

SCANNED

Initial Application Date: 11-20-12

Application # 1250030132R

12-11-12

DATE

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: Stanley Cotton Mailing Address: 237 Country Lake Lane
City: Holly Springs State: NC Zip: 27540 Contact No: 919-333-5919 Email: _____

APPLICANT*: _____ 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: _____ Lot #: _____ Lot Size: 3.64
State Road # _____ State Road Name: Orletta Tutor Rd Map Book & Page: PL410 131C
Parcel: 05 06 26 0207 PIN: 0636-71-5084.000
Zoning: RA30 Flood Zone: X Watershed: NA Deed Book & Page: 1026, 301 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 X DW _____ TW (Size 28 x 80) # Bedrooms: 3 Garage: _____ (site built?) Deck: _____ (site built?)
12x14 Deck moving w/ home already 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 X New Well (# of dwellings using well 1) *Must have operable water before final

Sewage Supply: X 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? X yes () no

Does the property contain any easements whether underground or overhead X yes () no *exp*

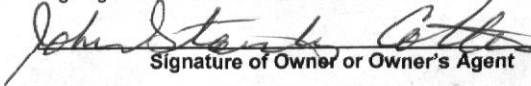
Structures (existing or proposed): Single family dwellings: _____ Manufactured Homes: yes Other (specify): _____

Required Residential Property Line Setbacks:

	Minimum	Actual	Comments:
Front	<u>35</u>	<u>405-125</u>	<u>1 Existing DW/H, 1 Proposed DW/H</u>
Rear	<u>25</u>	<u>30-33</u>	<u>12-11-12 Revision No</u>
Closest Side	<u>10</u>	<u>45-62/50</u>	<u>fee - give to Jimmy</u>
Sidestreet/corner lot	_____	_____	_____
Nearest Building on same lot	<u>10</u>	_____	_____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: _____

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.

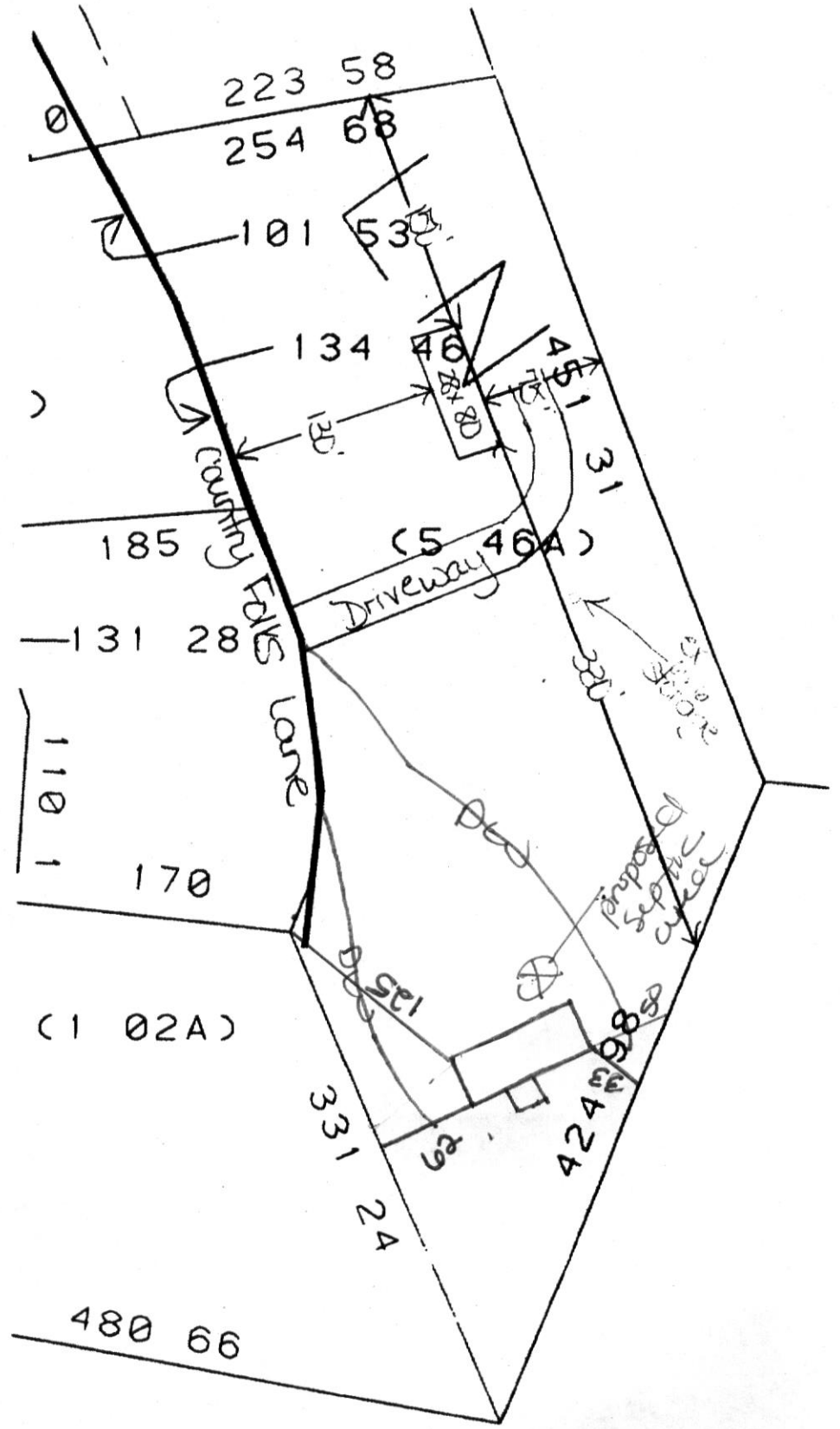

Signature of Owner or Owner's Agent

10-7-17
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

SITE PLAN APPROVAL
 DISTRICT RA30 USE SED
 #BEDROOMS 3
 Date 12-11-12
 Zoning Administrator [Signature]



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.

Application Number	12-50030132	Date	4/02/13
Property Address	237 FLETCHER TUTOR RD		
PARCEL NUMBER	05-0626- - -0207- - -		
Application type description	CP MANUFACTURED HOME	RA 30	CRITERIA
Subdivision Name	FREDERIC C WAGSTAFF		
Property Zoning	RES/AGRI DIST - RA-30		

Owner

Contractor

COTTEN JOHN STANLEY
RT 1 BOX 234 C 7
HOLLY SPRINGS NC 27540
(919) 552-7704

OWNER

Applicant

COTTON STANLEY
237 COUNTRY FOLK
HOLLY SPRINGS NC 27540
(919) 333-5919

--- Structure Information 000 000 28X80 3BDR DWMH

Flood Zone	FLOOD ZONE X	
Other struct info	# BEDROOMS	3000000.00
	MOBILE HOME YEAR	1999000.00
	PROPOSED USE	DWMH
	SEPTIC - EXISTING?	NEW
	WATER SUPPLY	NEW WELL

Permit	MANUFACTURED HOME PERMIT		
Additional desc			
Phone Access Code	975177		
Issue Date	4/02/13	Valuation	0
Expiration Date	4/02/14		

Permit	LAND USE PERMIT		
Additional desc	28X80 1999 DWMH		
Phone Access Code	975169		
Issue Date	4/02/13	Valuation	0
Expiration Date	9/29/13		

Special Notes and Comments

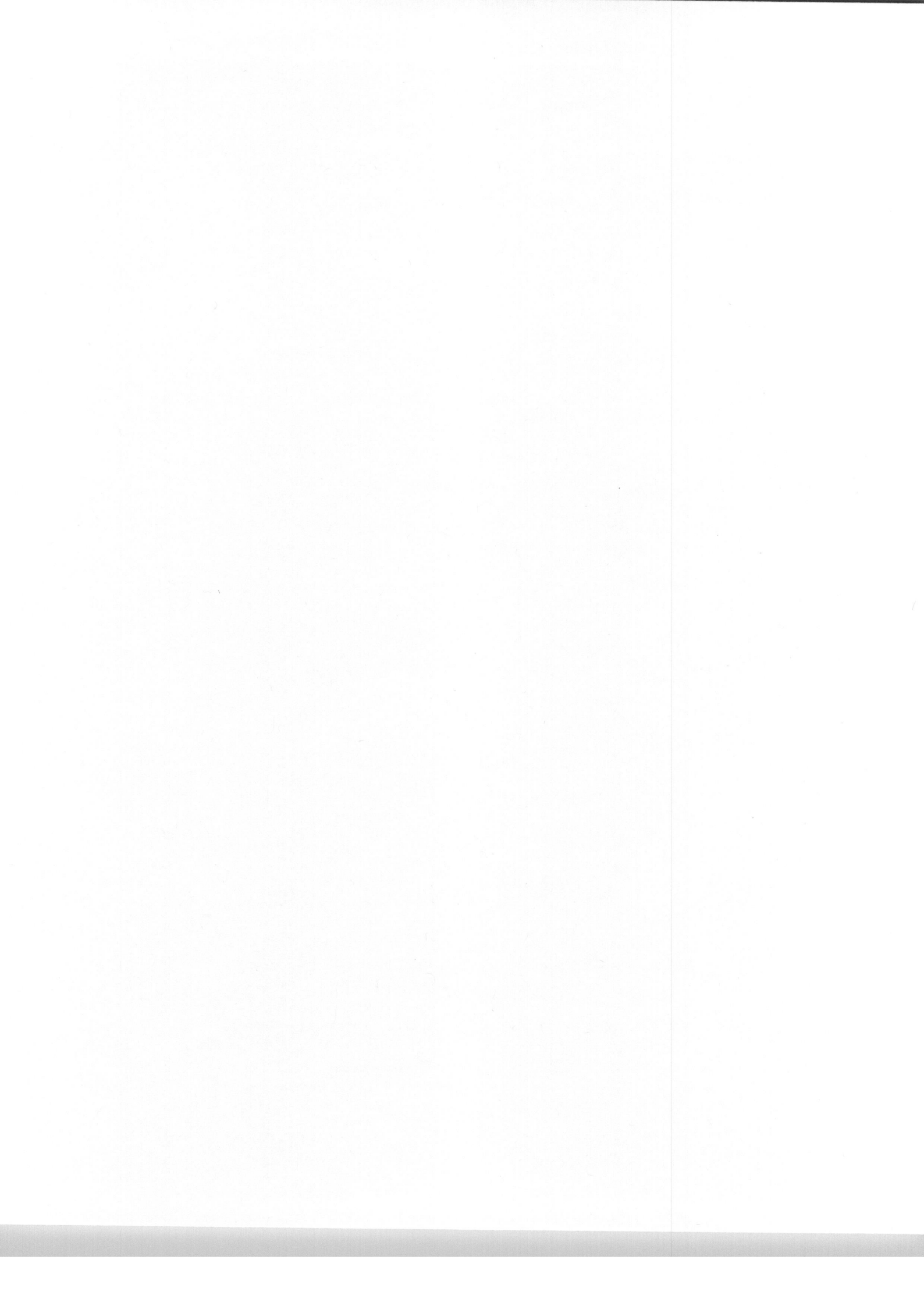
T/S: 11/20/2012 01:39 PM JBROCK ----
237 COUNTRY FOLKS LN

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Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
Permit type MANUFACTURED HOME PERMIT					
10	501	T501	R*MOBILE HOME FOUND./ M. WALL	_____	__/__/__
10	307	P307	R*PLUMB WATER CONNECTION	_____	__/__/__
20	818	Z818	PZ*ZONING INSPECTION	_____	__/__/__
20	814	A814	ADDRESS CONFIRMATION	_____	__/__/__
30	507	T507	R*MANUFACTURED HOME FINAL	_____	__/__/__
999		H824	ENVIR. OPERATIONS PERMIT	_____	__/__/__
999		H828	ENVIRO. WELL PERMIT	_____	__/__/__
Permit type LAND USE PERMIT					
999	818	Z818	PZ*ZONING INSPECTION	_____	__/__/__
999	820	Z820	PZ*ZONING/FINAL INSPECTION	_____	__/__/__



1250030132

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: Stanley Colter Address: _____

City: _____ State: _____ Zip: _____ Daytime Phone: () _____

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: As Owner

Phone: _____ Address: _____

City: _____ State: _____ Zip: _____

State Lic# _____ Email: _____

B. Electrical Contractor Company Name: _____

Phone: _____ Address: _____

City: _____ State: _____ Zip: _____

State Lic# Owner Email: _____

C. Mechanical Contractor Company Name: _____

Phone: _____ Address: _____

City: _____ State: _____ Zip: _____

State Lic# _____ Email: _____

D. Plumbing Contractor Company Name: _____

Phone: _____ Address: _____

City: _____ State: _____ Zip: _____

State Lic# Owner Email: _____

Part III - Manufactured Home Information

Model Year: _____ Size: X 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 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.

