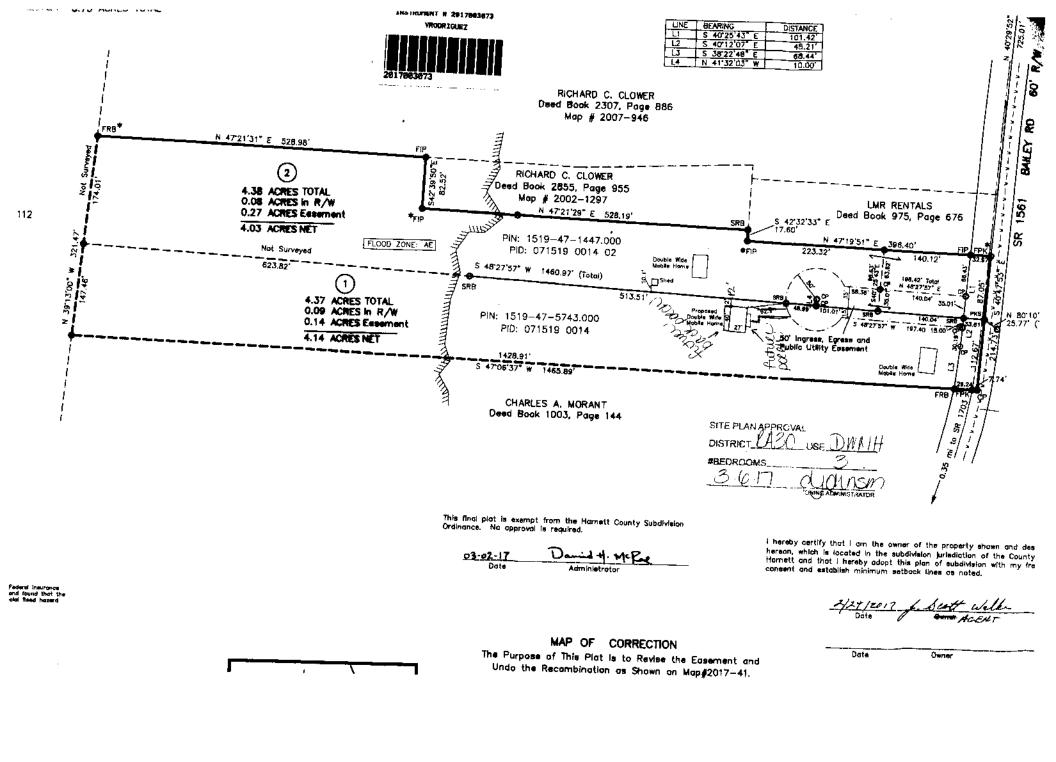
Initial Application Date: 3.6.17	tol 919.441.855	ion # 175004088
COUNTY OF Central Permitting 108 E. Front Street, Lillington, I	HARNETT RESIDENTIAL LAND USE APPLICA	CU# TION x: (910) 893-2793 www.harnett.org/permits
**A RECORDED SURVEY MAP, RECORDED DEED (OR O	, ,,	, , , , , , , , , , , , , , , , , , ,
City: Coats state N.C zip.	Mailing Address: 301 2721 Contact No: 910 (35.5)	Bailey Rd
APPLICANT: Elogic Cano City: Coats State: N-Czip: *Please fill out applicant information if different than landowner	Mailing Address:	Email:
CONTACT NAME APPLYING IN OFFICE:	Phon	∍#
PROPERTY LOCATION: Subdivision: State Road # 50 State Road Name: Parcel: 50 Watershed: 10 State Road Name: Zoning: 40 State Road Name: Watershed: 10 State Road Name: New structures with Progress Energy as service provider new contract of the structures with Progress Energy as service provider new contract of the structures with Progress Energy as service provider new contract of the structures with Progress Energy as service provider new contract of the structures with Progress Energy as service provider new contract of the structures with Progress Energy as service provider new contract of the structures with Progress Energy as service provider new contract of the structures with Progress Energy as service provider new contract of the structures with Progress Energy as service provider new contract of the structures with Progress Energy as service provider new contract of the structures with Progress Energy as service provider new contract of the structures with Progress Energy as service provider new contract of the structures with Progress Energy as service provider new contract of the structures with Progress Energy as service provider new contract of the structures with Progress Energy as service provider new contract of the structures with Progress Energy as service provider new contract of the structure of the structure with Progress Energy as service provider new contract of the structure of the st	PIN: 15 Q Q Q Q Q Q Q Q Q Q Q Q Q Q Q Q Q Q	
PROPOSED USE:		
SFD: (Sizex) # Bedrooms: # Baths: (Is the bonus room finished? (Basement(w/wo bath): Garage: Deck:_) yes () no w/ a closet? () yes () no (i	Monolithic Crawl Space: Slab: Slab: f yes add in with # bedrooms)
Mod: (Sizex) # Bedrooms # Baths (Is the second floor finished? () yes () no Any other site built additions? () yes () no
Duplex: (Sizex) No. Buildings:	No. Bedrooms Per Unit:	- 450
☐ Home Occupation: # Rooms:Use:	Hours of Operation:	#Employees:
Addition/Accessory/Other: (Sizex) Use:		,,
Water Supply: County Existing Well N	ew Well (# of dwellings using well) *Mu	st have operable water before final
Sewage Supply: New Septic Tank (Complete Checklist	f) Existing Septic Tank (Complete Checkli	st) County Sewer
Does owner of this tract of land, own land that contains a man		
Does the property contain any easements whether underground	<u> </u>	ty wasenine
Structures (existing or proposed): Single family dwellings:	Manufactured Homes:	Other (specify):
Rear 25 Actual 02 9	Comments:	ting
Nearest Building	Page 1 of 2	
· · · · · · · · · · · · · · · · · · ·	Faut 1 Dt /	03/11

		<i>1</i> ′	~\	أما	
SPECIFIC DIRECTIONS TO THE PROP	ERTY FROM LILLINGTON:	Lome	<u> </u>	t Clour	<u> </u>
1 07 1	wough Coats	Keep	Straigh	+	about
Box der Ihne	Coats and	Benson	<u>, will k</u>	ze Baile	<u> </u>
Rd to the	Right hand	Side :	take their	<u>Kight</u>	and
Keep Straigh	+ both Ny	house i	3hould	be on t	he
Plicent have	(5)de -				
7					
If permits are granted I agree to conform		State of North Carolin	a regulating such work	and the specification	ns of plans submitted.
If permits are granted I agree to conform I hereby state that foregoing statements	to all ordinances and laws of the are accurate and correct to the be	est of my knowledge.	Permit subject to revoc	ation if false informat	ion is provided.
Thereby state that loreguing statements	10 Comp	,	1/25/	17	
<u> </u>	re of Owner or Owner's Agent	<u> </u>	Date	<u>. </u>	
Signau	BIR Of CHURI Of Childs 2 where				

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



PROCEDURES AND GUIDELINES FOR MANUFACTURED HOMES

	RA-30 Criteria Certification
1,	EURGO COO, landowner/agent of Parcel Identification Number
	, located in an RA-30 Zoning District, do hereby certify the
follow	ing:
The verifie	multi-section manufactured home shall meet the following appearance standards, ed 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. The tongue or towing device must be removed.
to plac Occupa	ning this form, I acknowledge that I understand and agree to comply with each of the (7) appearance criteria listed above for the multi-section manufactured home I propose on the above referenced property. I further acknowledge that a Certificate of ancy (CO) entitling me to apply for electric service will not be issued until each ance criteria has been met and approved.

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

*Signature of Landowner/Agent

NAME: ELUOGIO CONO

APPLICATION #: 1750040888

_				ATTEICATION #;	
	,	*This application to be f	illed out when applying	for a septic system inspection.*	
<u>Coun</u>	ty Health I	Department Applicati	on for Improvement	Permit and/or Authorization to	Construct
IF THE INF PERMIT OF	ORMATION I R AUTHORIZA	N THIS APPLICATION IS F ATION TO CONSTRUCT SE	FALSIFIED, CHANGED, O HALL BECOME INVALID	R THE SITE IS ALTERED, THEN THE IMP	DOVEMENT
debeilatus n	ipon documenta 10-893-7525	ition submitted. (Complete si	te plan = 60 months; Comple	ete plat = without expiration)	vidiodi expiration
				CONFIRMATION #	 :
V Enva	Uninemai ri Il property	ealth New Septic Syste	<u>inible</u> Blace "nick pro		
lir	nes must be	clearly flagged approxim	<u>isible.</u> Flace pilik pro lately every 50 feet het	perty flags" on each corner iron of le	ot. All property
• P	lace "orange	house corner flags" at e	each corner of the proper	osed structure. Also flag driveways,	naranae Macke
Ol	ut buildings, i	swimming pools, etc. Pl	ace flags per site plan (developed at/for Central Permitting.	•
• P	lace orange	Environmental Health ca	ırd in location that is ea	sily viewed from road to assist in loca	ting property.
• 17	property is t	hickly wooded, Environn	nental Health requires t	that you clean out the <u>undergrowth</u> k freely around site. <i>Do not grade pr</i>	to allow the soil
• <u>A</u>	<u>II lots to be</u>	<u>addressed within 10 b</u>	usiness days after co	nfirmation. \$25.00 return trip fee m	av he incurred
<u>10</u>	<u>or tailure to l</u>	<u>uncover outlet lid, mar</u>	<u>k house corners and j</u>	property lines, etc. once lot confirm	ned ready.
• A	iter preparing	J proposed site call the v	oice permitting system/	at 910-893-7525 option 1 to schedul	e and use code
01	ou (alter sele	icting notification permit <u>umber given at end of re</u>	it multiple permits exis	t) for Environmental Health inspectio	n. <u>Please note</u>
• U:	se Click2Go	on IVR to verify results	Once approved proce	uest. eed to Central Permitting for permits.	
Envir	onmental H	ealth Existing Tank Ins	nections Code 800	sed to Central Permitting for permits.	:
• Fo	ollow above i	nstructions for placing fla	ags and card on proper	tv.	:
• P	repare for in	spection by removing se	oil over outlet end of	tank as diagram indicates, and lift lie	d straight up (<i>it</i>
pe	ossible) and t	then put lid back in pla	ce . (Unless inspection i	s for a septic tank in a mobile home p	ark)
		ELIDS OFF OF SEPTIC T			
• A1	rter uncoveri	ng outlet end call the vo	Dice permitting system :	at 910-893-7525 option 1 & select no lealth inspection. Please note confin	tification permit
		f recording for proof of re		eatti inspection. <u>Please note confi</u> r	mation number
				d to Central Permitting for remaining	permits :
SEPTIC				_	•
If applying	for authorizati	on to construct please indica	ate desired system type(s):	can be ranked in order of preference, must	choose one.
[} Acce	-		() Conventional		
{}} Alte	rnative	(C) Other	 .		
The applica _I uestion. I	ant shall notify f the answer is	the local health departments "yes", applicant MUST A	nt upon submittal of this a	application if any of the following apply to DOCUMENTATION:	o the property in
{}}YES	{_}} NO	Does the site contain any	Jurisdictional Wetlands?		
}YES	{ <u></u> } NO	Do you plan to have an ig	<u>rrigation system</u> now or it	the future?	
}YES	NO NO	Does or will the building	contain any drains? Plea	se explain	!
}YES	NO	Are there any existing we	ells, springs, waterlines of	Wastewater Systems on this property?	I
YES	{	Is any wastewater going	to be generated on the site	e other than domestic sewage?	!
}YES	1_1 NO	Is the site subject to appr	oval by any other Public	Agency?	
[}YES	(NO	Are there any Easements	or Right of Ways on this	property?	
}YES	{ <u>−</u> _}} NO	Does the site contain any	existing water, cable, pho	one or underground electric lines?	
		If yes please call No Cut	ts at 800-632-4949 to loca	ate the lines. This is a free service.	
Have Read	l This Applicat	tion And Certify That The I	nformation Provided Here	in Is True, Complete And Correct. Author	ized 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.

Cologia Cano
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

1/25/17 DATE



MOBILE HOME TAX PERMIT

COUNTY OF JOHNSTON	Johnston County Tax Collector	PERMIT #			
STATE OF NORTH CAROLINA Permission is granted to:	P.O. Drawer 451 Smithfield, N.C. 27577				
Owner Owner	152 MIMOSA DD Address	STATESVILLE	NC NC	28677	
Carrier to move the following mobile home:	1085-A AQUILLA RD Address	BENSON	NG	27504	
BEAC 1988 Mode	27X40 Size NCFLH	1 69A01286BH/NC	FLH69B91 Serial	286BH number	
From: 1360 DAVIS MILL RD Address	SELMA	NC	275	76	<u></u> .

This permit is issued in accordance with the provisions of G.S. 105-316.1 through G.S. 105-316.8 of North Carolina.

COATS

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

301 BAILEY RD

Address

Catherine D. Futch

27524

County-City Tax Collector

THIS PERMIT VALID FOR THIS MOVE ONLY.



MOBILE HOME TAX PERMIT

COUNTY OF JOHNSTON	
STATE OF NORTH CAROLINA	
Permission is granted to:	

Johnston County Tax Collector P.O. Drawer 451 Smithfield, N.C. 27577

PERMIT	#	UH	í	O	
	_				

114770

Permission is granted to:							
				2	000033483		
Owner Owner	RBOUR	152 MIMOSA RD Address	- STATESVILLE	NC-	28677		
Carrier		1085-A AQUILLA RD Address	BENSON	NC	27504		
to move the following mobile	e home:	, war coo					
— BEAC	1988						
Make	Model		NCFLH69A01286BH/NCF		286BH number	 _	
From:				Geriai	number		
-1380 DAVIS MILL Address	. RD — — —	SELMA	- NG-	- 2757	/6 -		
T							
10: <u>301 BAILEY RD</u> Address	<u> </u>	COATS	NC	2752	21		
· · · · · · · · · · · · · · · · · · ·							

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

Catherine D. Futch

by Coulier Westland

THIS PERMIT VALID FOR THIS MOVE ONLY.