

Initial Application Date: 4-2017

Application # 1750041205
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: STW INVESTMENT GROUP INC Mailing Address: 359 TRUTH RD.
City: NEW HILL State: NC Zip: 27582 Contact No: 919-669-1818 Email: TARTH@HAW.COM

*CONTACT APPLICANT: PARADISE HOMES Mailing Address: 6087 NC HWY 222 W.
City: KENLY State: NC Zip: 27582 Contact No: 919-284-5206 Email: PARADISE_HOMES@NC.RR.COM
919-669-2743 - CELL
919-284-5206 - 0

CONTACT NAME APPLYING IN OFFICE: KEVIN HINTON OR DABBLE Phone # 919-284-5206-0

PROPERTY LOCATION: Subdivision: STW INVESTMENT GROUP Lot #: 7 Lot Size: 2.11 ACRES
6FF 5/R JOHNSON RD 600
State Road # 1554 State Road Name: CRYSTAL BROOK DRIVE Map Book & Page: 2010, 275

Parcel: 017602 0031 07 PIN: 1602-71-4906.000
Zoning: R-30 Flood Zone: X Watershed: - Deed Book & Page: 2435, 54 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 76 x 32) # 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 10' UTILITY EASEMENT

Structures (existing or proposed): Single family dwellings: 0 Manufactured Homes: 0 Other (specify): 0

Required Residential Property Line Setbacks: Comments: _____

Front Minimum _____ Actual 50.9' _____

Rear _____ 33.5' _____

Closest Side _____ 150' _____

Sidestreet/corner lot _____ _____

Nearest Building _____ _____

on same lot _____ _____

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON:

See attached

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.

Marty Tol
Signature of Owner or Owner's Agent

4-12-17
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

NAME: PARADISE HOMES

APPLICATION #: 41205

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 # 021750-LL-4/2017

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 submission 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? **STANDARD UTILITY EASEMENT**
- 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.

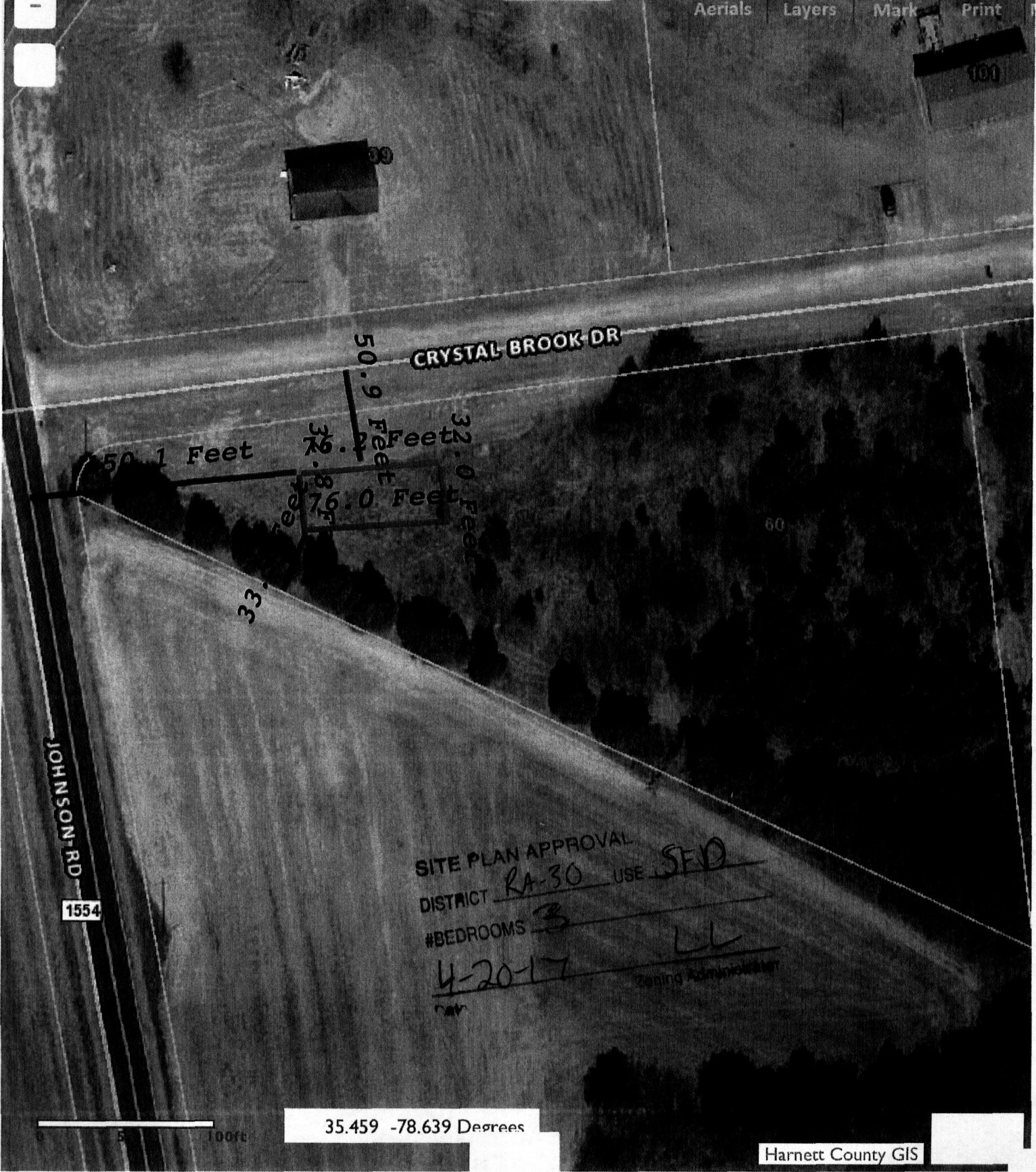
I Understand That I Am Solely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making The Site Accessible So That A Complete Site Evaluation Can Be Performed.

Matt
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

4-12-17
DATE



Find address or place



50.1 Feet
76.2 Feet
50.9 Feet
76.0 Feet
33.0 Feet
33.0 Feet

CRYSTAL BROOK DR

JOHNSON RD
1554

SITE PLAN APPROVAL
DISTRICT RA-30 USE SEVD
#BEDROOMS 3
4-20-17
Zoning Administrator



35.459 -78.639 Degrees

PROCEDURES AND GUIDELINES FOR MANUFACTURED HOMES

RA-30 Criteria Certification

I, D. Kevin Hinton, 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.

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.

D. Kevin Hinton
*Signature of Landowner/Agent

4/20/17
Date

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

Application for Manufactured Home Set-Up Permit
(Please fill out each part completely)

UNDER
CONTRACT
TO RELOCATE
LAND

Part I - Owner Information:

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

Name: PARADISE HOMES Address: 8087 NC 222 W.

City: KENLY State: NC Zip: 27542 Daytime Phone: (919) 284-5206

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

Name: STW INVESTMENTS Address: 359 TRUTH RD

City: NEW HILL State: NC Zip: 27542 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: EATMON MOBILE HOME MOVERS

Phone: 252-230-0810 Address: 205 BUWN RD, KENLY 27542

City: KENLY State: NC Zip: 27542

State Lic# 3552 Email: -

B. Electrical Contractor Company Name: DONALD HEATH COATES

Phone: 919-796-2926 Address: 306 PHILLIPS ROAD

City: SELMA State: NC Zip: 27576

State Lic# 24518-L Email: -

C. Mechanical Contractor Company Name: WOOD SVC. PROF INC - ROGER GOWER

Phone: 919-427-1338 Address: 343 SWIFT CREEK RD

City: SMITHFIELD State: NC Zip: 27577

State Lic# 7379 Email: WOOD SVC. PROF. INC - ROGER GOWER

D. Plumbing Contractor Company Name: WOOD SVC. PROF INC - ROGER GOWER

Phone: 919-427-1337 Address: 343 SWIFT CREEK RD

City: SMITHFIELD State: NC Zip: 27577

State Lic# 7379 Email: -

30557
Bridgers HVAC

20232
Bens Plumbing

Part III - Manufactured Home Information

Model Year: 2018 Size: 32 X 76 Complete & follow zoning criteria sheet

Park Name: NIA 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

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.

**PARADISE HOMES OF JOHNSTON COUNTY
OF NORTH CAROLINA, INC.**

8087 NC 222 West
KENLY, NORTH CAROLINA 27542
Phone (919) 284-5206 • Fax (919) 284-6042

| | | |
|---|-------|---------------------------------------|
| BUYER(S) Johnny C. Goins | PHONE | DATE 3/29/17 |
| ADDRESS 6108 Briarwood Drive, Raleigh, NC 27603 | | SALESPERSON D. Kevin Hinton |

| | | | | | |
|---|---------------------|----------------------|---------------------------------------|---------------------------------------|--------------|
| DELIVERY ADDRESS 60 Crystal Drive, Angier, NC 27501 | | | | | |
| MAKE & MODEL Champion Model DE-3977 | YEAR 2017 | BEDROOMS 3 | FLOOR SIZE L 76 W 32 | HITCH SIZE L 80 W 32 | STOCK NUMBER |

| | | | | |
|-----------------------------|---|-------|------------------------|-------------|
| SERIAL NUMBER RSO | <input checked="" type="checkbox"/> NEW <input type="checkbox"/> USED | COLOR | PROPOSED DELIVERY DATE | KEY NUMBERS |
|-----------------------------|---|-------|------------------------|-------------|

| LOCATION | R-VALUE | THICKNESS | TYPE OF INSULATION | BASE PRICE OF UNIT | \$150,000 | 00 |
|----------|---------|-----------|--------------------|--------------------|-----------|----|
| CEILING | | | | OPTIONAL EQUIPMENT | | |
| EXTERIOR | | | | | | |
| FLOORS | | | | SUB-TOTAL | \$150,000 | 00 |

THIS INSULATION INFORMATION WAS FURNISHED BY THE MANUFACTURER AND IS DISCLOSED IN COMPLIANCE WITH THE FEDERAL TRADE COMMISSION RULE 16CRF, SECTION 460.16.

| OPTIONAL EQUIPMENT, LABOR AND ACCESSORIES | NON-TAXABLE ITEMS |
|--|--|
| Base Price Includes: Home Set up and Delivery Land Improvements | VARIOUS FEES AND INSURANCE |
| | 1. CASH PURCHASE PRICE \$150,000 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 \$150,000 00 |

| | | |
|--|---|--------------|
| | SALES TAX (If Not Included Above) | |
| | 3. Unpaid Balance of Cash Sale Price | \$150,000 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.

REMARKS: **Seller to pay up to \$5,000.00 in Buyer's closing costs and/or prepaid items.**

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.

BALANCE CARRIED TO OPTIONAL EQUIPMENT \$

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

| | | | |
|---|------------|----------|------|
| DESCRIPTION OF TRADE-IN | N/A | 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 | | | |

**PARADISE HOMES OF JOHNSTON COUNTY
OF NORTH CAROLINA, INC.** DEALER

Not Valid Unless Signed and Accepted by an Officer of the Company or an Authorized Agent

By *D. Kevin Hinton* Approved

SIGNED X *Johnny C. Goins* BUYER

SOCIAL SECURITY NO. _____ / _____ / _____

SIGNED X _____ BUYER

SOCIAL SECURITY NO. _____ / _____ / _____

Lillington

North Carolina

Take S Main St, US-421 S, NC-27 E, Abattoir Rd and Live Oak Rd to Johnson Rd in Grove

19 min (13.3 mi)

- ↑ 1. Head north on S Main St toward E Harnett St
1.5 mi
- ↘ 2. Turn right onto US-421 S
3.3 mi
- ↙ 3. Turn left onto Leslie Campbell Ave
0.4 mi
- ⦿ 4. At the traffic circle, take the 2nd exit and stay on Leslie Campbell Ave
0.2 mi
- ⦿ 5. At the traffic circle, take the 2nd exit
302 ft
- ↑ 6. Continue onto Leslie Campbell Ave
1.4 mi
- ↗ 7. Merge onto NC-27 E
2.6 mi
- ↙ 8. Turn left onto Abattoir Rd/N Orange St
ⓘ Continue to follow Abattoir Rd
2.1 mi
- ↘ 9. Turn right onto Live Oak Rd
1.7 mi
- ↘ 10. Turn right onto Johnson Rd
25 s (0.2 mi)

Johnson Rd

Angier, NC 27501

CRYSTAL BROOKS OFF JOHNSON RD

These directions are for planning purposes only. You may find that construction projects, traffic, weather, or other events may cause conditions to differ from the map results, and you should plan your route accordingly. You must obey all signs or notices regarding your route.

