

Initial Application Date:

4-30-14

Application #

14500 33548

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: Bobby Sears Jr Mailing Address: 11 Selby Ct.
City: Holly Springs State: NC Zip: 27540 Contact No: 919-793-4572 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: Keith Bruce Fst Lot #: 6 Lot Size: 5
State Road # NC 42 State Road Name: NC 42 Map Book & Page: 2014 49
Parcel: 05 0626 0049 14 PIN: 0626 80 7245.000
Zoning: RA30 Flood Zone: X Watershed: NA Deed Book & Page: 3209 350 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:
Mod: (Size x ) # Bedrooms # Baths Basement (w/wo bath) Garage: Site Built Deck: On Frame Off Frame
Manufactured Home: SW DW TW (Size 28 x 106) # 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:

Table with 3 columns: Location (Front, Rear, Closest Side, Sidestreet/corner lot, Nearest Building on same lot), Minimum, Actual. Values: Front (35, 287), Rear (25, 74), Closest Side (10, 170).

Comments:

DATE 2/24/14

NORFOLK - SOUTHERN RA  
S 78°41'56"E 406.61'

S 78°36'49"E 366.16'

S 67°26'28"W 143.80'

5

M.B.#2009, PG.737

CORNELIA WEAT  
D.B.659 PG.5

RECOMBINED  
AREA = 5.000 ACRES

REFERENCE LINE ONLY  
CENTER LINE OF CREEK IS PROPERTY LINE  
ALL MEASUREMENTS MADE TO  
REFERENCE LINE

287 FT  
OLD LOT LINE

74 FT  
Rear

180 FT  
Side

Driveway

RA-30  
RA-20M

A

#6

Map 2014-49

Not To Scale

8 SITE PLAN APPROVAL  
DISTRICT RA30 USE DWMA  
#BEDROOMS 3  
4-30-14 V.E.M.  
Date Zoning Administrator

ACT FARM  
PG.394  
PG.737  
N PARENT TRACT)  
IN TRACT A)  
AREA IN PARENT TRACT)

APPROXIMATE LOCATION  
C/L CREEK

FIELDSTONE FARMS S/D  
PHASE 2  
M.B.#2005, PG.419

3.2F  
+1  
5.7

CERTIF  
(WE)  
PROP  
OF  
SET  
S  
C

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 lines 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.

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.

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.

*Daryl Seap*  
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

4-30-14  
DATE

# PROCEDURES AND GUIDELINES FOR MANUFACTURED HOMES

## RA-30 Criteria Certification

I, Bobby Sears Jr., 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:

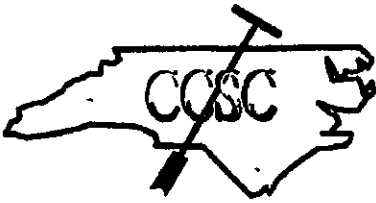
1. The structure must be a multi-section unit built to the HUD code for manufactured homes.
2. When located on the site, the longest axis of the unit must be parallel to the lot frontage.
3. The structure must have a pitched roof that is covered with material commonly used in standard residential roofing 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 1<sup>st</sup> 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.

Bobby Sears Jr.  
\*Signature of Landowner/Agent

4/30/14  
Date

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



## Central Carolina Soil Consulting, PLLC

329 South White Street  
Wake Forest, NC 27588  
919-569-6704

September 16, 2009  
Job # 726

Keith Brown  
9820 NC HWY 42  
Holly Springs, NC 27540

RE. Preliminary soil/site evaluation on ~10.3-acres adjacent to Highway 42 in Harnett County.

Dear Mr Brown:

Central Carolina Soil Consulting, PLLC conducted a preliminary soil evaluation on a portion of the parcel listed above to determine the areas of soils that are suitable for subsurface wastewater disposal systems (conventional and LPP only). The soil/site evaluation was performed using hand auger borings during moist soil conditions based on the criteria found in the State Subsurface Rules, 15ANCAC 18A .1900 "Laws and Rules for Sewage Treatment and Disposal Systems" From this evaluation, CCSC sketched the boundary between the suitable soils and unsuitable soils through ground truthing from an aerial photo of the property and gps field location of suitable soil borings via a Trimble Geo XT (submeter) gps unit.

The above referenced parcel located on the boundary of the piedmont and coastal plains region of Harnett County south of Highway 42. The majority of the soils on the property are considered piedmont soil types (Appling & Wedowee) that have formed from residual parent material such as gneiss or schist. A small portion of the soils have characteristics of an upper coastal plain soil type (Norfolk) which has formed from marine sediments. The Appling, Wedowee & Norfolk soil series are generally suitable for subsurface wastewater systems. That is, the morphology of the soils contain suitable characteristics that would support subsurface septic systems such as sandy clay loam to clayey textured subsoils that are not considered expansive, contain suitable structure and no indicators of restrictive characteristics within 24 inches of the soil surface.


The attached soils map indicates the areas of soils which are suitable for subsurface wastewater systems. The "hatched soil units" on the attached map indicates the areas of soils that have 30+ inches of suitable soil material. There may be small inclusions of soils 24 to 29 inches in the areas mapped as conventional that will support LPP or ultra-shallow conventional septic systems. The "cross hatched soil units" indicate areas of soils that have 24 to 29 inches of suitable soil material and are suitable for LPP septic systems. Unit "UN" on the attached map indicates areas of unsuitable soils.

they are not state/county buffers, jurisdictional wetlands or other areas protected by local zoning regulations. If this is not possible, then the disturbed areas should be minimized as much as possible. The same precautions should be taken when the individual lots are cleared for home sites. Only the vegetation should be removed in the areas of the proposed drain fields on lots to prevent any disturbance of the naturally occurring soil. A lot with adequate areas of suitable soils can be deemed unsuitable due to poor planning or site disturbance. Central Carolina Soil Consulting recommends that all lot clearing activities are delayed until a permit is issued by the local health department, with the exception of clearing thick vegetation to access the lot.

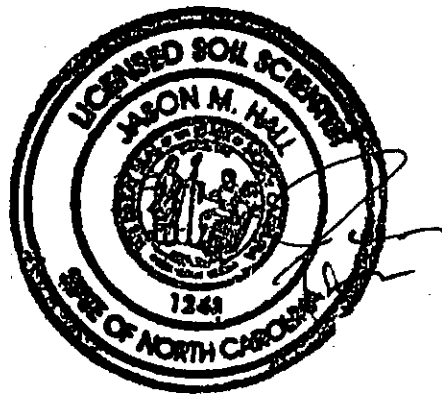
This report discusses the location of suitable soils for subsurface wastewater disposal systems and does not guarantee any permits or approval required by the local health department. Central Carolina Soil Consulting, PLLC is a professional consulting firm specializing in soil delineations and design for on-site wastewater disposal systems. The rules governing on-site wastewater disposal systems are complex and the interpretation of the rules are based upon the opinions of regulators (state and county level). Due to the subjective nature of the permitting process and the variability of naturally occurring, CCSC cannot guarantee that areas delineated as suitable for on-site wastewater disposal systems will be permitted by the governing agencies. These permitting considerations should be taken into account before a financial commitment is made on a tract of land.

If you have any questions regarding the findings on the attached map or in this report, please feel free to contact me at anytime. Thank you for allowing Central Carolina Soil Consulting to perform this site evaluation for you.

Sincerely,



Jason Hall  
NC Licensed Soil Scientist #1248



Encl: Soil Map

Application # 14500 33548

**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: Bobby Sears Jr. 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: Donnie's Mobile Home Service

Phone: 910-316-2269 Address: 620 Pine St.

City: Shannon State: NC Zip: 28386

State Lic# 35546 Email: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

State Lic# \_\_\_\_\_ Email: \_\_\_\_\_

C. **Mechanical Contractor** Company Name: owner

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: 28X66 **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.

Bobby Sears Jr.  
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.



# MOBILE HOME TAX PERMIT

COUNTY OF Noke PERMIT NUMBER 2626 A  
STATE OF NORTH CAROLINA DATE 5/20/14

Permission is granted to:

Bobby Sears JR 11 Selby Ct Holly Springs NC 27540  
Owner Address

Donnie's MH Service 620 Pine St Shannon NC 28386  
Carrier Address

to move the following mobile home:

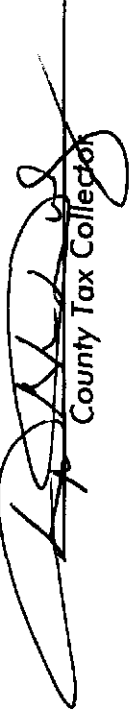
Mastek piece 1999 Model 28 X 66 Size MP1809476 Serial Number

From: 1489 Aridia Rd Raeford NC 28376  
Address

To: Lot 6 Stonemason Dr Holly Springs NC 27540 ~~287540~~  
Address

This permit is issued in accordance with the provisions of G.S. 105-316.1 through G.S. 105-316.8 of the General Statutes of N.C.

This permit shall be conspicuously displayed near the license tag on the rear of the mobile home at all times during its transportation.

  
County Tax Collector





# MOBILE HOME TAX PERMIT

COUNTY OF Hoke PERMIT NUMBER 2626 B  
STATE OF NORTH CAROLINA DATE 5/20/14

Permission is granted to:

Bobby Sears Jr Owner 11 Selby Ct Holly Springs NC 27540 Address

Donnie's MH Service Carrier 620 Pine St Shannon NC 28386 Address

to move the following mobile home:

Masterpiece Make 1999 Model 28X64 Size MP1809476 Serial Number

From: 1489 Arabia Rd Raeford NC 28376 Address

To: Lot 6 Stone-Mason Dr Holly Springs NC 27540 Address

This permit is issued in accordance with the provisions of G.S. 105-316.1 through G.S. 105-316.8 of the General Statutes of N.C.

This permit shall be conspicuously displayed near the license tag on the rear of the mobile home at all times during its transportation.

  
County Tax Collector

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 . . . . . 14-50033548 Date 5/27/14  
Property Address . . . . . 92964 \*UNASSIGNED  
PARCEL NUMBER . . . . . 05-0626- - -0048- -14-  
Application type description CP MANUFACTURED HOME RA 30 CRITERIA  
Subdivision Name . . . . . T W TRUELOVE ESTATE  
Property Zoning . . . . . RES/AGRI DIST - RA-20M

Owner Contractor  
-----  
SEARS BOBBY G JR DONNIE'S MOBILE HOME SERVICE  
11 SELBY CT 620 PINE ST  
HOLLY SPRINGS NC 27540 SHANNON NC 28386  
(910) 843-8996

Applicant

-----  
SEARS BOBBY

--- Structure Information 000 000 28X66 3BDR DWMH  
Flood Zone . . . . . FLOOD ZONE X  
Other struct info . . . . . # BEDROOMS 3.00  
MOBILE HOME YEAR 1000.00  
PROPOSED USE DWMH  
SEPTIC - EXISTING? NEW TANK  
WATER SUPPLY COUNTY

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Permit . . . . . MANUFACTURED HOME PERMIT  
Additional desc . . . . . 1999 28X66 DWMH  
Phone Access Code . . . . . 1036615  
Issue Date . . . . . 5/27/14 Valuation . . . . . 0  
Expiration Date . . . . . 5/27/15

-----

Permit . . . . . LAND USE PERMIT  
Additional desc . . . . . 28X66 1999 DWMH  
Phone Access Code . . . . . 1036607  
Issue Date . . . . . 5/27/14 Valuation . . . . . 0  
Expiration Date . . . . . 11/23/14

-----  
Special Notes and Comments

T/S: 05/02/2014 01:14 PM VBROWN ----  
LOT 6 AT END OF CUL DE SAC

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 . . . . .	14-50033548	Page	2
Property Address . . . . .	92964 *UNASSIGNED	Date	5/27/14
PARCEL NUMBER . . . . .	05-0626- - -0048- -14-		
Application description . . . .	CP MANUFACTURED HOME	RA 30	CRITERIA
Subdivision Name . . . . .	T W TRUELOVE ESTATE		
Property Zoning . . . . .	RES/AGRI DIST - RA-20M		

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	_____	___/___/___