

Initial Application Date: 5-8-14

Application # 1450033611

CU# \_\_\_\_\_

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: MAX R. MCCAULEY Mailing Address: 269 ROYAL PINES LANE  
City: LILLINGTON State: NC Zip: 27546 Contact No: 910-814-2518 Email: lcasa3363@aol.com

APPLICANT\*: SAME Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Contact No: \_\_\_\_\_ Email: \_\_\_\_\_

CONTACT NAME APPLYING IN OFFICE: \_\_\_\_\_ Phone # \_\_\_\_\_

PROPERTY LOCATION: Subdivision: Royal Pines Est Lot #: 9-B Lot Size: 7.42  
State Road # \_\_\_\_\_ State Road Name: Royal Pines Map Book & Page: 2002/1009  
Parcel: 130600 0083 PIN: 0630 04 5880.00  
Zoning: R130 Flood Zone: X Watershed: NA Deed Book & Page: 785,904 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 1 DW \_\_\_ TW (Size 28 x 48) # Bedrooms: 2 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

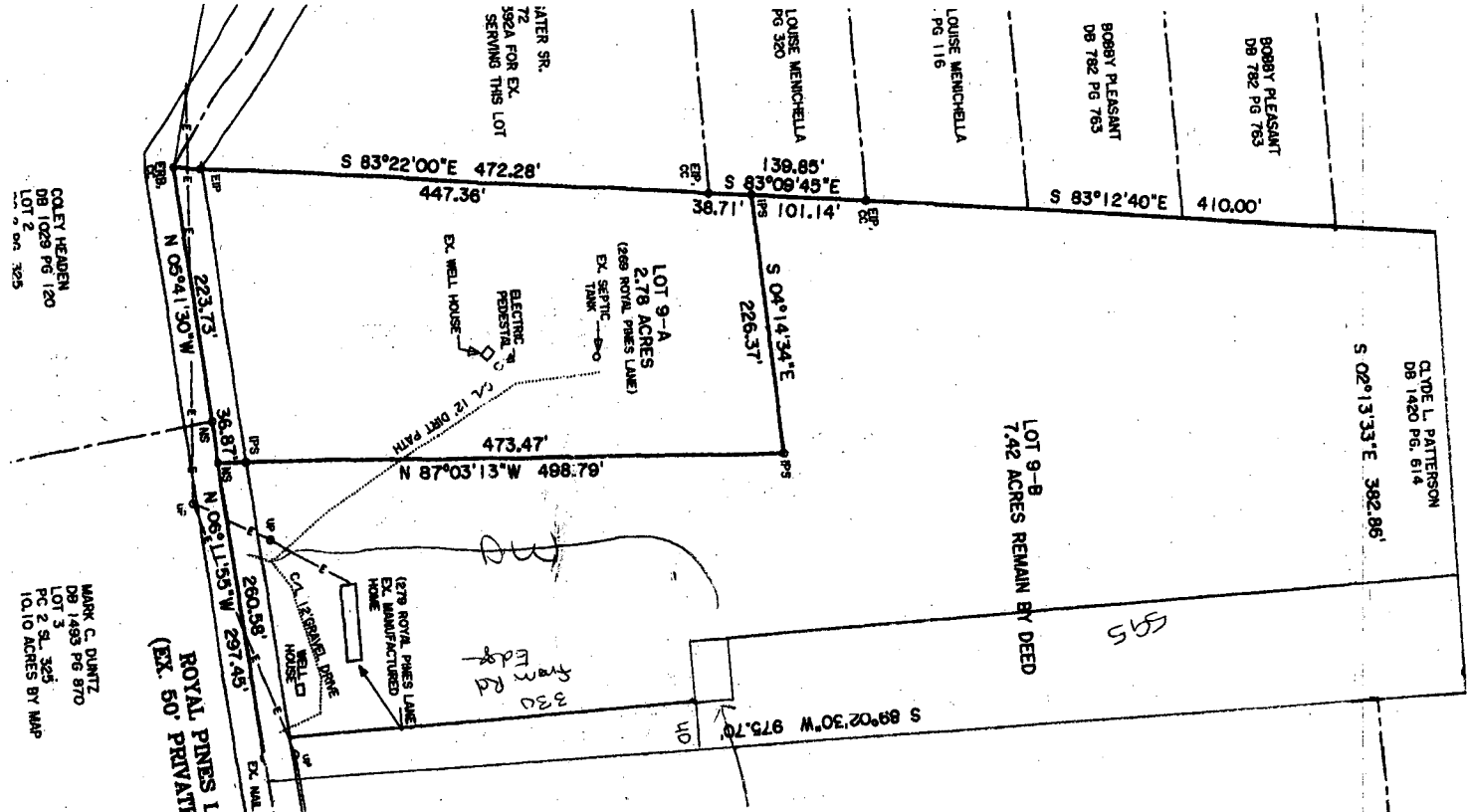
Structures (existing or proposed): Single family dwellings: \_\_\_\_\_ Manufactured Homes: 1 Other (specify): \_\_\_\_\_

Required Residential Property Line Setbacks:

Front	Minimum	<u>35</u>	Actual	<u>330</u>
Rear		<u>25</u>		<u>595</u>
Closest Side		<u>10</u>		<u>40</u>
Sidestreet/corner lot		_____		_____
Nearest Building on same lot		_____		_____

Comments:

Call before going out @ 814-2518



COLEY HEADEN  
DB 1029 PG 120  
LOT 2  
PC 2 SL 325

MARK C. DUMTZ  
DB 1485 PG 870  
LOT 3  
PC 2 SL 325  
10.10 ACRES BY MAP

ROYAL PINES LANE  
(EX. 50' PRIVATE EASEMENT)

FOR REGISTRATION REGISTER OF DEEDS  
KIMBERLY S. QUANTY, INC.  
2002 Bldg 7111 4th Fl  
BK 2092 PG 1099-1010 FEE \$21.00  
INSTRUMENT # 2002015289

THE LOT(S) ON THIS PLAN HAVE BEEN EVALUATED BY A PRIVATE CONSULTANT. BASED ON THIS REVIEW, IT APPEARS THAT FINAL CONSULTANT, HAS APPROPRIATE REGULATIONS OF THE APPROPRIATE THIS PLAN FOR EACH LOT REQUIRES THE APPLICANT PERMITS FOR SPECIFIC THE HANCOCK COUNTY HEALTH DEPARTMENT PERMITS FOR FOOD SERVICE AND SITTING IN ACCORD WITH REGULATIONS IN FOOT REPRESENT TIME OF PERMIT FEE. THIS CERTIFICATION DOES NOT REPRESENT APPROVAL OR A PERMIT FOR ANY SITE WORK.

DATE

ENVIRONMENTAL HEALTH

Proposed  
Purchase

SITE PLAN APPROVAL  
DISTRICT R3D USE DUMTH  
2BEDROOMS  
5-8-14  
Date

JOSHUA E. BRITTON  
DB 1479 PG 124  
LOT 8  
PC 2 SL 325  
10.20 ACRES BY MAP

County Administrator

BOBBY PLEASANT  
DB 782 PG 763

LOUISE WENCHILLA  
PG 116

LOUISE WENCHILLA  
PG 360

LATER SR.  
72  
362A FOR EX.  
SERVING THIS LOT

CLAYDE L. PATTERSON  
DB 1420 PG. 614

LOT 9-B  
7.42 ACRES REMAIN BY DEED

595

40



APPLICATION #: \_\_\_\_\_

NAME: \_\_\_\_\_

**\*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)

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.

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.

M. J. O. M. S. Coyle  
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

5-8-14  
DATE

# PROCEDURES AND GUIDELINES FOR MANUFACTURED HOMES

## RA-30 Criteria Certification

I, Max R McCumber, landowner/agent of Parcel Identification Number 130400 6083, 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.

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.

Max R. McCumber

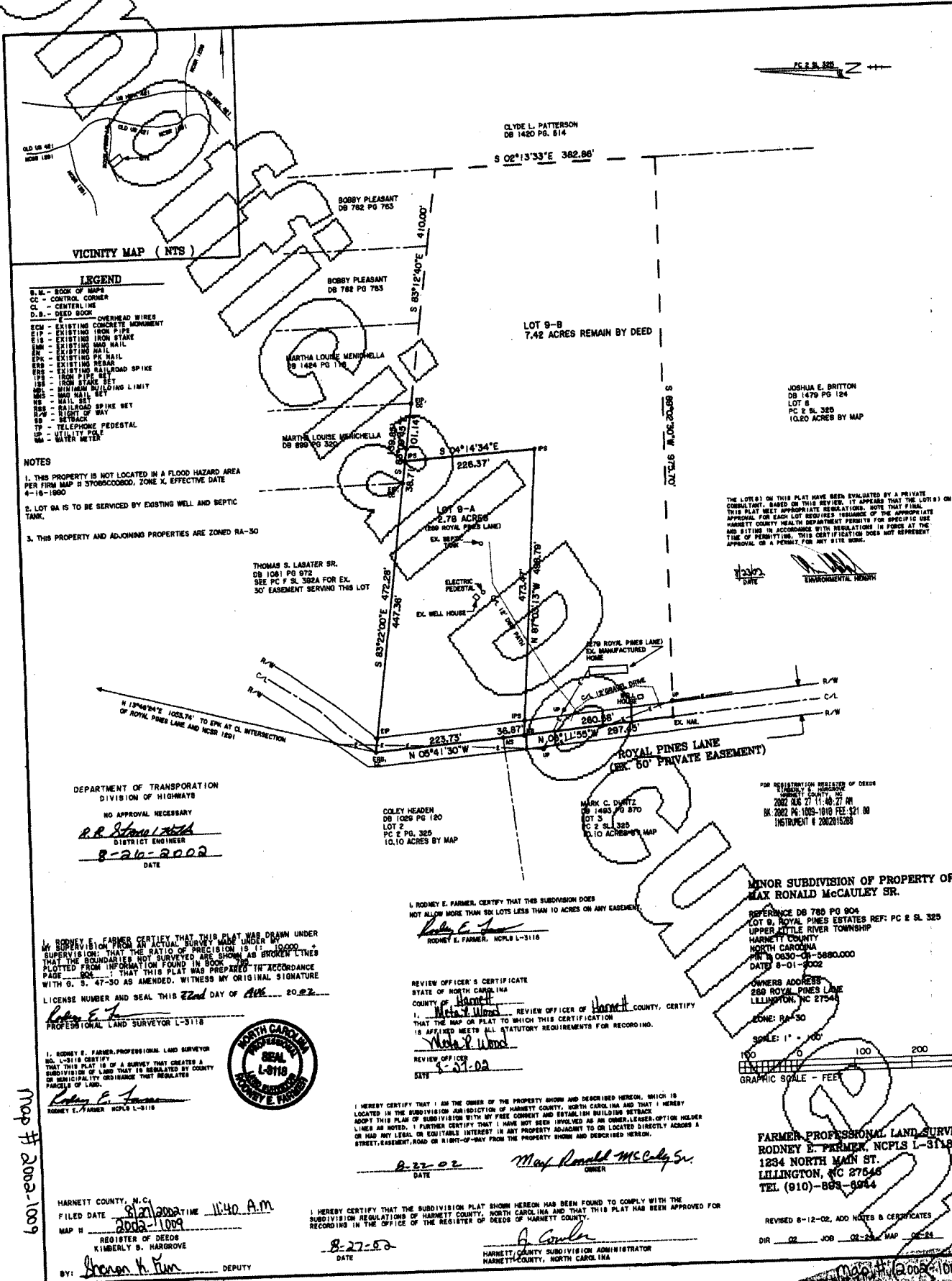
\*Signature of Landowner/Agent

5-8-14  
Date

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

Map # 2002-1009

UNAPPROVED



- LEGEND**
- B.M. - BOOK OF MAPS
  - CC - CONTROL CORNER
  - CL - CENTERLINE
  - D.B. - DEED BOOK
  - OVERHEAD WIRES
  - ECM - EXISTING CONCRETE MONUMENT
  - EIP - EXISTING IRON PIPE
  - EIS - EXISTING IRON STAKE
  - EM - EXISTING MANG NAIL
  - EN - EXISTING NAIL
  - EPK - EXISTING PE NAIL
  - ES - EXISTING STAKE
  - ESB - EXISTING RAILROAD SPIKE
  - IS - EXISTING IRON STAKE SET
  - ISB - EXISTING RAILROAD SPIKE SET
  - MS - MINIMUM BUILDING LIMIT
  - NS - NAIL SET
  - NSB - RAILROAD SPIKE SET
  - PS - RIGHT OF WAY
  - RS - RAILROAD SPIKE SET
  - RSB - RAILROAD SPIKE SET
  - TP - TELEPHONE FEDESTAL
  - UP - UTILITY PIPE
  - WM - WATER METER

- NOTES**
1. THIS PROPERTY IS NOT LOCATED IN A FLOOD HAZARD AREA PER FIRM MAP # 27055C000D, ZONE X, EFFECTIVE DATE 4-16-1990
  2. LOT 9A IS TO BE SERVICED BY EXISTING WELL AND SEPTIC TANK.
  3. THIS PROPERTY AND ADJOINING PROPERTIES ARE ZONED RA-50

DEPARTMENT OF TRANSPORTATION  
DIVISION OF HIGHWAYS  
NO APPROVAL NECESSARY  
*R.R. Stearns*  
DISTRICT ENGINEER  
8-26-2002  
DATE

COLEY HEADEN  
DB 1020 PG 120  
LOT 2  
PC 2 PL 325  
10.10 ACRES BY MAP

MARK C. DUNN  
DB 1483 PG 870  
LOT 3  
PC 2 PL 325  
10.10 ACRES BY MAP

THE LOTS ON THIS PLAT HAVE BEEN EVALUATED BY A PRIVATE CONSULTANT, BASED ON THIS REVIEW, IT APPEARS THAT THE LOTS ON THIS PLAT MEET APPROPRIATE REGULATIONS. NOTE THAT FINAL APPROVAL FOR EACH LOT REQUIRES PERMITS FROM THE APPROPRIATE HARRNETT COUNTY HEALTH DEPARTMENT PERMITS FOR SPECIFIC USE AND SITING IN ACCORDANCE WITH REGULATIONS IN FORCE AT THE TIME OF PERMITTING. THIS CERTIFICATION DOES NOT REPRESENT APPROVAL OR A PERMIT FOR ANY SITE WORK.

*DATE*  
ENVIRONMENTAL PERMIT

FOR REGISTRATION REGISTERED OF DEEDS  
COUNTY CLERK  
2002 AUG 27 11:48:27 AM  
BK 2002 PL 1003-1010 PEE: 221 00  
INSTRUMENT # 2002015288

MINOR SUBDIVISION OF PROPERTY OF:  
MAX RONALD MCCAULEY SR.

REFERENCE DB 789 PG 904  
LOT 9, ROYAL PINES ESTATES REF: PC 2 PL 325  
UPPER LITTLE RIVER TOWNSHIP  
HARRNETT COUNTY  
NORTH CAROLINA  
PIN # 0630-01-5880.000  
DATE 8-01-2002

OWNER ADDRESS  
280 ROYAL PINES LANE  
LILLINGTON, NC 27548  
ZONE: RA-50  
SCALE: 1" = 100'



FARMER PROFESSIONAL LAND SURVEYS  
RODNEY E. FARMER, NCLPS L-3118  
1234 NORTH MAIN ST.  
LILLINGTON, NC 27548  
TEL (910)-893-8944

REVISED 8-12-02, ADD NOTES & CERTIFICATES  
DIR 02 JOB 02-22 MAP 02-24

RODNEY E. FARMER CERTIFY THAT THIS PLAT WAS DRAWN UNDER SUPERVISION FROM AN ACTUAL SURVEY MADE UNDER MY SUPERVISION; THAT THE RATIO OF PRECISION IS 1:10,000; THAT THE BOUNDARIES NOT SURVEYED ARE SHOWN AS BROKEN LINES PLOTTED FROM INFORMATION FOUND IN BOOK PAGE 222; THAT THIS PLAT WAS PREPARED IN ACCORDANCE WITH G. S. 47-30 AS AMENDED, WITH MY ORIGINAL SIGNATURE LICENSE NUMBER AND SEAL THIS 22nd DAY OF AUG. 2002



I, RODNEY E. FARMER, CERTIFY THAT THIS SUBDIVISION DOES NOT ALLOW MORE THAN 50' LOTS LESS THAN 10 ACRES ON ANY EASEMENT.  
*Rodney E. Farmer*  
RODNEY E. FARMER, NCLPS L-3118

REVIEW OFFICER'S CERTIFICATE  
STATE OF NORTH CAROLINA  
COUNTY OF Harrnett  
I, Mark C. Dunn REVIEW OFFICER OF Harrnett COUNTY, CERTIFY THAT THE MAP OR PLAT TO WHICH THIS CERTIFICATION IS APPLIED MEETS ALL STATUTORY REQUIREMENTS FOR RECORDING.  
*Mark C. Dunn*  
REVIEW OFFICER  
9-27-02  
DATE

I HEREBY CERTIFY THAT I AM THE OWNER OF THE PROPERTY SHOWN AND DESCRIBED HEREON, WHICH IS LOCATED IN THE SUBDIVISION JURISDICTION OF HARRNETT COUNTY, NORTH CAROLINA AND THAT I HEREBY ACCEPT THIS PLAN OF SUBDIVISION WITH MY FREE CONSENT AND ESTABLISH BUILDING SETBACK LINES AS NOTED. I FURTHER CERTIFY THAT I HAVE NOT BEEN INVOLVED AS AN OWNER, LEASER, OPTION HOLDER OR HAD ANY LEGAL OR EQUITABLE INTEREST IN ANY PROPERTY ADJACENT TO OR LOCATED DIRECTLY ACROSS A STREET, EASEMENT, RIGHT OF WAY FROM THE PROPERTY SHOWN AND DESCRIBED HEREON.  
*Max Ronald McCauley Sr.*  
DATE 8-22-02 OWNER

I HEREBY CERTIFY THAT THE SUBDIVISION PLAT SHOWN HEREON HAS BEEN FOUND TO COMPLY WITH THE SUBDIVISION REGULATIONS OF HARRNETT COUNTY, NORTH CAROLINA AND THAT THIS PLAT HAS BEEN APPROVED FOR RECORDING IN THE OFFICE OF THE REGISTER OF DEEDS OF HARRNETT COUNTY.  
*A. Coulter*  
DATE 8-27-02 HARRNETT COUNTY SUBDIVISION ADMINISTRATOR HARRNETT COUNTY, NORTH CAROLINA

HARRNETT COUNTY, N.C.  
FILED DATE 8/27/2002 TIME 11:40 A.M.  
MAP # 2002-1009  
REGISTER OF DEEDS  
KIMBERLY B. HARGROVE  
BY: *Sharon K. Kim* DEPUTY

Map # 2002-1009

Map # 2002-1009



SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 421 to Summerville Mangers Rd.  
(old 421), Go 4.5 miles to Royal Pines Ln. (left). Property  
is 2/10 of a mile on left.

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.

Max R. McAuley  
Signature of Owner or Owner's Agent

5/6/14  
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 # 1450033611

**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: Tammy Kim McCauley Address: 291 Pinckride Cove

City: Sanford State: NC Zip: 27332 Daytime Phone: 919 356-5555

Landowner Information (To be completed by landowner, if different than above)

Name: max McCauley Address: 279 Royal Pines Ln

City: Lillington State: NC Zip: 27546 Daytime Phone: 910 814-2518

**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 mover

Phone: 910-591-8642 Address: HWS7 (mike Johnson)

City: Sanford State: NC Zip: 27332

State Lic# 3400 Email: \_\_\_\_\_

B. **Electrical Contractor** Company Name: my self 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: \_\_\_\_\_

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

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

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

**Part III - Manufactured Home Information**

Model Year: 1989 Size: 48 x 28

**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.

Tammy McCauley  
Signature of Home Owner or Agent

6-3-14  
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.



# MOBILE HOME MOVING PERMIT

COUNTY OF Harnett  
STATE OF NORTH CAROLINA

PERMIT NUMBER 1734

Date 5/30/2014

Permission is granted to:

Owner Tommy McLowley 291 Pineridge Cv. Sanford NC 27332  
Address

Carrier Raven Back mH movers 335 Hwy 87 Sanford NC 27332  
Address  
to move the following mobile home:

Make Champion 1989 40X28 2391463409AB  
Model Size Serial Number

From: 1995 Peachfarm Rd. Killington NC 27546  
Address

To: 279 Royal Pines Ln Killington NC 27546  
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 North Carolina.

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

THIS PERMIT VALID FOR THIS MOVE ONLY.

K. Barber - TP Assistant  
County-City Tax Collector



# MOBILE HOME MOVING PERMIT

COUNTY OF Harnett  
STATE OF NORTH CAROLINA

PERMIT NUMBER **1734**

Permission is granted to:

Date 5/30/2014

Owner Tommy M<sup>c</sup>Cauley 291 Pineridge Cv. Sanford NC 27332  
Address

Carrier Raven Book mt movers 335 Hwy 87 Sanford NC 27332  
Address  
to move the following mobile home:

Make Champion 1989 40X28 23916103409AB  
Model Size Serial Number

From: 1995 Peachfarm Rd Wilmington NC 27546  
Address

To: 279 Royal Pines Ln Wilmington NC 27546  
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 North Carolina.

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

THIS PERMIT VALID FOR THIS MOVE ONLY.

K. Barber - TP Assistant  
County-City 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.

-----

Application Number . . . . .	14-50033611	Date	6/03/14
Property Address . . . . .	279 ROYAL PINES LN		
PARCEL NUMBER . . . . .	13-0600- - -0083- - -		
Application type description	CP MANUFACTURED HOME	RA 30	CRITERIA
Subdivision Name . . . . .	ROYAL PINES EST		
Property Zoning . . . . .	PENDING		

Owner

Contractor

-----  
MCCAULEY MAX SR

-----  
RAVEN ROCK MOBILE HOME MOVER

269 ROYAL PINES LANE  
LILLINGTON NC 27546  
(910) 893-8612

3335 NC 87 HWY.  
SANFORD NC 27332  
(919) 775-3600

Applicant

-----  
MCCAULEY MAX  
269 ROYAL PINES LN  
LILLINGTON NC 27546  
(910) 814-2518

--- Structure Information 000 000 28X48 2BDR DWMH

Flood Zone . . . . .	FLOOD ZONE X	
Other struct info . . . . .	# BEDROOMS	2000000.00
	PROPOSED USE	DWMH
	SEPTIC - EXISTING?	NEW TANK
	WATER SUPPLY	WELL

-----

Permit . . . . .	MANUFACTURED HOME PERMIT	
Additional desc . . . . .		
Phone Access Code . . . . .	1037746	
Issue Date . . . . .	6/03/14	Valuation . . . . . 0
Expiration Date . . . . .	6/03/15	

-----

Permit . . . . .	LAND USE PERMIT	
Additional desc . . . . .		
Phone Access Code . . . . .	1037738	
Issue Date . . . . .	6/03/14	Valuation . . . . . 0
Expiration Date . . . . .	11/30/14	

-----  
Special Notes and Comments

T/S: 05/08/2014 09:48 AM JBROCK ----  
421 TO SUMMERVILLE MAMERS RD OLD 421 GO  
4.5 MILES TO ROYAL PINES LN L PROPERTY  
IS 2/10 OF A MILE ON L

-----  
\_\_\_\_\_  
\_\_\_\_\_

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 . . . . .	14-50033611	Page	2
Property Address . . . . .	279 ROYAL PINES LN	Date	6/03/14
PARCEL NUMBER . . . . .	13-0600- - -0083- - -		
Application description . . .	CP MANUFACTURED HOME	RA 30	CRITERIA
Subdivision Name . . . . .	ROYAL PINES EST		
Property Zoning . . . . .	PENDING		

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	_____	___/___/___