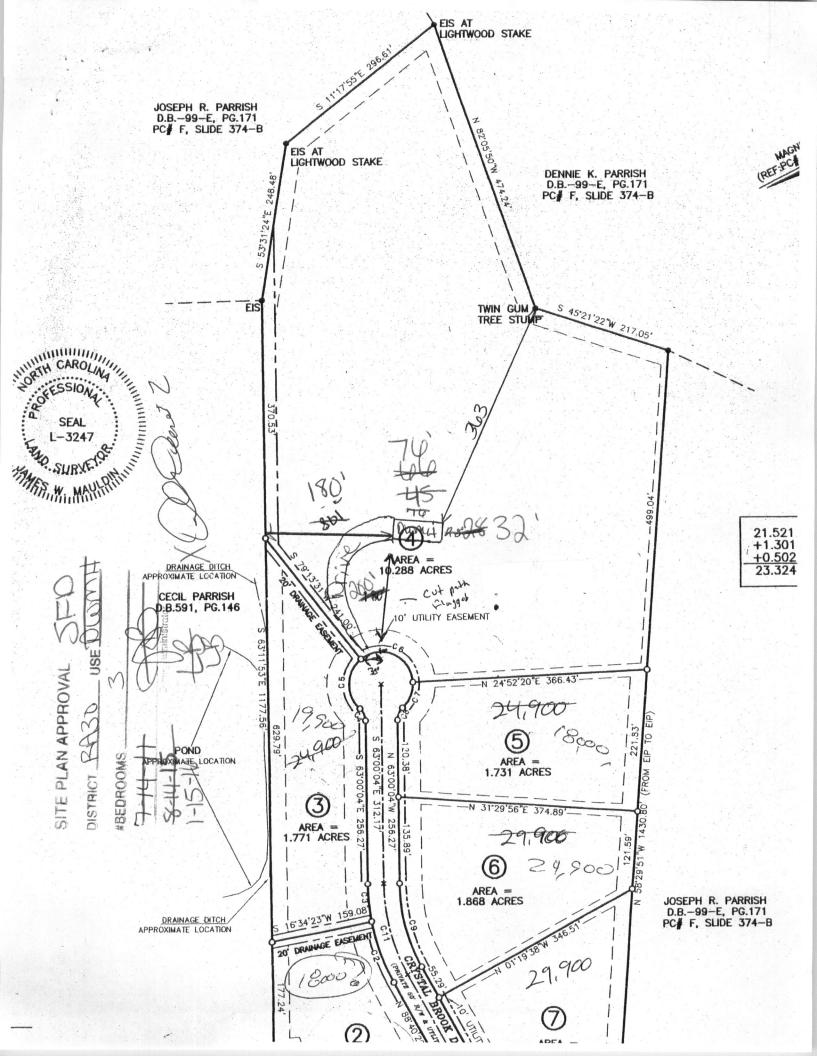
\circ
Initial Application Date: 1560 27134
Central Permitting Central Permitting Cu# Cu# Cu# 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits
A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION
LANDOWNER: David Deese JR Mailing Address: 121 Peach Orchard Dr
City: Benson State: NCzip: 27504 Contact No: 910-620-1465 Email: Deese Construction @ o-mai)
APPLICANT*: Mailing Address:
City: State: Zip: Contact No: Email:* *Please fill out applicant information if different than landowner
CONTACT NAME APPLYING IN OFFICE: David Deese JR Phone # 910-6201465
PROPERTY LOCATION: Subdivision: 5+W Investment Lot #: 4 Lot Size: 10,29 AC State Road # 1554 State Road Name: 50 ho son Rd Map Book & Page: 2010 1275
State Road # 1554 State Road Name: 50 ho son Rd Map Book & Page: 2010 1275
Parcel: 07/602063104 PIN: 1602-81-5724,000
Zoning: 17750 Flood Zone: Watershed: 1077 Deed Book & Page: 289 / 175 Power Company*:
*New structures with Progress Energy as service provider need to supply premise number from Progress Energy.
PROPOSED USE:
SFD: (Sizex) # 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 28x/66) # Bedrooms 3 # Baths 2 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:SWDWTW (Size 32 x 76) # Bedrooms:Garage:(site built?) Deck:(site built?)
Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit:
Home Occupation: # Rooms: Use: Hours of Operation: #Employees:
Addition/Accessory/Other: (Sizex) Use: Closets in addition? () yes () no
Nater 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 (文) no
Does the property contain any easements whether underground or overhead () yes (\(\subseteq \)) no
Structures (existing or proposed): Single family dwellings: Manufactured Homes: Other (specify):
Required Residential Property Line Setbacks: Comments:
Front Minimum 3 5 Actual 18000
Rear 25 365
Closest Side // / / / / / / / / / / / / / / / / /
Sidestreet/corner lot 180
Nearest Building
Residential Land Use Application Page 1 of 2 03/11

ECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:	
。 - 1987年 - 1985年 - 1985年 - 1985年 - 1	
ermits are granted I agree to conform to all ordinances and laws of the State of North Ca ereby state that foregoing statements are accurate and correct to the best of my knowled	arolina regulating such work and the specifications of plans submit
ereby state that foregoing statements are accurate and correct to the best of my knowled	. 7 1/2 2/6
4.04.)	129610
Signature of Owner or Owner's Agent	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



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: David Deese Address: 202 Crusta Brook
City: Angier State: NC Zip:2750(Daytime Phone: () 9(0-620-146-
Landowner Information (To be completed by landowner, if different than above)
Name: Same 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: JWB Services - Mike Barbour
Phone: 919-902-0351 Address: 105 Aspen Circle, Clauton
City: Clauter State: NC Zip: 27520
State Lic# 32512 Email:
18. Electrical Contractor Company Name: Shockoen Electric Service
Phone: 919 710-1300 Address: 7713 FOX KNOLL DRIVE
City: FUQUAR VARIAN State: NC Zip: 27526
State Lic# 24742 SP 3FD Email:
Mechanical Contractor Company Name: Shockow Phone: 919) 710-1300 Address: 7713 FOX PRIVE
City: FUQUAY VARIAR State: NC Zip: 27526 State Lic# 127,30 Email:
D. State Lic# 121,30 Email: D. Plumbing Contractor Company Name: Priority Plumbing
Phone: (919) 422-4935 Address: P.D. Box 264
city: Willow SPRINGS State: NC Zip: 27592
State Lic# 18550 Email:
Oldio Clory Carrotte
Part III - Manufactured Home Information
Model Year: 2016 Size: 76 x 30 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.
man hold for now enter 4/12/2016
Signature of Home Owner or Agent Date

*Effective July 1, 2004, a County <u>Tax Department Moving Permit</u> 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.

McGee Investments DBA GREENFIELD HOUSING CENTER 2117 Highway 70 East Garner, North Carolina 27529 (919) 772-2220

BUYER(S) David B. Deese and Alison H. Deese						PHONE (910) 620-1465					01/28/16		
ADDRESS													
121 Peach Orchard Drive, Benson, NC 2	7504						······································						
DELIVERYADDRESS 202 Crystal Brook Drive, Angier, NC 275	01												
MAKE MAKE			MOD	EL	VIII (-111/4000)	YEAR	BE	DROOMS	BATHS	FLC	OOR SIZE	S	QUARE FEET
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023-000-H-A002758AB		NEW		PREOWNE	DX	MFD	<u> </u>		F 5510			-	402 604 00
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OPTIONAL EQUIPMENT, LA	BOR A	ND ACC	ESS	\$		SALES	SIAX	<u> </u>	······			 	2,010.70
All deposits may be refunded, less any fund	de enent	on beh	alf	13								1	
of the client.	орош										****		
										SUB-T	OTAL	\$	104,619.75
												<u> </u>	
Home price includes home, setup, delivery	, title fee	s, hook	ups,									<u> </u>	404 640 76
skirting, dirt pad/footers, trim-out, and A/C									RCHASE			\$	104,619.75
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									Day Sand Color Street on the Color Street Street	SUB-TO	OTAL	\$	99,344.75
						Unpai	d Ba	alance (of Cash	Sale Pr	ce	\$	99,344.75 I terms and
						described home; the optional equipment and active insurance as described has been voluntary; the trade-in is free from all claims whatsoever, except ESTIMATED RATE OF FINANCING%					ept as noted		
						NUMBER OF YEARS ESTIMATED MONTHLY PAYMENTS \$							
												STAN	DING BETWEE
						THIS AGREEMENT CONTAINS THE ENTIRE UNDERSTANDING B DEALER AND BUYER AND NO OTHER REPRESENTATION OR INDU VERBAL OR WRITTEN, HAS BEEN MADE WHICH IS NOT COVERED					r inducement		
						BUYER	(S) A(CKNOWLE	AND UND	ERSTAND	THE BACK	OF TH	RDER AND THA
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Not Valid Unless Signed and Accepted by an Officer of the By Approved	PS	O 1	u ron zeec	- Mark	SIG	NED X	à	Der	D-,	413	200		BUYE
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DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 449027

Filed on: 04/12/2 Initially filed by:

Designated Lien Agent

Chicago Title Company, LLC

Online: www.liensnc.com (http://www.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

202 Crystal Brook Drive Angier, NC 27501 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 No to Lien Agent for this project.

Owner Information

David Deese 202 Crystal Brook Drive Angier, NC 27501 United States

Email: patsy@gogreenfieldhomes.com

Phone: 919-772-2220

View Comments (0)

Technical Support Hotline: (888) 690-7384

HARNETT COUNTY CENTRAL PERMITTING P.O. BOX 65 LILLINGTON, NC 27546 For Inspections Call: (910) 893-7525 Fax: (910) 893-2793 Bldg Insp scheduled before 2pm available next business day. Page 2 Application Number 11-50027134 Date 4/13/16 Property Address 202 CRYSTAL BROOK DR PARCEL NUMBER 07-1602003104- Application description CP MANUFACTURED HOME RA 30 CRITERIA
Subdivision Name
Required Inspections
Phone Insp Seq Insp# Code Description Initials Date
Permit type MANUFACTURED HOME PERMIT
10
Permit type LAND USE PERMIT 999 818 Z818 PZ*ZONING INSPECTION

HARNETT COUNTY CENTRAL PERMITTING P.O. BOX 65 LILLINGTON, NC 27546

For Inspections Call: (910) 893-7525 Fax: (910) 893-2793 Bldg Insp scheduled before 2pm available next business day.

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Application Number Property Address PARCEL NUMBER Application type description Subdivision Name Property Zoning	202 CRYSTAL BROOK DR 07-1602003104- CP MANUFACTURED HOME RA			
Owner				
DEESE DAVUD & ALISON 121 PEACH ORCHARD DR BENSON NC 27504 (910) 620-1465	J M B SERVICES 105 ASPEN CIRCLE CLAYTON (919) 669-7043	NC	27520	
Applicant				
PI SI	LOOD ZONE X BEDROOMS OBILE HOME YEAR ROPOSED USE	SFD EXIST COUNTY	3.00	
Permit MANUFACTUR	RED HOME PERMIT			
Additional desc Phone Access Code . 1135003 Issue Date 4/13/16 Expiration Date 4/13/17				0
Permit LAND USE E Additional desc 1134998 Issue Date 4/13/16 Expiration Date 10/10/16	PERMIT			0
Special Notes and Comments T/S: 07/14/2011 11:42 AM JE 210 TO ANGIER RIGHT 55 LEFT ON ST RIGHT ON JOHNSTON COUNTY RI OAK RD LEFT ON JOHNSTON RD LEE BREAK DR GO TO END OF RD LOT 4	N MCGAVER IGHT LIVE FT CRYSTAL			