

Initial Application Date: 5/30/18

Application # 18-50044133

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: Clyde L Patterson Mailing Address: 4271 Leaflet Ln Rd
City: Broadway State: NC Zip: 27505 Contact No: 919-258-5538 Email: _____

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

CONTACT NAME APPLYING IN OFFICE: _____ Phone # _____

PROPERTY LOCATION: Subdivision: Elnora Mclean Lot #: 4 Lot Size: .89
State Road # 1212 State Road Name: Jesse Road Map Book & Page: 2005/1035
Parcel: 039598 0046 03 PIN: 9598-56-1828.000
Zoning: RA20R Flood Zone: X Watershed: No Deed Book & Page: 3513, 493 (GIS is wrong) 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 14 x 70) # 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: Other (specify): _____

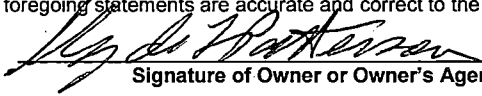
Required Residential Property Line Setbacks:

Front	Minimum	<u>35</u>	Actual	<u>45</u>
Rear		<u>25</u>		<u>25 +</u>
Closest Side		<u>10</u>		<u>45</u>
Sidestreet/corner lot				
Nearest Building on same lot				

Comments: _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 84 Sturdy Lane Broadway 27505

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

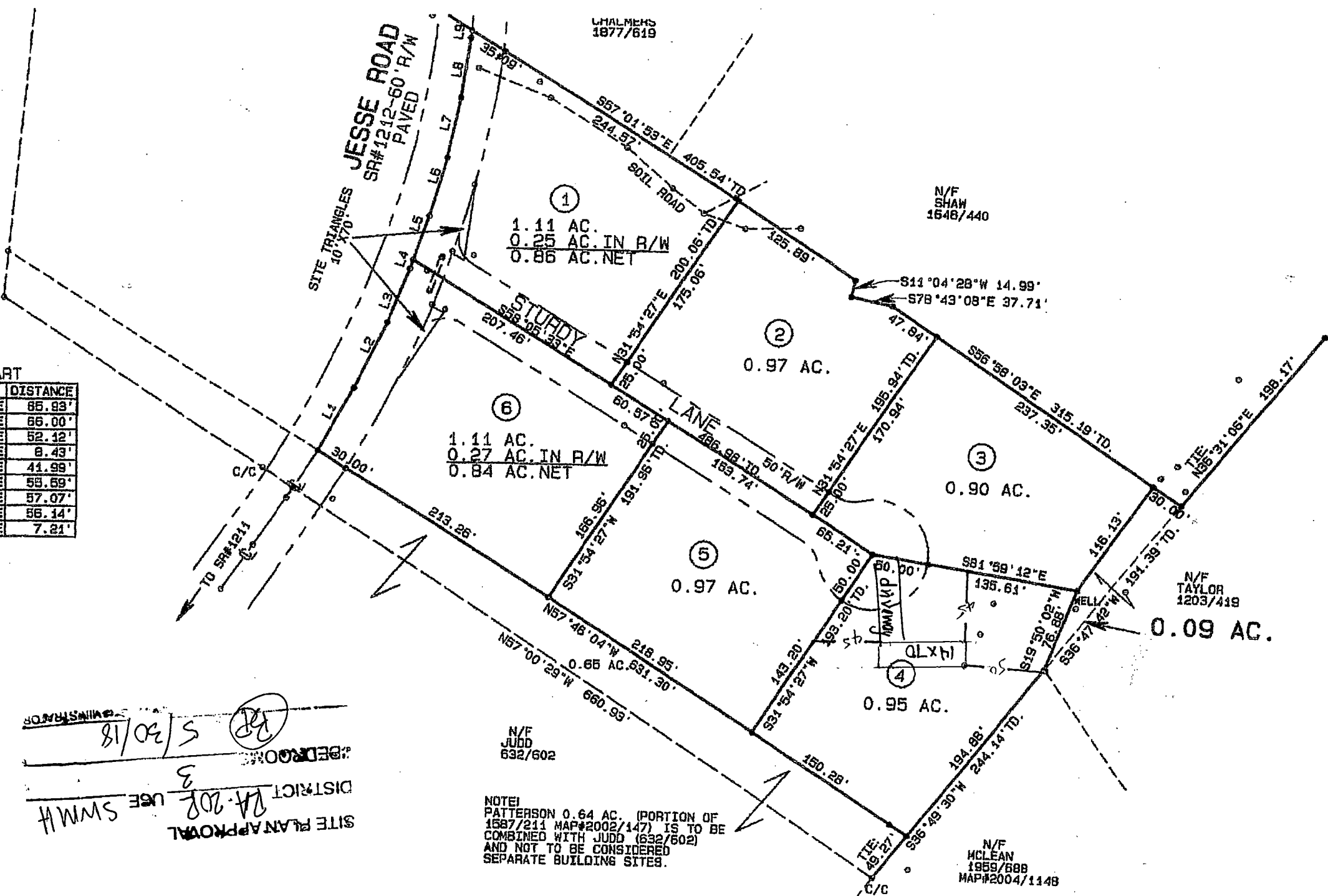
5/30/18
Date

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

LINE CHART

BEARING	DISTANCE
28°03'18"E	85.93'
24°32'53"E	66.00'
20°56'01"E	52.12'
18°23'12"E	8.43'
18°23'12"E	41.99'
15°18'53"E	58.59'
11°08'11"E	57.07'
07°41'09"E	56.14'
05°41'09"E	7.21'



SITE PLAN APPROVAL
 DISTRICT USE SWM# 3
 24.208
 5/30/18
 BEDROOMS
 3
 8/10/18

NOTE:
 PATTERSON 0.64 AC. (PORTION OF
 1687/211 MAP#2002/147) IS TO BE
 COMBINED WITH JUDD (632/602)
 AND NOT TO BE CONSIDERED
 SEPARATE BUILDING SITES.

N/F
 MCLEAN
 1959/688
 MAP#2004/1148

NAME: _____

APPLICATION #: 18-50044133

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 5/30 027925

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? water tap

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.

[Signature]
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

5/30/18
DATE

Date: 5/30/18

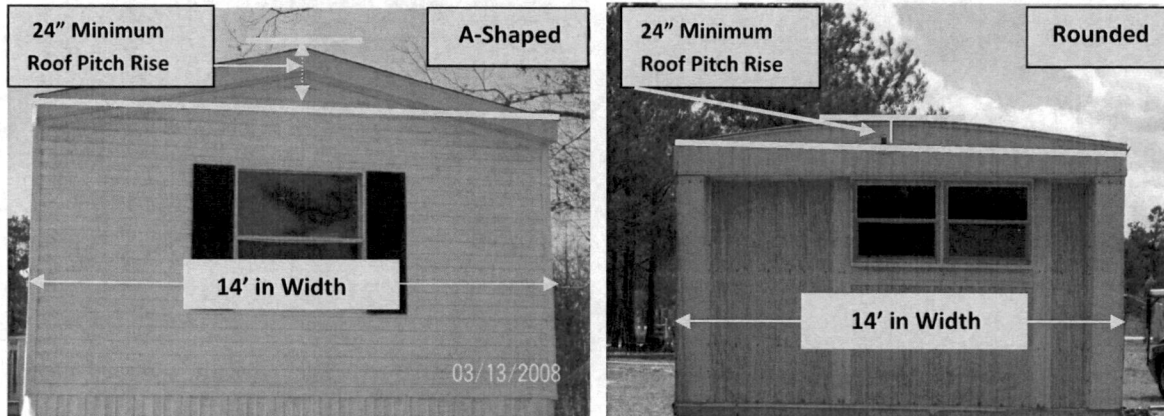
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PROCEDURES AND GUIDELINES FOR MANUFACTURED HOME INSPECTIONS

RA-20R & RA- 20M Certification Criteria

I, _____, 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.....

3817-002-3

2/1/12

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 1st 1976.

Allyd Patterson

Signature of Property Owner / Agent

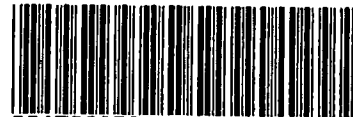
5/30/18

Date

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

FOR REGISTRATION
Kimberly S. Hargrove
REGISTER OF DEEDS
Harnett County, NC
2017 JUN 13 01:01:27 PM
BK:3513 PG:493-494
FEE:\$26.00
INSTRUMENT # 2017008568

TWESTER



2017008568

HARNETT COUNTY TAX ID#

03-9598-0046-03
03-9598-0046-03

03-9598-0046-03

NORTH CAROLINA GENERAL WARRANTY DEED

Excise Tax: -0-

Parcel Identifier No. 039598 0046 02&03 Verified by _____ County on the _____ day of _____, 20____
By: _____

Mail/Box to: REGINALD B. KELLY, PO BOX 1118, LILLINGTON, NC 27546

This instrument was prepared by: REGINALD B. KELLY, 900 S MAIN STREET, LILLINGTON, NC 27546

Brief description for the Index: _____

THIS DEED made this 19th day of May, 2017, by and between

GRANTOR

GRANTEE

Venus M. Cockman, unmarried
79 Sturdy Lane
Broadway, NC 27505

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

Enter in appropriate block for each Grantor and Grantee: name, mailing address, and, if appropriate, character of entity, e.g. corporation or partnership.

The designation Grantor and Grantee as used herein shall include said parties, their heirs, successors, and assigns, and shall include singular, plural, masculine, feminine or neuter as required by context.

WITNESSETH, that the Grantor, for a valuable consideration paid by the Grantee, the receipt of which is hereby acknowledged, has and by these presents does grant, bargain, sell and convey unto the Grantee in fee simple, all that certain lot, parcel of land or condominium unit situated in the City of Broadway, Barbecue Township, Harnett County, North Carolina and more particularly described as follows:

Being all of Lot #3, containing 0.90 acres and Lot#4 containing 0.95 acres, more or less, as shown on a map entitled "Elnora McLean Subdivision", dated November 30, 2005, prepared by Dowell G. Eakes, PLS, recorded in the Office of the Register of Deeds of Harnett County at Map Number 2005-1035. Reference to said map is hereby made for a greater certainty of description.

The property hereinabove described was acquired by Grantor by instrument recorded in Book _____ page _____
All or a portion of the property herein conveyed includes or _____ does not include the primary residence of a Grantor.

A map showing the above described property is recorded in Plat Book _____ page _____

TO HAVE AND TO HOLD the aforesaid lot or parcel of land and all privileges and appurtenances thereto belonging to the Grantee in fee simple.

And the Grantor covenants with the Grantee, that Grantor is seized of the premises in fee simple, has the right to convey the same in fee simple, that title is marketable and free and clear of all encumbrances, and that Grantor will warrant and defend the title against the lawful claims of all persons whomsoever, other than the following exceptions:

IN WITNESS WHEREOF, the Grantor has duly executed the foregoing as of the day and year first above written,

By: _____ (Entity Name) Venus M. Cockman (SEAL)
 Print/Type Name: Venus M. Cockman

By: _____ (SEAL)
 Print/Type Name & Title: _____
 Print/Type Name: _____

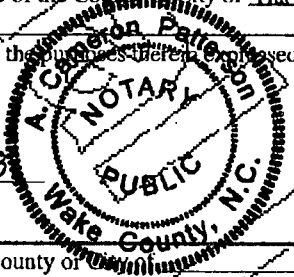
By: _____ (SEAL)
 Print/Type Name & Title: _____
 Print/Type Name: _____

By: _____ (SEAL)
 Print/Type Name & Title: _____
 Print/Type Name: _____

State of North Carolina - County or City of Harnett

I, the undersigned Notary Public of the County or City of Harnett and State aforesaid, certify that Venus M. Cockman personally appeared before me this day and acknowledged the due execution of the foregoing instrument for the purposes therein expressed. Witness my hand and Notarial stamp or seal this 9th day of June, 2017.

My Commission Expires: 12/18/18 (Affix Seal) A. Cameron Patterson Notary Public
Notary's Printed or Typed Name



State of _____ - County or City of _____

I, the undersigned Notary Public of the County or City of _____ and State aforesaid, certify that _____ personally appeared before me this day and acknowledged the due execution of the foregoing instrument for the purposes therein expressed. Witness my hand and Notarial stamp or seal this _____ day of _____, 20____.

My Commission Expires: _____ (Affix Seal) _____ Notary Public
Notary's Printed or Typed Name

State of _____ - County or City of _____

I, the undersigned Notary Public of the County or City of _____ and State aforesaid, certify that _____ personally came before me this day and acknowledged that _____ he is the _____ 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 the act of such entity, _____ he signed the foregoing instrument in its name on its behalf as its act and deed. Witness my hand and Notarial stamp or seal, this _____ day of _____, 20____.

My Commission Expires: _____ (Affix Seal) _____ Notary Public
Notary's Printed or Typed Name

