

Initial Application Date: 5/24/17

Application # 17-500 41470

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: Isienora Bandy Mailing Address: PO Box 223, Lakeview NC 28355  
City: Carthage State: NC Zip: 28327 Contact No: 919 368 1913 Email: \_\_\_\_\_

APPLICANT: Isienora Bandy Mailing Address: PO Box 223  
City: Lakeview State: NC Zip: 28355 Contact No: 919 368 1913 Email: \_\_\_\_\_

\*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: \_\_\_\_\_ Phone # \_\_\_\_\_

PROPERTY LOCATION: Subdivision: \_\_\_\_\_ Lot #: 7 Lot Size: 1.06

State Road # 1107 State Road Name: 820 Cypress Church Rd Map Book & Page: 98 / 374

Parcel: 099554 0033 02 PIN: 9554-12-6421.000

Zoning: RA-20R Flood Zone: X Watershed: G15 Deed Book & Page: 3465 / 531 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: \_\_\_\_\_ SW  DW \_\_\_\_\_ TW (Size 32 x 56) # Bedrooms: 3 Garage: \_\_\_\_\_ (site built? \_\_\_\_\_) Deck: \_\_\_\_\_ (site built? \_\_\_\_\_) *future deck*

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: proposed Other (specify): existing shed

**Required Residential Property Line Setbacks:**

|                              | Minimum   | Actual     |
|------------------------------|-----------|------------|
| Front                        | <u>35</u> | <u>146</u> |
| Rear                         | <u>25</u> | <u>121</u> |
| Closest Side                 | <u>10</u> | <u>46</u>  |
| Sidestreet/corner lot        | _____     | _____      |
| Nearest Building on same lot | <u>10</u> | _____      |

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

07/17/07-51

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: Turn Left onto E Front St Turn Rt onto S main st Turn left onto NC 24 E/NC - 275. Slight left onto Hillman Grove Rd. Turn Rt ont Cypress ch. Rd. Pass hidden lake side on left 820' is on the Rt side.

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.

Jessica Bandy  
Signature of Owner or Owner's Agent

5-24-2017  
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: Isienora Bandy

APPLICATION #: 17-50041470

**\*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 # BP 5/24/17 022223

**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. water/septic  
 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.

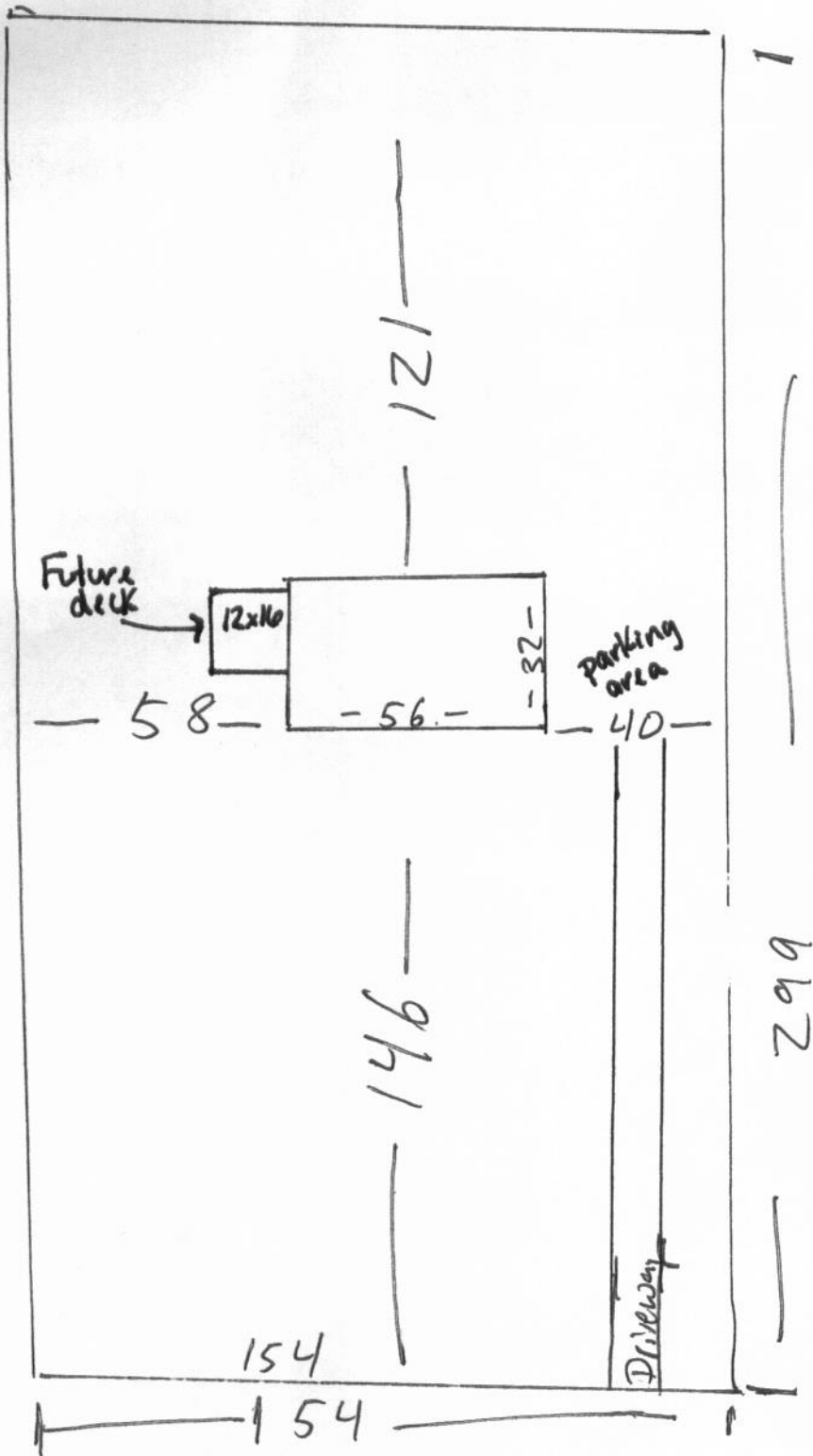
**I Have Read This Application And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And State Officials Are Granted Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules.**

**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.**

Isienora Bandy  
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

5-24-2017  
DATE

820 Cypress Ch Rd  
Cameron NC



20 ft  
SCALE

SITE PLAN APPROVAL  
DISTRICT RA-202 USE DWMT  
#BEDROOMS 3  
BP 5/24/17  
ZONING ADMINISTRATOR

X Isenore Sandy

Date: 5-24-2007

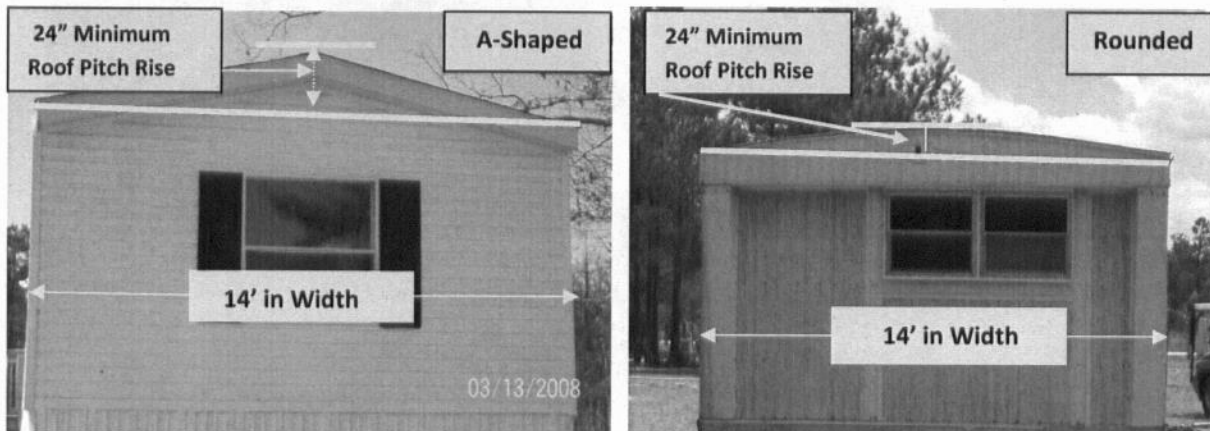
Application# \_\_\_\_\_

## PROCEDURES AND GUIDELINES FOR MANUFACTURED HOME INSPECTIONS

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

I, Isienora Bandy, 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.

José Norberto Bandy

Signature of Property Owner / Agent

5-24, 17

Date

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



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: ACJ

Date: 4-19-17

(Seller) Choo-Choo Homes  
5657 Bragg Blvd  
Fayetteville, NC 28303  
Agent: Kevin Lee

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

[Signature]  
Purchaser:  
XXX-XX-3499  
Social Security Number

Purchaser:  
\_\_\_\_\_  
Social Security Number

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 THAT I PAID THE DEALER.





FOR REGISTRATION  
Kimberly S. Hargrove  
REGISTER OF DEEDS  
Harnett County, NC  
2018 DEC 19 03:40:33 PM  
BK:3465 PG:531-532  
FEE:\$26.00  
EXCISE TAX:\$18.00  
INSTRUMENT # 2016018224  
TJHESTER

HARNETT COUNTY TAX ID#

09 9554 0033 02



12-19-16 BY [Signature]

# North Carolina General Warranty Deed

Excise Tax 18.00

Do NOT write above this line.

Recording: Time, Book and Page

This instrument prepared by: Clyde L. Patterson  
Brief description for the Index Lot 7, containing 1.06 acres  
This Deed made this 15th day of May, 20 16, by and between Grantor and Grantee:

Enter in appropriate block for each party: Name, address, county, state and if appropriate entity (i.e. corporation, partnership). The designation Grantor and Grantee as used herein shall include all parties, their heirs, successors and assigns and shall include singular, plural, masculine, feminine or neuter as required by context.

Grantor: Clyde L. Patterson, Unmarried  
4271 Leaflet Church Road  
Broadway, NC 27505

Grantee: Isienora L. Bandy  
P. O. Box 223  
Lakeview, NC 28350

**Transfer of Ownership:** Grantor, for a valuable consideration paid by Grantee, the receipt of which is hereby acknowledged, conveys to Grantee in fee simple, the Property described below:

Property: City of \_\_\_\_\_  
Township of Johnsonville, County of Harnett, North Carolina.  
This property was acquired by Grantor by an instrument recorded in Book 2525, Page 54-56, Harnett County.  
A map showing the property is recorded in Plat Book 98, Page 374, Harnett County.  
The legal description of the Property is:

This conveyance does not include the primary residence of the grantor herein.

Being all of Lot No. 7, containing 1.06 acres, as shown on the map entitled "Survey for Barry James Patterson, James H. Graham and wife, Julie S. Graham, Johnsonville Township, Harnett County, NC", dated 11/4/97 and updated 2/17/98 and 8/27/98 by Michael A. Cain, RLS #L-3403 which map is recorded at Map Number 98-374, Harnett County Registry.

This is a purchase money deed.

Continued on Page 2

After recording mail to:  
Isienora L. Bandy  
P. O. Box 223  
Lakeview, NC 28350

Tax Lot No. \_\_\_\_\_  
Parcel Identifier No. 09-9554-0033-02  
Verified By \_\_\_\_\_ County,  
on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
By \_\_\_\_\_

Continued from Page 1

TO HAVE AND TO HOLD the said Property and all privileges and appurtenances (rights) belonging to Grantee, in fee simple.

Promises by Grantor: Grantor promises (covenants) with Grantee, that Grantor has title to the Property in fee simple; has the right to convey the title in fee simple; that the title is marketable and free and clear of all liens and encumbrances (i.e. mortgages and judgements), and Grantor will warrant and defend the title against the lawful claims of all persons, except for the following exceptions:

Restrictions of record.

Signatures: Grantor has duly executed the foregoing instrument, as of the day and year first written above.

Entity \_\_\_\_\_ Individual \_\_\_\_\_

Name: \_\_\_\_\_ Clyde L. Patterson (Seal)

By: \_\_\_\_\_ Clyde L. Patterson (Seal)

Title: \_\_\_\_\_ (Seal)

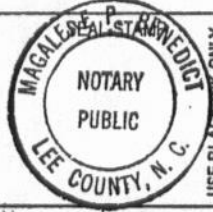
By: \_\_\_\_\_ (Seal)

Title: \_\_\_\_\_ (Seal)

By: \_\_\_\_\_ (Seal)

Title: \_\_\_\_\_ (Seal)

USE BLACK INK ONLY

SEAL-STAMP 

INDIVIDUAL

STATE OF North Carolina COUNTY OF Lee

I, Magalene P. Benedict, a Notary Public for said County and State, do hereby certify that Clyde L. Patterson, Unmarried

Grantor, personally came before me this day and acknowledged the due execution of the foregoing instrument.

Witness my hand and official stamp or seal, this 19<sup>th</sup> day of May, 2016

My Commission Expires: 11-15-16 Magalene P. Benedict Notary Public

SEAL-STAMP \_\_\_\_\_

INDIVIDUAL

STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_

I, \_\_\_\_\_, a Notary Public for said County and State, do hereby certify that \_\_\_\_\_

Grantor, personally came before me this day and acknowledged the due execution of the foregoing instrument.

Witness my hand and official stamp or seal, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

My Commission Expires: \_\_\_\_\_ Notary Public

SEAL-STAMP \_\_\_\_\_

ENTITY: Corporation, Limited Liability Company, General Partnership, or Limited Partnership

STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_

I, \_\_\_\_\_, a Notary Public of the County and State aforesaid, certify that \_\_\_\_\_ personally came before me this day and acknowledged that he is \_\_\_\_\_ of \_\_\_\_\_ a North Carolina or \_\_\_\_\_ corporation / limited liability company / general partnership / limited partnership (strike through the inapplicable) and that by authority duly given and as an act of the Entity, has signed the foregoing instrument in its name and on its behalf as its act and deed.

Witness my hand and official stamp or seal, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

My Commission Expires: \_\_\_\_\_ Notary Public

The foregoing Certificate(s) of Magalene P. Benedict

is/are certified to be correct. This instrument and this certificate are duly registered at the date and time and in the Book and Page shown on the first page hereof.

\_\_\_\_\_- REGISTER OF DEEDS FOR Harnett COUNTY

By \_\_\_\_\_ Deputy/Assistant - Register of Deeds