rodney dent

840 archie st spring lake nc 28390 address: tele#7027520897

delivery address: 840 archie st spring lake nc 28390 date: 2-22-17

480

Make & Model: TRU	Bd Rooms: 2	Floor Size 14 x 60	Hitch Size 14 x 66	bath rms: 2
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Serial Number _____ Color: _____ year: 2017

Location	R-Value	Thickness	Insulation Type	BASE PRICE OF UNIT	25,100
CEILING			Cellulose	OPTIONAL EQUIPMENT	8,900
EXTERIOR			Fiberglass	LAND PURCHASE PRICE	n/a
FLOORS			Fiberglass	Tax	
				SUB TOTAL	34,000

This insulation information was furnished by the manufacturer and is disclosed per Federal Trade Commission Rule 16CRF, Sec 460.16

delivery & setup				TITLE FEE	
clear land (approx)			n/a	VARIOUS FEES & INSURANCES	
well & pump			n/a	1.CASH PURCHASE PRICE	34,000
septic system (approx)			n/a	Trade Allowance	
poured footers			n/a	Less Trade Bal.	
2 sets steps treated lumber			1,200	New Allowance	
electrical wiring & hookup (see below)			1,200	Cash Down	25100
plumbing & hookups to house (see below)			1,200	Closing Cost	
block & stucco foundation			n/a	2.Less Total Credits	
sew 20' grass & 6 shrubs			n/a	Sub-Total	8900
trimout interior & exterior			n/a	3. Unpaid balance remaining	8,900
grading			n/a		
dumpster & porta john			n/a		
HVAC SYSTEM see below			2,800		
engineer cert			n/a		
water tap			n/a		
sheerwall			n/a		
backfill			n/a		

I understand that I have the right to cancel this purchase prior to midnight of the third business day after the date that I have signed this agreement.
 5500+2500+4000+
 If I attempt to cancel the purchase after the three day period, I understand the dealer has no obligation to refund the entire amount of my deposit.

customer are responsible for all permits ie (zoning plumbing electrical and setup)
 Max plumbing and water hookup 20' from the home and not into the septic tank

CHoo Choo homes is not responsible for any tracks left in customers yard due to bring the home to be set
 Homes setup overheight because of the contour of Your Land may require an engineer letter.

Estimated Rate of Financing: _____
 Number of Years: _____
 Estimated Monthly Payments _____
 estimated payment t includes principal & interest
 This is our entire Agreement, there are no other representations, inducements, or other provisions other than those expressed here in.
 All changes, deletions, additions must be in writing and signed by both you and I.
 I, or we, acknowledge receipt of a copy of this order and that I, or we, have read and understand this agreement.
 I understand that the above allowance prices are only



CHOO-CHOO HOMES

5657 Bragg Blvd

Fayetteville, NC 28303

Phone: (910) 860-8787 Fax: (910) 860-1938

The undersigned Purchaser(s) has agreed to purchase from CHOO-CHOO Homes
_____ (the "Seller") the manufactured home described on page 1 (the "Home").
In that connection, Purchaser(s) submits herewith a (circle appropriate choice)

Modular Home Credit Application and/or Non-Refundable Deposit of \$ _____

Once the Home is delivered on the Purchaser(s) home site and/or the site the Purchaser(s) has specified the contract then becomes due in full. Failure to pay the contract can and will result in the Seller exercising it's right to collect the amount owed in full through legal action such as Judgments, Liens, and any means within their legal right.

Purchaser(s) acknowledges and agrees that any and all wheels, axles, and related apparatus and equipment used to transport the Home for delivery to Purchaser(s) are and shall remain at all times the sole property or manufacturer and are not sold to Purchaser(s).

Purchaser(s) represents to seller that, to the best of Purchaser's knowledge, the lot upon which the home is to be located _____ is is not located in a Special Flood Hazard Area as shown on maps prepared by the U.S. Department of Housing and Urban Development, or in a flood prone area, the cost to set up the Home upon delivery may exceed those provided for in this Contract or contemplated by all parties. Purchaser(s) hereby agrees to pay such excess cost in addition to all other amounts provided herein.

Purchaser(s) acknowledges and agrees that he/she is of statutory age or has been legally emancipated; that he/she is purchasing the insurance described on page 1 voluntarily; that the trade-in described on page 1, if any, is free from all claims, liens and embraces, except as noted; and that if any provision of this Agreement is unenforceable, the remaining provisions will be valid.

Not valid unless signed by an authorized representative of Seller.
Approval by Seller is subject to acceptance by a bank or finance Company, if applicable.

Initials:
JKE

Date:
2-22-17

(Seller) Choo-Choo Homes,
5657 Bragg Blvd,
Fayetteville, NC 28303
Agent: Ruby D

Purchaser(s) acknowledges receipt of a true copy of this Agreement and that he/she has read and understand its terms

Jessie K. Nease
Purchaser:
XXX-XX-7512

I UNDERSTAND THAT I HAVE THE RIGHT TO CANCEL THIS PURCHASE BEFORE MIDNIGHT ON THE THIRD BUSINESS DAY AFTER THE DATE THAT I HAVE SIGNED THIS AGREEMENT. I UNDERSTAND THAT THIS CANCELLATION MUST BE WRITTEN. IF I CANCEL THIS PURCHASE AFTER THE THREE-DAY PERIOD, I UNDERSTAND THAT THE DEALER MAY NOT HAVE ANY OBLIGATION TO GIVE ME BACK THE MONEY