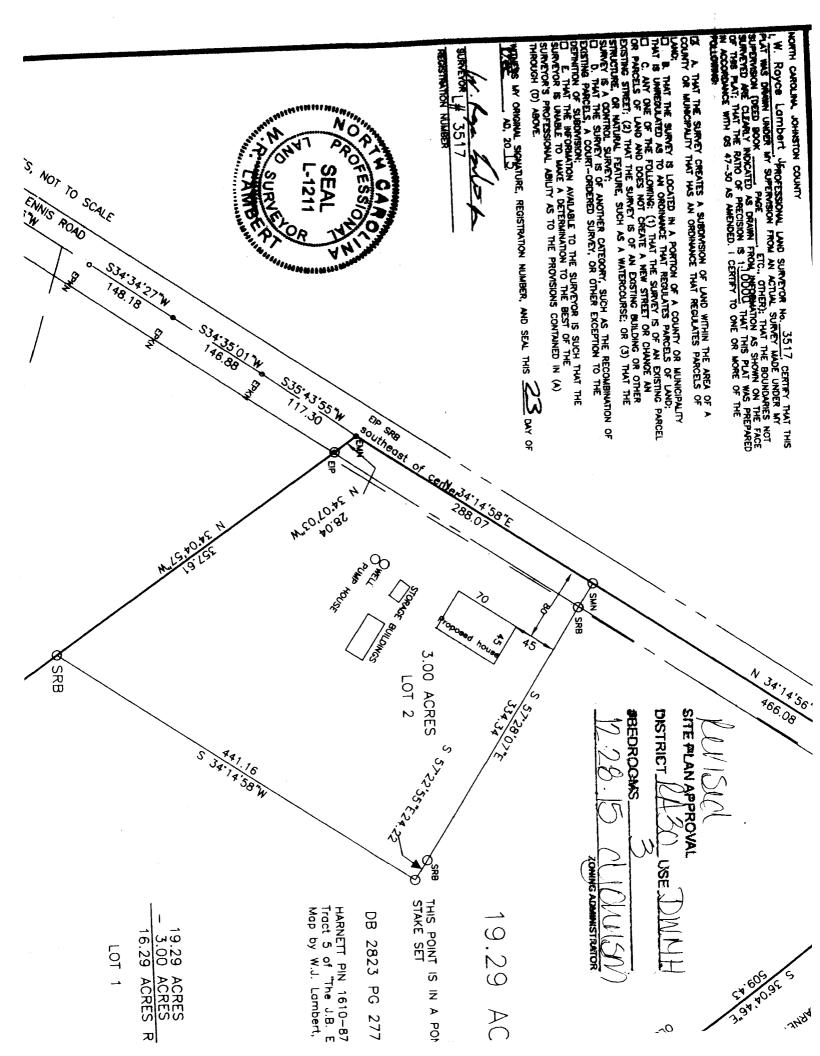
Initial Application Date: 41215 10-23-15 12-28-15 15 15 15 15 15 15 15 15 15 15 15 15 1
COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION
Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits
"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION"
LANDOWNER: FMM19 315 HIS HALM Mailing Address: 489 Hadaws Chapel Ba
City: State: // Zie Zie Zie Contact No: Email: LAURY OUNDING COM
APPLICANT*: Martin Vale Mailing Address: 4205 Sauls Rd.
City: DANCIGN State L Zip MD Contact No: 919-716-8683 Email: WHOR WCF15-116-4
Mustin VII
CONTACT NAME APPLYING IN OFFICE: 1/01/11/ 7dl Phone # 919-796-8683
PROPERTY LOCATION: Subdivision:
State Road # State Road Name:
Parcel: 01.1610.0121 PIN: 1610.87.9473
Zoning Flood Zone: Watershed: M Deed Book & Page: Power Company*:
*New structures with Progress Energy as service provider need to supply premise number
PROPOSED USE: 12.28.15 XIAC (MAC), CUIT (MAC)
SFD: (Size 5 Cx (C) # Bedrooms: 2 # 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: (Sizex) # 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:SWDWTW (SizeXX) # Bedrooms: Garage:(site built?) Deck: (site built?)
*/
Manufactured Home:SWDWTW (SizeXXY) # Bedrooms: Garage: (site built?) Deck: (site built?) Duplex: (Size x) No. Buildings: No. Bedrooms Per Unit:
Manufactured Home:SWDWTW (SizeXX) # Bedrooms: Garage:(site built?) Deck:(site built?) Duplex: (Size x) No. Buildings: No. Bedrooms Per Unit:
Manufactured Home:SWDWTW (SizeXXY) # Bedrooms: Garage: (site built?) Deck: (site built?) Duplex: (Size x) No. Buildings: No. Bedrooms Per Unit:
Manufactured Home:SWDWTW (SizeXX) # Bedrooms:Garage:(site built?, Deck:(site built?, Deck:
Manufactured Home:SWDWTW (SizeX) # Bedrooms:Garage:(site built?) Deck:(site built?) Duplex: (Size x) No. Buildings: No. Bedrooms Per Unit:
Manufactured Home:SWDWTW (SizeX) # Bedrooms: Garage:(site built?) Deck: (site built?) Deck:
Manufactured Home:SWDWTW (SizeX) # Bedrooms:Garage:(site built?) Deck:(site built?) Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit:
Manufactured Home:SWDWTW (SizeX) # Bedrooms: Garage:(site built?) Deck: (site built?) Deck:
Manufactured Home:SWDWTW (SizeX) # Bedrooms: Garage:(site built?) Deck:(site built?) Duplex: (Size x) No. Buildings: No. Bedrooms Per Unit:
Manufactured Home:SWDWTW (SizeX) # Bedrooms: Garage:(site built?) Deck: (site bui
Manufactured Home:SWDWTW (SizeX) # Bedrooms: Garage: (site built?) Deck: (site built?) Duplex: (Size x) No. Buildings: No. Bedrooms Per Unit:
Manufactured Home:SWDWTW (SizeX) # Bedrooms: Garage:(site built?) Deck:(site built?) Duplex: (Size x) No. Buildings: No. Bedrooms Per Unit:
Manufactured Home: _SW _DW _TW (Size _X _X _) # Bedrooms: Garage: (site built?) Deck:
Manufactured Home:SWDWTW (SizeX) # Bedrooms: Garage:(site built?) Deck:(site built?) Deck:

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: HAVE 21 FAGUE COUTS 3-4 MILES OUT LOUTS 1847 ON LANCE ENVIS FOR +0 stop sign straight across praperty on right	-
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 submit 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's Agent Date	itted

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 # 35299

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)

Home	e Owner Information: The Owner Information (To be completed by owner information)	er of the manufactured home)
Name	e: Maytin Ide A	ddress: 1362 Chic Ennis Road
City:	Benson State: <u>NC</u> Zip	o: <u>21504</u> Daytime Phone: () 796-8683
Lando	lowner Information (To be completed by landow	mer, if different than above)
Name	e: Ad	ddress:
City: _	State: Zip	o: Daytime Phone: ()
Part II	II – Contractor Information (To be completed by	Contractors or Homeowner, if applicable.
A.	Name, address, & pl Set-Up Contractor Company Name: Stol	none must match information on license) - e - M トー MDVピレン
	Phone: 919-422-8623 Address:	1085- A Aguilla Road
	City: penson State: V	zip: <u>27504</u>
	State Lic#2859 Email:	
B.	Electrical Contractor Company Name:	lobry's Electrical
	Phone: 919-639-4837 Address: 5	131 Malory Road
	City: Angler State: N	C zip: 27501
	State Lic# 15077 U Email:	
C.	Mechanical Contractor Company Name: 1	nark shockey
	Phone: 919-624-2174 Address: _	544 October Drive
	City: Willow Springs State: 1	1C Zip: 2759Z
	State Lic#12730 H3 Email:	
D.	Plumbing Contractor Company Name: Yv	riority Plumbing
	Phone: 919-639-7200 Address:	P.U. BOX 254 J
	City: Willow Springs State: No	C Zip: 21592
	State Lic#{	
Part III	I – Manufactured Home Information	
Model `	Year: <u>2015</u> Size: <u>28</u> x <u>48</u> Con	nplete & follow zoning criteria sheet
Park Na	lame:	Lot Number:
informat nstallati	tion and have obtained their permission to purchas tion will conform to the applicable manufactured l nce. I understand that	permit, that the application is correct including the contractor se these permits on their behalf, and that the construction or home set-up requirements, and the Harnett County Zoning alse information has been provided that this permit could be
11	Males - 12	1-12-16
	Signature of Home Owner of 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.

SETUP

DATE	1-61	6		SALES AGREEMENT	
BUYE	R(S): MARTIN H	ICKS YDE			
	WENDY M	ESSER YD	3		
ADDRE	SS: _302 W STE	WARTST	COATS NC 2	521	
	RY ADDRESS:	1362 CHIC		ENSON NC 27504	
	HONE: ()		SA	LES PERSON FULL NAME: Cath	nerine Long
BASE	PRICE:		\$77,443.4		Model: 21TRU28483RH15
				Year 2015 Length 48	Width Stock# HA76
State	Tax		\$1,839.2	C-1137	X New Used
Local	Tax		Water Bridge Control	TRADE: Make: N/A	Model: N/A
				Year N/A Length N/A Serial No.	Width N/A Title #
1. CASE	1. CASH PRICE		\$79,282.6	Amount owed will be paid by: Owed to:	X Buyer Seller
				OPTIONS:	
				13 seer heat pump installed, wire panel box is connections and sewer up to 20 ft. connections	o home for power, plumb water up to 75 ft.
TITE.F	FEES			back to code. 3,000 septic tank allowance and 4.	500 well allowance.
	G FEES		\$40.00	SELVED DECEMBER WITH	
7 MALL	G.FES		\$56.00	Deliver and set up to county code, pier and penn	n. footers.
				BUYER RESPONSIBILITIES: zoning and septic permits.	
Trade A Less Ar Trade E Cash De 3. LESS Ar 4. REMAIL Location Floors	DWN Payment LL CREDITS NING BALANCE Type of Insulation fiberglass	Thickness 7.00	\$500.00 \$500.00 \$78.878.68 R-Value	May not meet local codes and standard: Manufactured Home Standards. I UNDERSTAND THAT I HAVE THE RICE BEFORE MIDNIGHT OF THE THIRD BUS: I HAVE SIGNED THIS AGREEMENT CANCELLATION MUST BE IN WRITIN AFTER THE THREE DAY PERIOD, I UNDI NOT HAVE ANY OBLIGATION TO GIVE I PAID THE DEALER. I UNDERSTAND ANY PURCHASE AGREEMENT BY THE AGREEMENT. ESTIMATED RATE OF FINANCING 8.2 STIMATED MONTHLY PAYMENTS \$677 SULVESTANTES (I) that the usuas and of this agreement (4) that the usuas and of they received said action wienge received greement (4) that all promises and re-	CHI TO CANCEL THIS PURCHASE INESS DAY AFTER THE DATE THAT I. I UNDERSTAND THAT THIS IG. IF I CANCEL THE PURCHASE ERSTAND THAT THE DEALER MAY ME BACK ALL THE MONEY THAT I CHANGE TO THE TERMS OF THE DEALER WILL CANCEL THIS 24% NUMBER OF YEARS 23 157 Obditions on page two are part of the time including the options (3) two a completed copy of this prescriptions made are listed on
Exterior	fiberglass	3.50	11	mess evidenced in writing and signed b	the parties.
Cailings	blown fiberglass	7.93	28	ELLER: BUT	YER:
Manugacturer (ion information wand is disclosed in co. sion Rule 16CRP, SE	mpliance with	ed by the the Federal S. X	MH Homes, Inc. d/b/a - Signature Author Homes Dunn, NG An Name 10 W CUMBERLAND ST NN NC 28334 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.						
available next business day.						
Page						
Application Number 15-50035299 Page 3 Date 1/12/16						
Property Address 1250 CHIC ENNIS RD						
PARCEL NUMBER 07-1610 0121						
Application description CP MANUFACTURED HOME RA 30 CRITERIA						
Subdivision Name J B ENNIS LAND						
Property Zoning RES/AGRI DIST - RA-30						
Dominod Transaction						
Required Inspections						
Phone Insp						
Seq Insp# Code Description Initials Date						
Thiciais Date						
Permit type MANUFACTURED HOME PERMIT						
10 501 T501 R*MORTLE HOME FOUND / M WALL						
/ / I TOTAL RESIDENCE TOOMS.						
7 1 200 MATER COMMECTION						
20 818 Z818 PZ*ZONING INSPECTION						
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//_						

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. To conseque the consequence of t Date 1/12/16 Application Number 15-50035299 Subdivision Name J B ENNIS LAND Property Zoning RES/AGRI DIST - RA-30 Contractor Owner ------_____ STATE MOBILE HOME MOVERS YDE MARTIN 1085 A AQUILLA RD 9205 SAULS RD BENSON NC 27504 RALEIGH NC 27603 (910) 894-8038 (919) 796-8683 Applicant YDE MARTIN 9205 SAULS RD NC 27603 RALEIGH (919) 796-8683 Structure Information 000 000 28X48 3 BR Flood Zone FLOOD ZONE X Other struct info . . . # BEDROOMS

PROPOSED USE
SEPTIC - EXISTING?
WATER SUPPLY

COUNTY 3.00 Permit MANUFACTURED HOME PERMIT Additional desc . . Phone Access Code . 1123041 Issue Date . . . 1/12/16
Expiration Date . . 1/11/17 Valuation Permit LAND USE PERMIT Additional desc . . Phone Access Code . 1123033
Issue Date . . . 1/12/16
Expiration Date . . 7/10/16 Valuation Special Notes and Comments T/S: 02/12/2015 11:50 AM DJOHNSON --1362 CHIC ENNIS ****PREMISE NO 50107215**** PERMIT INCLUDES BLDG, ELEC, MECH, PLUMB INSULATION AND LAND USE.

HARNETT COUNTY CENTRAL PERMITTING

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 15-50035299 Page 2 Date 1/12/16

Special Notes and Comments Work must conform and comply with the STATE BUILDING CODE and all other State and local laws, ordinances & regulations

Application # 35299

Application #__(
Harnett County Central Permitting

PO Box 65 Lillington, NC 27546

SCANNED

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

<u>Application for Manufactured Home Set-Up Permit</u> (Please fill out each part completely) DATE

Home Owner Information (To be co	mpleted by owner of the ma	anufactured home)
Name: May tin Ide	Address: \	362 Chic Ennis Road
city: Bensun st	ate: <u>NC</u> Zip: <u>31504</u>	
Landowner Information (To be comp	oleted by landowner, if diffe	rent than above)
Name:		
		Daytime Phone: ()
Part II - Contractor Information (T	o be completed by Contractors	s or Homeowner, if applicable.
A. Set-Up Contractor Compar	ime, address, & phone must m	atch information on license)
Phone: 919-422-862	3 Address: 1085- A	Aguilla Road
City: Berson	State: VC	zip: 27504
, State Lic#_ 2859	Email:	
√B. Electrical Contractor Comp	pany Name: Ma Wyu	s Electrical
Phone: 919-639-483	Address: 131 Ma	lory Road
City: Angier	State:	_ Zip: るりも0 l
/ State Lic# 15077 U		
√C. Mechanical Contractor Contractor Mechanical Contractor Contractor	mpany Name: Mark 5	shockey
Phone: 919-624-217	Address: 544 0	ctober Dizina
City: Willow Spring	State: NC	Zip: 2759Z
State Lic# 12730 H3	Email:	
D. Plumbing Contractor Comp	pany Name: <u> Yv ≀0√ ≀† u</u>	Plumbing
Phone: 919-639-7200	Address: P.U. Bo	0x 254 J
		Zip: 21592
State Lic#	Email:	
Part III – Manufactured Home Infor	mation	
Model Year: 2015 Size: 28 X	48 Complete & fo	llow zoning criteria sheet
Park Name:	Lot Nu	mber:
information and have obtained their perminstallation will conform to the applicable	nission to purchase these per le manufactured home set-ur	the application is correct including the contractor mits on their behalf, and that the construction or requirements, and the Harnett County Zoning tion has been provided that this permit could be
Signature of Home Owner of	Agent	1-12-16 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.

SETUP



DATE:	THE RESERVE AND ADDRESS OF THE PERSON NAMED IN	6		SALES AGREEMENT		
BUYER(S):	-	IICKS YDE				
enharm.	WENDY M	ESSER YD	E	Annual Control of the		
DELIVERY AD	302 W S1E	WART ST	COATS NC	27521		
TELEPHON	F- ()	1302 CHIC		BENSON NC 27504		
BASE PRICE	Address of the last of the las		S	ALES PERSON FULL NAME: Catherine Long		
BASE PRICE	E:		\$77,443	Year 2015 1 100 110 110001 211RU28483RH15		
State Tax			\$1,839	Stock# HA/62		
Local Tax			M-makildhala	00 100 4 707 141 141		
				Year N/A Length N/A Width N/A Title #		
1. CASH PRIO	CE		\$79,282	Amount owed will be paid by: X Buyer Seller Owed to: OPTIONS:		
TITLE FEES			*40.4	13 seer hear pump installed, wire panel box to home for power, plurab water up to 75 ft. connections and sewer up to 20 ft. connections, brick skirting, 2 sets wood steps front and back to code. 3,000 septic tank allowance and 4500 well silowance.		
FILING FEE	S		\$40.0	SELLER RESPONSIBILITIES:		
			\$56.0	Deliver and set up to county node, pier and perm. floriers.		
				BUYER RESPONSIBILITIES: zoning and septic permits.		
2. TOTAL PAC	CKAGE PRI	CE	\$79.378.60			
Trade Allowa				I UNDERSTAND THAT I HAVE THE RIGHT TO CANCEL THIS PURCHASE BEFORE MIDNIGHT OF THE THIRD BUSINESS DAY AFTER THE DATE THAT		
			N/A			
Less Amount	Owed		N/A	AFTER THE THREE-DAY PERIOD, LINDEPSTAND THAT THE PURCHASE		
Trade Equity			N/A	FIVE MAYE ANY OBLIGATION TO GIVE ME RACK ATT THE MONEY THE A		
Cash Down Pa	ayment		\$500.00	PURCHASE AGREEMENT BY THE DEALER WILL CANCEL THIS		
3. LESS ALL CI	REDITS		\$500.00	ESTIMATED RATE OF FINANCING 8.24% NUMBER OF YEARS 23 ESTIMATED MONTHLY PAYMENTS \$671.51		
4. REMAINING	BALANCE		\$78,878,68	Surveys) agree: (1) that the terms and conditions on page two are part of this assemble (2) to purchase the above home including the options (3) they received and acknowledge receiving a completed copy of this		
Location Type	of Insulation	Thickness	R-Value	MET COLLEGE (4) Unit all promises and representations made are listed as		
Floors fiber		7.00	22	this dereament and (5) there we recorded according		
Exterior fibers	glass	3.50	11	unless evalenced in writing and signed by the parties.		
Cailings blows	n fiberglass	7.93	28	SELLER: BUYER:		
This insulation is Manufacturer and is a Frade Commission Ru	disclosed in cou	maliance with	the Federal	CMH Homes, Inc. d/b/a - Signature of: WENDY MESSER YDZ SIGNATION HOMES DUNN, NO BIANAME STATION HOMES DUNN, NO SIGNATURE OF: WENDY MESSER YDZ SIGNATURE OF: WENDY MESSER YDZ		
			2 2	001 W CUMBERLAND ST X Signature of:		
es Agreement/NC = (23) to 1 of 2	12) - Sisagr? 1014	Revised 04/2	013	X		
p . UI 2			1	Signature of: 003744842-00007		

LILLINGTON, NC 27546 For Inspections Call: (910) 893-7525 Fax: (910) 893-2793 Bldg Insp scheduled before 2pm available next business day. Page Application Number 15-50035299 Date 1/12/16 Property Address 1250 CHIC ENNIS RD PARCEL NUMBER 07-1610- - -0121- -Application description . . . CP MANUFACTURED HOME RA 30 CRITERIA Subdivision Name J B ENNIS LAND Property Zoning RES/AGRI DIST - RA-30 Required Inspections Phone Insp Initials Date Seq Insp# Code Description Permit type MANUFACTURED HOME PERMIT 501 T501 R*MOBILE HOME FOUND./ M. WALL 10 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 818 Z818 PZ*ZONING INSPECTION 820 Z820 PZ*ZONING/FINAL INSPECTION 999

HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

999

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. 15 50025200 Dato 1/12 Application Number 15-50035299 Date 1/12/16 Property Zoning RES/AGRI DIST - RA-30 Contractor Owner ------STATE MOBILE HOME MOVERS YDE MARTIN 1085 A AQUILLA RD 9205 SAULS RD RALEIGH NC 27603 BENSON (910) 894-8038 (919) 796-8683 Applicant YDE MARTIN 9205 SAULS RD RALEIGH NC 27603 (919) 796-8683 Structure Information 000 000 28X48 3 BR Flood Zone FLOOD ZONE X Other struct info # BEDROOMS PROPOSED USE DWMH
SEPTIC - EXISTING? NEW
WATER SUPPLY COUNTY 3.00

Permit MANUFACTURED HOME PERMIT Additional desc . . Phone Access Code . 1123041 Issue Date . . . 1/12/16 Valuation . . . 0
Expiration Date . . 1/11/17 Permit LAND USE PERMIT Additional desc . . Phone Access Code . 1123033 Issue Date . . . 1/12/16 Valuation Expiration Date 7/10/16

Special Notes and Comments T/S: 02/12/2015 11:50 AM DJOHNSON --1362 CHIC ENNIS *****PREMISE NO 50107215**** PERMIT INCLUDES BLDG, ELEC, MECH, PLUMB INSULATION AND LAND USE.

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 15-50035299 Page 2
Date 1/12/16

Special Notes and Comments Work must conform and comply with the STATE BUILDING CODE and all other State and local laws, ordinances & regulations