

Initial Application Date: 12-10-13

Application # 1350032611

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: EJ Womack Mailing Address: 2785 Raven Rock Rd
City: Lillington State: NC Zip: 27546 Contact No: 919 774 379 Email: _____

APPLICANT: Jonah Davis Black Mailing Address: 3920 River Rd.
City: Figuay Varies State: NC Zip: 27526 Contact No: 919-291-3665 Email: _____
*Please print out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: _____ Phone # _____

PROPERTY LOCATION: Subdivision: Peach Farm Lot #: 41 Lot Size: .88AC
State Road # 128 State Road Name: Bent Tree Ln Map Book & Page: 2000/189
Parcel: 13 0620 0602 61 PIN: 0620-75-1771-000
Zoning: R30 Flood Zone: X Watershed: IV Deed Book & Page: OTP1 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: _____ Monolithic 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 28 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: 2 units Other (specify): N/A

Required Residential Property Line Setbacks:

	Minimum	Actual
Front	<u>35</u>	<u>82</u>
Rear	<u>25</u>	<u>107</u>
Closest Side	<u>10</u>	<u>65</u>
Sidestreet/corner lot	_____	_____
Nearest Building on same lot	_____	_____

Comments: _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:

Old 421 to Wayne Mclean

Right on Bent Tree.

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.

John Mclean

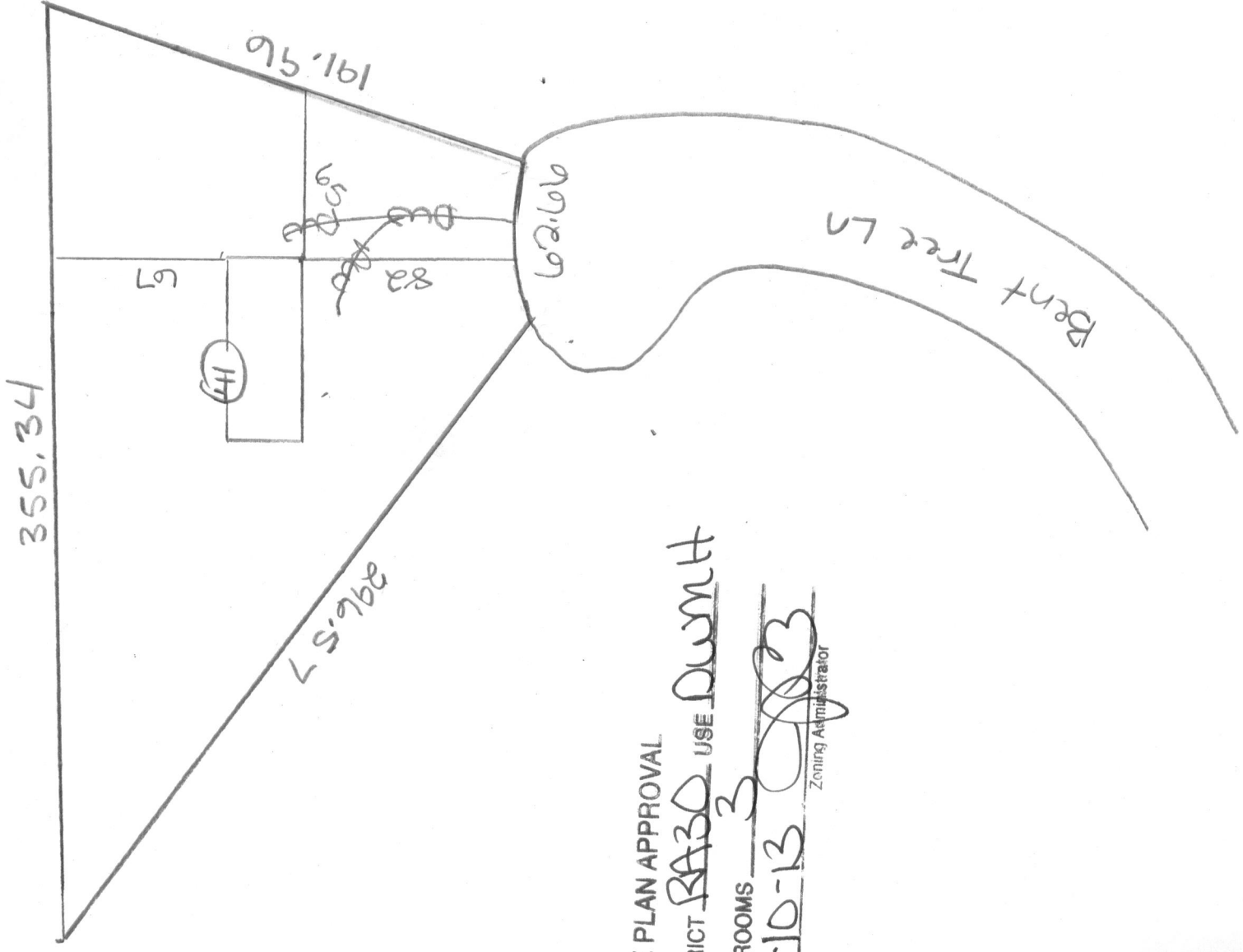
Signature of Owner or Owner's Agent

12-10-13

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



1=60

SITE PLAN APPROVAL

DISTRICT RA30 USE DwMh

#BEDROOMS 3

12-10-13
Date

[Signature]
Zoning Administrator

OFFER TO PURCHASE AND CONTRACT

JANAH DAVIS BLACK as Buyer,
 hereby offers to purchase and EJ Womack as Seller,
 upon acceptance of said offer, agrees to sell and convey, all of that plot, piece or parcel of land described below, together with all improvements located thereon and such personal property as is listed below (the real and personal property are collectively referred to as "the Property"), in accordance with the Standard Provisions on the REVERSE SIDE HEREOF and upon the following terms and conditions:

1. **REAL PROPERTY:** Located in the City of Willington County of HARNETT
 State of North Carolina, being known as and more particularly described as:
 Street Address 1028 BENT TREE Zip _____
 Legal Description _____

2. **PERSONAL PROPERTY:** _____

3. **PURCHASE PRICE:** The purchase price is \$ 20,000⁰⁰ and shall be paid as follows:
 (a) \$ 5000⁰⁰ in earnest money paid by _____ (cash; bank, certified, or personal check) with the delivery of this contract, to be held in escrow by _____ as agent, until the sale is closed, at which time it will be credited to Buyer, or until this contract is otherwise terminated and it is disbursed in accordance with the Standard Provisions on the REVERSE SIDE HEREOF;
 (b) \$ 15000⁰⁰ by assumption of the unpaid principal balance and all obligations of Seller on the existing loan secured by a deed of trust on the Property;
 (c) \$ _____ by a promissory note secured by a purchase money deed of trust on the Property with interest prior to default at the rate of _____ % per annum payable as follows: _____
 Prepayment restrictions and/or penalties, if any, shall be: _____
 Assumption or transfer rights, if any, shall be: _____

(d) \$ _____, the balance of the purchase price in cash at closing.

4. **CONDITIONS:** (State N/A in each blank of paragraph 4(a) and 4(b) that is not a condition to this contract.)
 (a) The Buyer must be able to obtain a firm commitment on or before _____, effective through the date of closing, for a _____ loan in the principal amount of \$ 15000⁰⁰ for a term of 3 year(s), at an interest rate not to exceed 10 % per annum, with mortgage loan discount points not to exceed _____ % of the loan amount. Buyer agrees to use his best efforts to secure such commitment and to advise Seller immediately upon receipt of the lender's decision. If Seller is to pay any loan closing costs, those costs are as follows: _____
 (b) The Buyer must be able to assume the unpaid principal balance of the existing loan described in paragraph 3(b) above for the remainder of the loan term, at an interest rate not to exceed _____ % per annum fixed (or describe type of loan) _____ with mortgage loan assumption and/or discount points not to exceed _____ % of the loan balance. (See Standard Provision No. 2). If such assumption requires the lender's approval, approval must be granted on or before _____. Buyer agrees to use his best efforts to secure such approval and to advise Seller immediately upon his receipt of the lender's decision. If Seller is to pay any loan assumption costs, those costs are as follows: _____
 (c) There must be no restriction, easement, zoning or other governmental regulation that would prevent the reasonable use of the real property for _____ purposes.

5. **ASSESSMENTS:** Seller warrants that there are no special assessments, either pending or confirmed, for sidewalk, paving, water, sewer or other improvements on or adjoining the Property, except as follows: _____ (Insert "None" or the identification of such assessments, if any. The agreement for payment or proration of any assessments indicated is to be set forth in paragraph 6 below.)

6. **OTHER PROVISIONS AND CONDITIONS:**
 (a) All of the Standard Provisions on the REVERSE SIDE HEREOF are understood and shall apply to this instrument, except the following numbered Standard Provisions shall be deleted: (If none are to be deleted, state "None".) _____

IF THERE ARE ANY ADDENDA TO THIS CONTRACT, INDICATE ABOVE AND ATTACH HERETO.

7. **CLOSING:** All parties agree to execute any and all documents and papers necessary in connection with closing and transfer of title on or before _____, at a place designated by _____
 The deed is to be made to _____

8. **POSSESSION:** Possession shall be delivered _____
 In the event that Buyer has agreed that possession is not delivered at closing, then Seller agrees to pay to Buyer the sum of \$ _____ per day from and including the date of closing to and including the date that possession is to be delivered as above set forth.

9. **COUNTERPARTS:** This offer shall become a binding contract when signed by both Buyer and Seller. It is to be signed in _____ counterparts with a signed counterpart being retained by each party hereto and the escrow agent, if any.

Date of Offer: _____ Date of Acceptance: _____
 Buyer [Signature] (SEAL) Seller [Signature] (SEAL)

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 # _____

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?

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.

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

12-10-13

DATE

PROCEDURES AND GUIDELINES FOR MANUFACTURED HOMES

RA-30 Criteria Certification

I, Jonah Davis Black, landowner/agent of Parcel Identification Number _____, located in an RA-30 Zoning District, do hereby certify the following:

The multi-section manufactured home shall meet the following appearance standards, verified by zoning inspection approval, 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 that is covered with material commonly used in standard residential roofing construction. Said material must be installed properly and be consistent in appearance.
4. The structure must have masonry underpinning that is continuous, permanent and unpierced except for ventilation and access.
5. The exterior siding must consist predominantly of vinyl, aluminum, wood, or hardboard; and must be comparable in composition, appearance, and durability to the exterior siding commonly used in standard residential construction. Said exterior siding shall be in good condition, complete, and not damaged or loose.
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.
8. The home must have been constructed after July 1st 1976.

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.


*Signature of Landowner/Agent

12-10-13
Date

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

1-10-14

Application # 1350032411

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: Jonah Black Address: PO Box 1894

City: Angier State: NC Zip: 27501 Daytime Phone: (919) 291-3665

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: _____

Phone: _____ Address: _____

City: _____ State: _____ Zip: _____

State Lic# _____ Email: _____

B. **Electrical Contractor** Company Name: RA Gregory Electric

Phone: _____ Address: 1948 NC 27 W

City: Lillington State: NC Zip: 27546

State Lic# 21717-UL Email: _____

C. **Mechanical Contractor** Company Name: N/A

Phone: _____ Address: _____

City: _____ State: _____ Zip: _____

State Lic# _____ Email: _____

D. **Plumbing Contractor** Company Name: Owner

Phone: _____ Address: _____

City: _____ State: _____ Zip: _____

State Lic# _____ Email: _____

Part III - Manufactured Home Information

Model Year: 1999 Size: 28 X 70

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]
Signature of Home Owner or Agent

01-16-14
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.

Application # _____
Harnett County Central Permitting

PO Box 65 Lillington, NC 27546

Telephone Number: 910-893-7525 Fax 910-893-2793 www.harnett.org/permits

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(Please fill out each part completely)

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Home Owner Information (To be completed by owner of the manufactured home)

Name: _____ 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: Raven Rock mt movers
Phone: 919-775-3600 Address: 3335 NC 87 Hwy S
City: Sanford State: NC Zip: 27332
State Lic# 3400 Email: N/A

B. **Electrical Contractor** Company Name: _____
Phone: _____ Address: _____
City: _____ State: _____ Zip: _____
State Lic# _____ 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# _____ 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.*

**E. J. WOMACK ENTERPRISES INC.
DBA COUNTRY FAIR HOMES**

3335 NC 87 Highway S.
SANFORD, NORTH CAROLINA 27332
(919) 775-3600 • Fax: (919) 775-7533

BUYER: Jonah Black PHONE: 919-498-5562 DATE: 1/16/14
 ADDRESS: _____ SALES PERSON: EJ Womack
 DELIVERY ADDRESS: 128 Bent Tree Ct Willington NC 27546
 MAKE & MODEL: Champion YEAR: _____ BED ROOMS: 3 FLOOR SIZE: 2086 HITCH SIZE: 28 STOCK NUMBER: _____
 SERIAL NUMBER: _____ COLOR: _____ PROPOSED DELIVERY DATE: _____ KEY NUMBERS: _____
 NEW USED

LOCATION	R-VALUE	THICKNESS	TYPE OF INSULATION	BASE PRICE OF UNIT	
CEILING					\$ 39,900.00
EXTERIOR				OPTIONAL EQUIPMENT	
FLOORS					
<small>THIS INSULATION INFORMATION WAS FURNISHED BY THE MANUFACTURER AND IS DISCLOSED IN COMPLIANCE WITH THE FEDERAL TRADE COMMISSION RULE 16CFR SECTION 460.16</small>				SUB-TOTAL	\$
OPTIONAL EQUIPMENT, LABOR AND ACCESSORIES				SALES TAX	inc

Delivery & Set
up
only
Sold as
is

NON-TAXABLE ITEMS	
VARIOUS FEES AND INSURANCE	
1. CASH PURCHASE PRICE	\$ 39,900.00
TRADE-IN ALLOWANCE	\$
LESS BAL. DUE on above	\$
NET ALLOWANCE	\$
CASH DOWN PAYMENT	\$
CASH AS AGREED SEE REMARKS	\$
2. LESS TOTAL CREDITS	\$
SUB-TOTAL	\$
SALES TAX (If Not Included Above)	\$
3. Unpaid Balance of Cash Sale Price	\$ 39,900.00

Dealer and Buyer certify that the additional terms and conditions printed on the other side of this contract are agreed to as a part of this agreement, the same as if printed above the signatures. Buyer is purchasing the above described manufactured home; the optional equipment and accessories, the insurance as described has been voluntary; that Buyer's trade-in is free from all claims whatsoever, except as noted.

ESTIMATED RATE OF FINANCING _____ %
 NUMBER OF YEARS _____
 ESTIMATED MONTHLY PAYMENTS \$ _____

THIS AGREEMENT CONTAINS THE ENTIRE UNDERSTANDING BETWEEN DEALER AND BUYER AND NO OTHER REPRESENTATION OR INDUCEMENT, VERBAL OR WRITTEN, HAS BEEN MADE WHICH IS NOT COVERED IN THIS CONTRACT.
 BUYER(S) ACKNOWLEDGE RECEIPT OF A COPY OF THIS ORDER AND THAT BUYER(S) HAVE READ AND UNDERSTAND THE BACK OF THIS AGREEMENT.

I UNDERSTAND THAT I HAVE THE RIGHT TO CANCEL THIS PURCHASE BEFORE MIDNIGHT OF THE THIRD BUSINESS DAY AFTER THE DATE THAT I HAVE SIGNED THIS AGREEMENT. I UNDERSTAND THAT THIS CANCELLATION MUST BE IN WRITING. IF I CANCEL THE PURCHASE AFTER THE THREE DAY PERIOD, I UNDERSTAND THAT THE DEALER MAY NOT HAVE ANY OBLIGATION TO GIVE ME BACK ALL OF THE MONEY THAT I PAID THE DEALER. I UNDERSTAND ANY CHANGE TO THE TERMS OF THE PURCHASE AGREEMENT BY THE DEALER WILL CANCEL THIS AGREEMENT.

NOTE: WARRANTY AND EXCLUSIONS AND LIMITATIONS OF DAMAGES ON THE REVERSE SIDE.

DESCRIPTION OF TRADE-IN	YEAR	SIZE
MAKE	MODEL	BEDROOMS
TITLE NO	SERIAL NO	COLOR
AMOUNT OWING TO WHOM		
ANY DEBT BUYER OWES ON TRADE-IN IS TO BE PAID BY <input type="checkbox"/> DEALER <input type="checkbox"/> BUYER		

**E. J. WOMACK ENTERPRISES INC.
DBA COUNTRY FAIR HOMES** DEALER
Not Valid Unless Signed and Accepted by an Officer of the Company or an Authorized Agent
 By: [Signature] Approved

SIGNED X _____ BUYER
 SOCIAL SECURITY NO _____
 SIGNED X _____ BUYER
 SOCIAL SECURITY NO _____

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 13-50032611 Date 1/17/14
Property Address 128 BENT TREE CT
PARCEL NUMBER 13-0620- - -0002- -61-
Application type description CP MANUFACTURED HOME RA 30 CRITERIA
Subdivision Name
Property Zoning UNZONED

Owner

EJ WOMACK ENTERPRISES INC
3335 NC 87 S
SANFORD NC 27332

Contractor

RAVEN ROCK MOBILE HOME MOVER
3335 NC 87 HWY.
SANFORD NC 27332
(919) 775-3600

Applicant

BLACK JONAH DAVIS #41
3920 RIVER RD
FUQUAY VARINA NC 27526
(919) 291-3665

--- Structure Information 000 000 28X70 3BDR DWMH
Flood Zone FLOOD ZONE X
Other struct info # BEDROOMS 3000000.00
MOBILE HOME YEAR 1999.00
PROPOSED USE DWMH
SEPTIC - EXISTING? NEW TANK
WATER SUPPLY COUNTY

Permit MANUFACTURED HOME PERMIT
Additional desc
Phone Access Code 1016195
Issue Date 1/17/14 Valuation 0
Expiration Date 1/17/15

Permit LAND USE PERMIT
Additional desc
Phone Access Code 1016179
Issue Date 1/17/14 Valuation 0
Expiration Date 7/16/14

Special Notes and Comments

T/S: 12/10/2013 03:26 PM JBROCK ----
PEACH FARM #41 - OFF OF BENT TREE LN

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	13-50032611	Page	2
Property Address	128 BENT TREE CT	Date	1/17/14
PARCEL NUMBER	13-0620- - -0002- -61-		
Application description . . .	CP MANUFACTURED HOME	RA 30	CRITERIA
Subdivision Name			
Property Zoning	UNZONED		

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
Permit type MANUFACTURED HOME PERMIT					
10	501	T501	R*MOBILE HOME FOUND./ M. WALL	_____	___/___/___
20	818	Z818	PZ*ZONING INSPECTION	_____	___/___/___
20	814	A814	ADDRESS CONFIRMATION	_____	___/___/___
30	507	T507	R*MANUFACTURED HOME FINAL	_____	___/___/___
999		H824	ENVIR. OPERATIONS PERMIT	_____	___/___/___

Application # B-50032611

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Name: _____ 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: _____

Phone: _____ Address: _____

City: _____ State: _____ Zip: _____

State Lic# _____ Email: _____

B. **Electrical Contractor** Company Name: _____

Phone: _____ Address: _____

City: _____ State: _____ Zip: _____

State Lic# _____ Email: _____

*C. **Mechanical Contractor** Company Name: Tim Shop

Phone: 919-708-8340 Address: 3489 Edwards Rd

City: Searsford State: NC Zip: 27332

State Lic# 22513 Email: N/A

D. **Plumbing Contractor** Company Name: _____

Phone: _____ Address: _____

City: _____ State: _____ Zip: _____

State Lic# _____ 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.

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List of inspections and Egress requirements available upon request. Progress Energy customers must provide Premise Number.