

Initial Application Date: 11-18-09 SCANNED 11-19-09 DATE Application # 0950023297 CU# 1

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION
Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 Fax: (910) 893-2793 www.harnett.org/permits

LANDOWNER: Clinton Allen Douglas Mailing Address: 7115 OC Hester Rd Holly Springs
City: Holly Springs State: NC Zip: 27540 Home #: 919-552-5779 Contact #:

APPLICANT: Suzanne D Howard, Trustee Mailing Address: 7135 OC Hester Rd
City: Holly Springs State: NC Zip: 27540 Home #: 919-567-0944 Contact #: 919-812-3193

CONTACT NAME APPLYING IN OFFICE: Suzanne D Howard Phone #: 919-567-0944 or 919-812-3193

PROPERTY LOCATION: Subdivision w/phase or section: John Douglas Piv Lot #: 3 Lot Acreage: 0.71
State Road #: 1410 State Road Name: OC Hester Rd Map Book & Page: 200, 419
Parcel: 05 0645 02 08 02 PIN: 0646-20-2582, 000
Zoning: RA 30 Flood Zone: X Watershed: N/A Deed Book & Page: 2687, 676 Power Company*: UK

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

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: go 401 North to Franny Varinae Road left on 42 West about 4 miles turn Right onto OC Hester Rd just before getting to Duncan Junction store - will be 3rd house on left - 7115 OC Hester Rd is address

PROPOSED USE: Circle:
 SFD (Size ___ x ___) # Bedrooms ___ # Baths ___ Basement (w/wo bath) ___ Garage ___ Deck ___ Crawl Space / Slab
(Is the bonus room finished? ___ w/ a closet ___ if so add in with # bedrooms)
 Mod (Size ___ x ___) # Bedrooms ___ # Baths ___ Basement (w/wo bath) ___ Garage ___ Site Built Deck ___ ON Frame / OFF
(Is the second floor finished? ___ Any other site built additions? ___)
 ~~Manufactured Home~~ (Size 44' x 26') # Bedrooms 3 Garage 1 (site built? ___) Deck 4x6 (site built? yes)
 Duplex (Size ___ x ___) No. Buildings ___ No. Bedrooms/Unit ___
 Home Occupation # Rooms ___ Use ___ Hours of Operation: ___ #Employees ___
 Addition/Accessory/Other (Size ___ x ___) Use ___ Closets in addition (___)yes (___)no

Water Supply: (___) County (___) Well (No. dwellings ___) MUST have operable water before final
Sewage Supply: (___) New Septic Tank (Complete Checklist) (___) Existing Septic Tank (Complete Checklist) (___) County Sewer
Property owner of this tract of land own land that contains a manufactured home w/in five hundred feet (500') of tract listed above? (___)YES (___)NO

Structures (existing & proposed): Stick Built/Modular ___ Manufactured Homes PWMH Other (specify) ___
Required Residential Property Line Setbacks: Comments: Existing SWNT updating to DWMH New Tanks. DWMH W-W be over Existing Tank

Front Minimum 35 Actual 36
Rear 25 221
Closest Side 10 41' 3"
Sidestreet/corner lot ___
Nearest Building on same lot ___

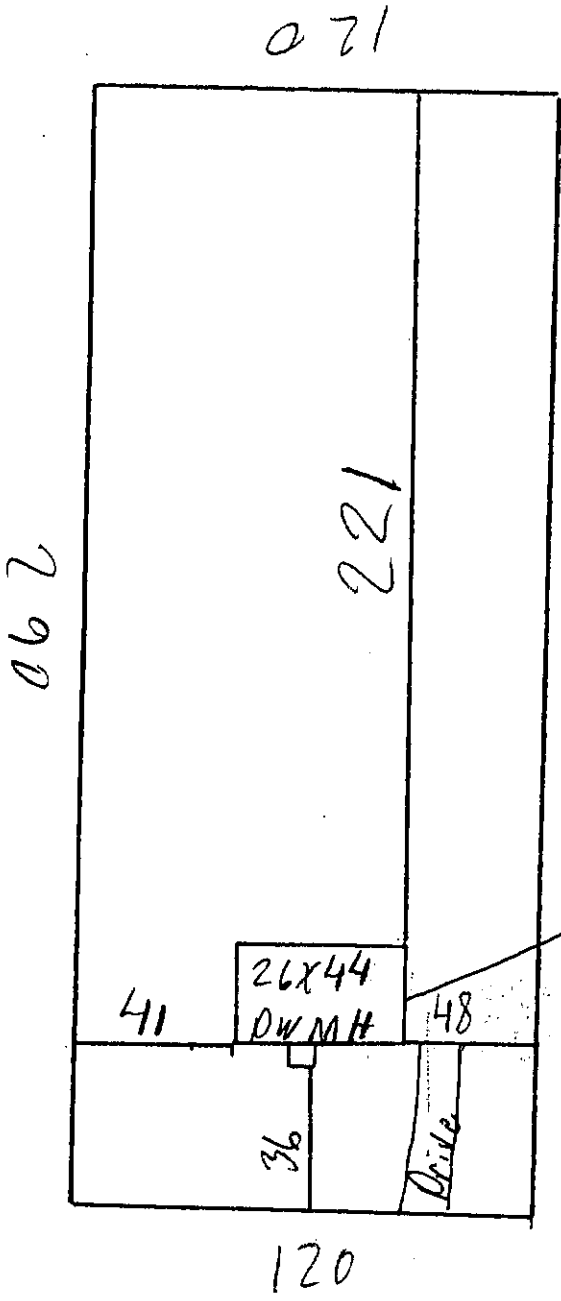
If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted. I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

Suzanne D Howard, TTEE 11-18-09
Signature of Owner or Owner's Agent Date

This application expires 6 months from the initial date if no permits have been issued

A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION

Please use Blue or Black Ink ONLY



SITE PLAN APPROVAL
 DISTRICT RA 30 USE 26x44 DWMH
 #BEDROOMS 3
11-18-09 V. C. [Signature]
 Zoning Administrator

Water Line
 Existing well
 Date

[Signature] Suzanne Ottward, TEE

1 = 50

SR # 06 Hester Rd

09 500 23297

NAME: _____

APPLICATION #: _____

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 # 104601

Environmental Health New Septic System Code 800

- 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.**
- Call No Cuts to locate utility lines prior to scheduling inspection. 800-632-4949 (This is a free service)
- 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 door as diagram indicates. Loosen trap door cover. (Unless inspection is for a septic tank in a mobile home park)
- After preparing trapdoor 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.

Suzanne O Howard, TTEE
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

11-18-09
DATE

PROCEDURES AND GUIDELINES FOR MANUFACTURED HOME INSPECTIONS

RA-30 Criteria Certification

1. Clinton Allen Douglas
Suzanne D Howard, TTEE, landowner of Parcel Identification Number
05 0645 0208 02, located in an RA-30 Zoning District, do hereby certify the following:

The multi-section manufactured home shall meet the following appearance standards prior to the issuance of a Certificate of Occupancy:

1. The structure must be a multi-section unit built to the HUD code for manufactured homes.
2. When located on the site, the longest axis of the unit must be parallel to the lot frontage.
3. The structure must have a pitched roof which is covered with shingles.
4. The structure must have masonry underpinning that is continuous, permanent and unpierced except for ventilation and access.
5. The exterior siding must be horizontal lap siding consisting predominantly of vinyl, aluminum, wood or hardboard.
6. The minimum lot size must be one (1) acre excluding any street right-of-way and the minimum lot frontage must be 150 feet as measured at the right-of-way line or along an easement whichever applies.
7. The tongue or towing device must be removed.

By signing this form, I acknowledge that I understand and agree to comply with each of the seven (7) appearance criteria listed above for the multi-section manufactured home I propose to place on the above referenced property. I further acknowledge that a Certificate of Occupancy (CO) entitling me to apply for electric service will not be issued until each appearance criteria has been met and approved.

Suzanne D Howard, TTEE
Signature of Landowner/Agent

11-18-09
Date

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

~~Harnett County, North Carolina~~

~~I, _____, Notary Public for said state and county do hereby certify that _____ personally appeared before me and acknowledged the foregoing instrument.~~

~~This is the _____ day of _____,~~

~~_____
Notary Public~~

~~My commission expires _____~~



FOR REGISTRATION REGISTER OF DEEDS
HARRNETT COUNTY, NC
2009 NOV 09 02:39:25 PM
BK: 2687 PG: 696-697 FEE: \$19.00

INSTRUMENT # 2009017139

HARNETT COUNTY TAX ID#

FD50645 0208-02*

11/9/09 BY MJ

PREPARED BY WITHOUT TITLE EXAMINATION OR CLOSING:

Senter, Stephenson, Johnson, P.A.
P.O. Box 446
Fuquay-Varina, NC 27526

Excise Tax: \$ 0

NORTH CAROLINA

QUIT CLAIM DEED

HARNETT COUNTY

This deed, made this 9th day of November, 2009, by Suzanne D. Howard of Harnett County, North Carolina, an unmarried individual ("Grantor") to The John Douglas Trust under the will dated December 18th, 2003 for the benefit of Clinton Allen Douglas, of Harnett County, North Carolina ("Grantee"), whose address is 7135 O. C. Hester Road, Holly Springs, NC 27540

WITNESSETH:

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

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, quitclaim and convey unto the grantee in fee simple, all that certain lot or parcel of land situated in Buckhorn Township, Harnett County, NC and more particularly described as follows:

Being all of that certain parcel of land shown as Area D on the map entitled "Lot Recombination, John Douglas Heirs" prepared by Stancell & Associates, Professional Land Surveyor, P.A. dated November 9th, 2009 and recorded at Book of Maps 2009, Page 773, Harnett County Registry which area is being recombined with Lot 3 as shown on said map for a newly recombined area consisting of 1.102 acres total (0.102 acres road r/w) reference to which is hereby made for greater certainty of description

TO HAVE AND TO HOLD the aforesaid lot or parcel of land and all privileges and appurtenances thereto belonging to the grantee, free and clear of any claim by the grantor.

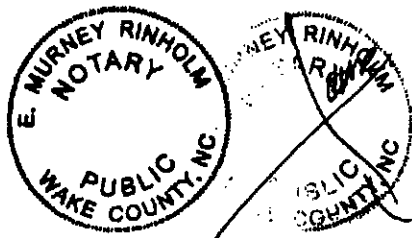
IN WITNESS WHEREOF, the grantor has hereunto set his hand and seal the day and year first above set forth.

Suzanne D. Howard (SEAL)
Suzanne D. Howard, individual

STATE OF NORTH CAROLINA
COUNTY OF WAKE

I, the undersigned Notary Public in and for the county and state aforesaid, do hereby certify that Suzanne D. Howard, individual, personally appeared before me this day and acknowledged the due execution of the foregoing document for the purposes therein expressed.

Witness my hand and official seal this the 9th day of November, 2009



E. Murney Rinholm
Notary Public
Name of Notary: E. Murney Rinholm
My Commission Expires: 3-28-2012