



I hereby certify that I have the authority to make necessary application, that the application is correct and that the construction will conform to the regulations in the Building, Electrical, Plumbing and Mechanical codes, and the Harnett County Zoning Ordinance. I state the information on the above contractors is correct as known to me and that **by signing below I have obtained all subcontractors permission to obtain these permits** and if **any** changes occur including listed contractors, site plan, number of bedrooms, building and trade plans, Environmental Health permit changes or proposed use changes, I certify it is my responsibility to notify the Harnett County Central Permitting Department of any and all changes.

**EXPIRED PERMIT FEES** - 6 Months to 2 years permit re-issue fee is \$150.00. After 2 years re-issue fee is as per current fee schedule.

*[Signature]*  
Signature of Owner/Contractor/Officer(s) of Corporation

9-30-20  
Date

**Affidavit for Worker's Compensation N.C.G.S. 87-14**

The undersigned applicant being the:

General Contractor     Owner     Officer/Agent of the Contractor or Owner

Do hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:

Has three (3) or more employees and has obtained workers' compensation insurance to cover them.

Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them.

Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance covering themselves.

Has no more than two (2) employees and no subcontractors.

While working on the project for which this permit is sought it is understood that the Central Permitting Department issuing the permit may require certificates of coverage of worker's compensation insurance prior to issuance of the permit and at any time during the permitted work from any person, firm or corporation carrying out the work.

Sign w/Title: *Donna Austin / Office Manager*    Date: 9-30-20



Initial Application Date: \_\_\_\_\_

Application # \_\_\_\_\_

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: Demond + Danisha Devane Mailing Address: 10 Bladen Street  
City: Spring Lake State: NC Zip: 28390 Contact No: 919-608-3383 Email: dadevane@gmail.com

APPLICANT\*: Donna Austin Mailing Address: 22019 US Hwy 17 N  
City: Hampstead State: NC Zip: 28443 Contact No: 910-803-0731 Email: donnaaustin@modularsforless.com

ADDRESS: 117 Bumbo Lane Lillington NC 27546 PIN: 100558 0100 01

Zoning: \_\_\_\_\_ Flood: \_\_\_\_\_ Watershed: \_\_\_\_\_ Deed Book / Page: 3674 / 473 477

Setbacks - Front: 113 Back: 166 Side: 118 Corner: \_\_\_\_\_

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 68 x 30) # Bedrooms 5 # Baths 3 Basement (w/wo bath) \_\_\_\_\_ Garage: \_\_\_\_\_ Site Built Deck: 2 On Frame \_\_\_\_\_ Off Frame ✓  
(Is the second floor finished? (✓) yes ( ) no Any other site built additions? (✓) yes ( ) no Porch
- Manufactured Home: \_\_\_\_\_ SW \_\_\_\_\_ DW \_\_\_\_\_ TW (Size \_\_\_\_\_ x \_\_\_\_\_) # Bedrooms: \_\_\_\_\_ 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  
(Need to Complete New Well Application at the same time as New Tank)

Sewage Supply: ✓ New Septic Tank \_\_\_\_\_ Expansion \_\_\_\_\_ Relocation \_\_\_\_\_ Existing Septic Tank \_\_\_\_\_ County Sewer  
(Complete Environmental Health Checklist on other side of application if Septic)

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): Off frame modular

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.

Donna Austin \_\_\_\_\_ 9.30.20  
Signature of Owner or Owner's Agent 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 CONTINUES ON BACK

strong roots • new growth



Application # \_\_\_\_\_

Harnett County Central Permitting  
PO Box 65 Lillington, NC 27546  
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

\* Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address, company name & phone must match information on license.

**Application for Residential Building and Trades Permit**

Owner's Name: Demond & Danisha Devane Date: \_\_\_\_\_  
Site Address: 117 Bombo Lane Lillington NC 27546 Phone: 910-608-3383  
Subdivision: \_\_\_\_\_ Lot: \_\_\_\_\_  
Description of Proposed Work: Build off frame modular home Total Job Cost: \$280,000.00

**General Contractor Information**

Custom Built Homes of the Carolinas 910 803 0731  
Building Contractor's Company Name Telephone  
22019 US Hwy 17N Hampstead NC 28443 donnaaustin@modularsforless.com  
Address Email Address  
75554

**Electrical Contractor Information**

Description of Work Hook up electric to home Service Size: 200 Amps T-Pole:  Yes  No  
Wells Electric 910-284-0604  
Electrical Contractor's Company Name Telephone  
165 Firefly Dr Wallace NC 28466 wells-at@yahoo.com  
Address Email Address  
21407

**Mechanical/HVAC Contractor Information**

Description of Work Hook up HVAC to home  
East Coast Heating & Air 910-617-4986  
Mechanical Contractor's Company Name Telephone  
Po Box 2365 Leland NC 28451 bmorris22@cc.rr.com  
Address Email Address  
30071

**Plumbing Contractor Information**


Description of Work Hook up plumbing for house # Baths 3  
HR Curtis Plumbing 919-770-0168  
Plumbing Contractor's Company Name Telephone  
6314 Carbonator Rd Sanford NC 27330 hrcurtis@windstream.net  
Address Email Address  
10924

**Insulation Contractor Information**

N/A \_\_\_\_\_  
Insulation Contractor's Company Name & Address Telephone

\*NOTE: General Contractor / owner must fill out and sign the second page of this application.

I/We Damond & Dasha Devere, hereby  
give Custom Built Homes of the Carolinas  
permission to sign or do whatever is needed to pull  
any and all permits on our home.

  
\_\_\_\_\_  
Buyer 1 Date 8-24-20

  
\_\_\_\_\_  
Buyer 2 Date 8-24-20

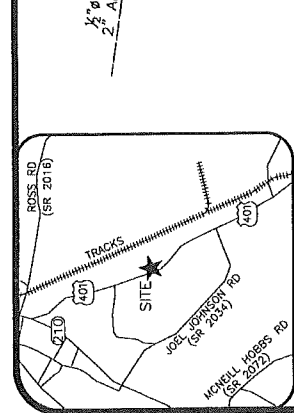
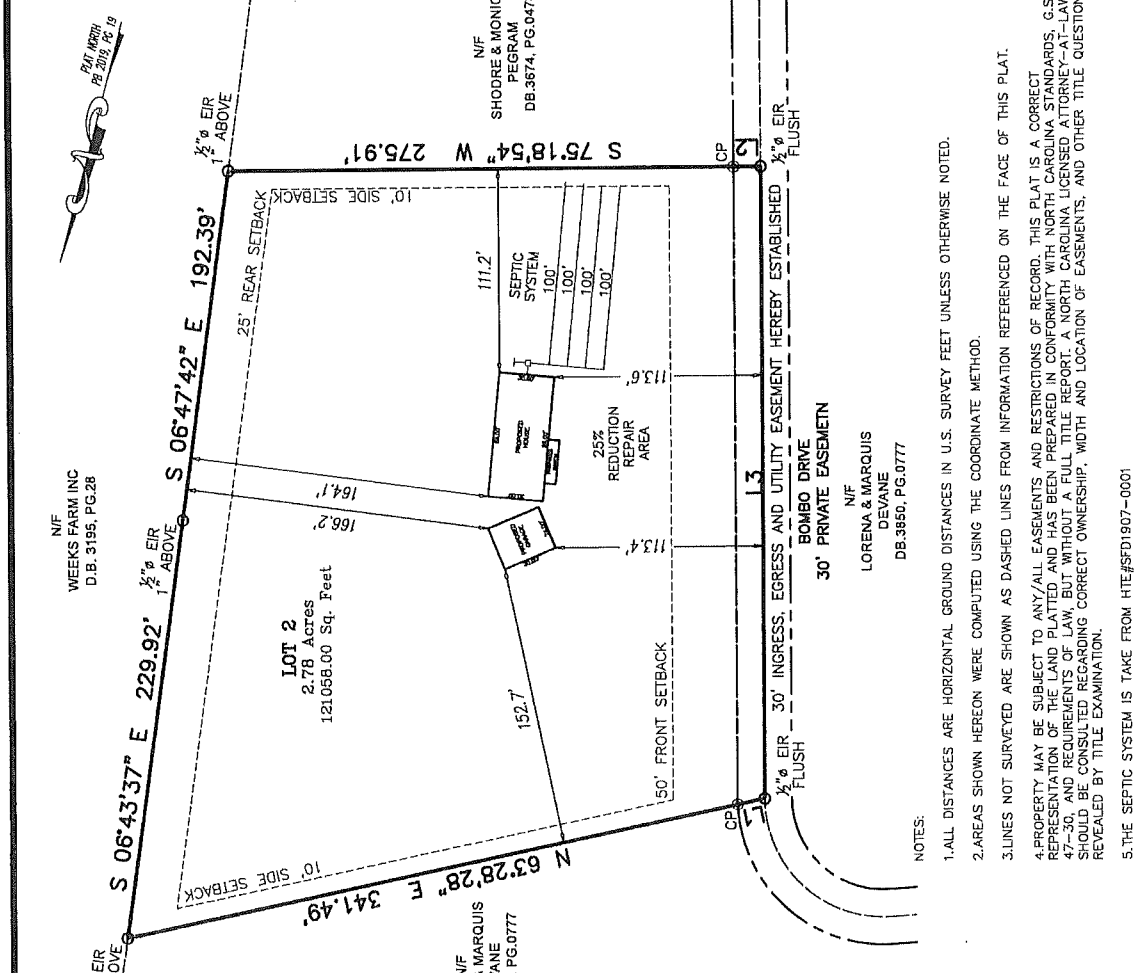
FOR  
 DEMOND DEVANE & DANISHA DEVANE  
 117 BOMBO DRIVE, ILLINGTON, NC 27546  
 LOT 2 DAVENE FAMILY HEIRS SUBDIVISION  
 ILLINGTON TWP., HARNETT CO., NC  
 P.B. 2019, PG. 16  
 910.897.2329 (FAX) 910.897.4178  
 910.897.2329 (FAX) 910.897.4178

DATE: 09-8-2020  
 SCALE: 1"=80'  
 DRAWN BY: BMC  
 PROJECT: 20-416

**ECLS**

THIS SURVEY IS OF AN EXISTING PARCEL OR PARCELS OF LAND AND DOES NOT CREATE A NEW STREET OR CHANGE AN EXISTING STREET.  
 SHAWN T. RUMBERGER, PLS. L-4909 DATE 9-8-2020  
 THIS MAP IS ONLY INTENDED FOR THE PARTIES AND PURPOSES SHOWN. THIS MAP IS NOT FOR RECORDATION. NO TITLE REPORT PROVIDED.

P R E L I M I N A R Y  
 P L O T P L A N



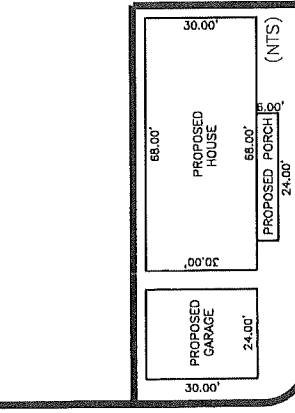
VICINITY MAP (NTS)

LEGEND  
 ○ = EXISTING IRON ROD (EIR)  
 ⊙ = CALCULATE POINT (CP)

SETBACKS  
 FRONT R/W 35'  
 FRONT 50'  
 SIDE 10'  
 REAR 25'  
 SIDE STREET 20'  
 ZONING: RA-20R

IMPERVIOUS AREA  
 HOUSE 2,040.00 SQ.FT.  
 GARAGE 720.00 SQ.FT.  
 TOTAL 2,760.00 SQ.FT.

LINE	BEARING	DISTANCE
L1	N 65°28'28" E	15.28'
L2	S 75°18'54" W	15.01'
L3	N 14°41'06" W	345.07'



- NOTES:
1. ALL DISTANCES ARE HORIZONTAL GROUND DISTANCES IN U.S. SURVEY FEET UNLESS OTHERWISE NOTED.
  2. AREAS SHOWN HEREON WERE COMPUTED USING THE COORDINATE METHOD.
  3. LINES NOT SURVEYED ARE SHOWN AS DASHED LINES FROM INFORMATION REFERENCED ON THE FACE OF THIS PLAT.
  4. PROPERTY MAY BE SUBJECT TO ANY/ALL EASEMENTS AND RESTRICTIONS OF RECORD. THIS PLAT IS A CORRECT REPRESENTATION OF THE LAND PLATTED AND HAS BEEN PREPARED IN CONFORMITY WITH NORTH CAROLINA STANDARDS, G.S. 47-30, AND REQUIREMENTS OF LAW, BUT WITHOUT A FULL TITLE REPORT. A NORTH CAROLINA LICENSED ATTORNEY-AT-LAW SHOULD BE CONSULTED REGARDING CORRECT OWNERSHIP, WIDTH AND LOCATION OF EASEMENTS, AND OTHER TITLE QUESTIONS REVEALED BY TITLE EXAMINATION.
  5. THE SEPTIC SYSTEM IS TAKE FROM HTE#JSD1907-0001

**DO NOT REMOVE!**

**Details: Appointment of Lien Agent**

Entry #: 1309389

Filed on: 09/09/2020

Initially filed by: dpgorilla1

**Designated Lien Agent**

Stewart Title Guaranty Company

Online: [www.liensnc.com](http://www.liensnc.com) [support@liensnc.com](mailto:support@liensnc.com)

Address: 223 S. West Street, Suite 900 /

Raleigh, NC 27603

Phone: 888-690-7384

Fax: 913-489-5231

Email: [support@liensnc.com](mailto:support@liensnc.com) [mailto:support@liensnc.com](mailto:mailto:support@liensnc.com)

**Owner Information**

Demond Devane  
10 Bladen Street  
Spring Lake, NC 28390  
United States  
Email: [dadevane@gmail.com](mailto:dadevane@gmail.com)  
Phone: 919-608-3383

**Project Property**

Demond Devane Property  
117 Bombo Lane  
Lillington, NC 27546  
Harnett County

**Property Type**

1-2 Family Dwelling

**Date of First Furnishing**

09/09/2020

**Print & Post**



**Contractors:**

Please post this notice on the Job Site.

**Suppliers and Subcontractors:**

Scan this image with your smart phone to view this filing. You can then file a Notice to Lien Agent for this project.

View Comments (0)

Technical Support Hotline: (888) 690-7384

# Harnett County Department of Public Health

## Improvement Permit

A building permit cannot be issued with only an Improvement Permit

ISSUED TO: Demand Devane PROPERTY LOCATION: US 4015, Lillington 117 Bamboo Dr.  
 SUBDIVISION \_\_\_\_\_ LOT # 2  
 NEW  REPAIR  EXPANSION   
 Type of Structure: SFD 5bedrm 30'x60' Site Improvements required prior to Construction Authorization Issuance: \_\_\_\_\_  
 Proposed Wastewater System Type: 25% Reduction III g  
 Projected Daily Flow: 600 GPD  
 Number of bedrooms: 5 Number of Occupants: 10 max  
 Basement  Yes  No  
 Pump Required:  Yes  No  May be required based on final location and elevations of facilities  
 Type of Water Supply:  Community  Public  Well Distance from well \_\_\_\_\_ feet Permit valid for:  Five years  
 Permit conditions: \_\_\_\_\_  No expiration

Authorized State Agent: [Signature] Date: 07/18/2018 SEE ATTACHED SITE SKETCH  
 The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This site is subject to revocation if the site plan, plat, or the intended use changes. The Improvement Permit shall not be affected by a change in ownership of the site. This permit is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.

## Construction Authorization

(Required for Building Permit)

The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .1958, and .1959 are incorporated by references into this permit and shall be met. Systems shall be installed in accordance with the attached system layout.

ISSUED TO: Demand Devane PROPERTY LOCATION: US 4015 Lillington 117 Bamboo Dr.  
 SUBDIVISION \_\_\_\_\_ LOT # 2  
 Facility Type: SFD 5bedrm 30'x60'  New  Expansion  Repair  
 Basement?  Yes  No Basement Fixtures?  Yes  No  
 Type of Wastewater System\*\* 25% Reduction III g (Initial) Wastewater Flow: 600 GPD  
 (See note below, if applicable  25% Red. III g (Repair)

**Installation Requirements/Conditions**

Septic Tank Size <u>1250</u> gallons	Number of trenches <u>4</u>	Exact length of each trench <u>100</u> feet	Trench Spacing: <u>9</u> Feet on Center
Pump Tank Size <u>1250</u> gallons	Trenches shall be installed on contour at a Maximum Trench Depth of: <u>18</u> inches (Trench bottoms shall be level to $\pm 1/4"$ in all directions)	Soil Cover: <u>6</u> inches (Maximum soil cover shall not exceed 36" above the trench bottom)	
Pump Requirements: _____ ft. TDH vs. _____ GPM		Aggregate Depth: _____ inches below pipe	_____ inches above pipe
Conditions: _____		_____ inches total	

**WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM ANY PART OF SEPTIC SYSTEM OR REPAIR AREA.  
 NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA.**

\*\*If applicable: I understand the system type specified is different from the type specified on the application. I accept the specifications of this permit.  
 Owner/Legal Representative Signature: \_\_\_\_\_ Date: \_\_\_\_\_

This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Construction Authorization shall not be transferred when there is a change in ownership of the site. This Construction Authorization is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit. SEE ATTACHED SITE SKETCH

Authorized State Agent: [Signature] Date: 07/18/2018  
[Signature] Construction Authorization Expiration Date: 07/18/2024

HTE# SFD1907-0001

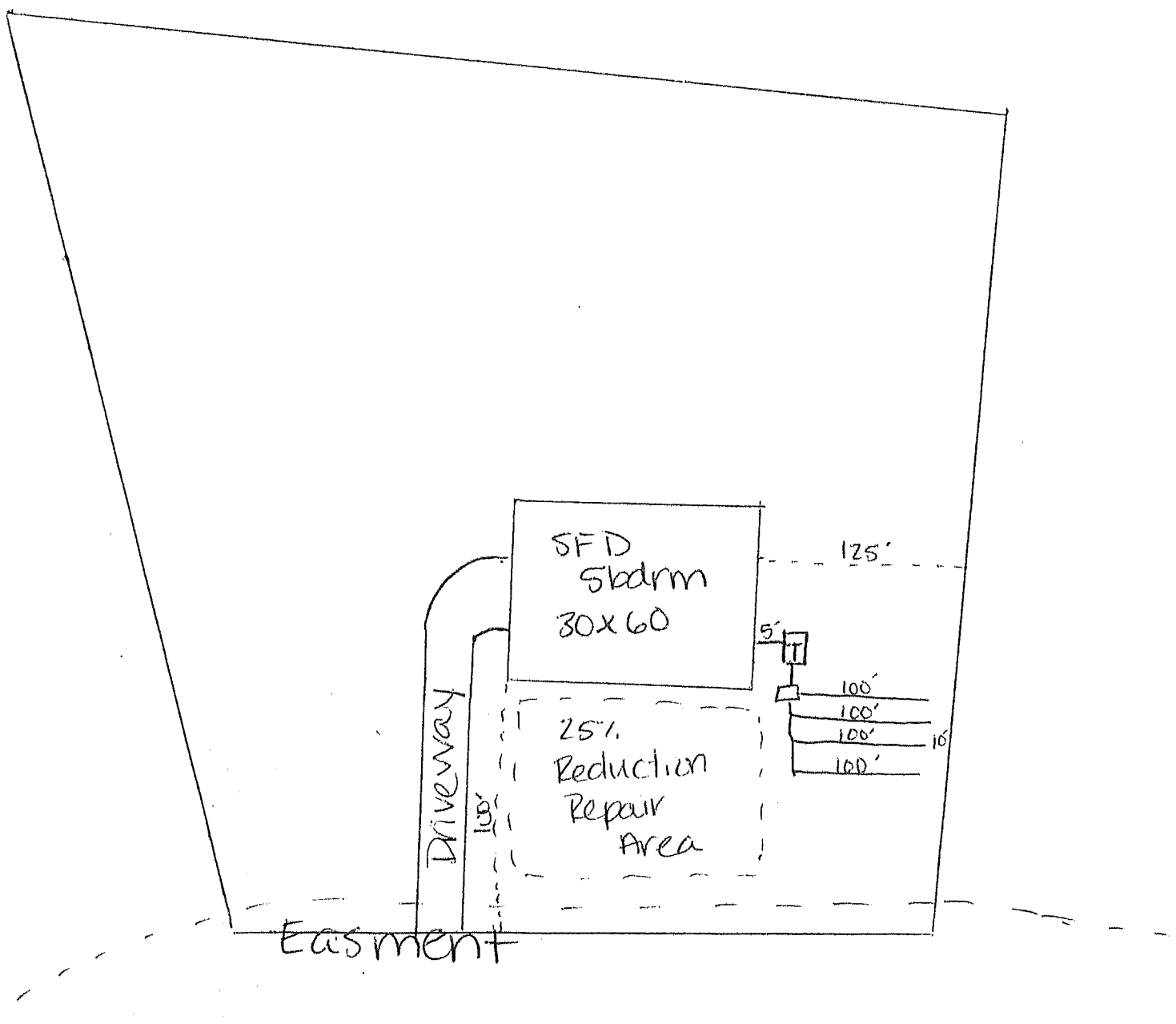
Permit # \_\_\_\_\_

# Harnett County Department of Public Health Site Sketch

ISSUED TO: Demond Devane PROPERTY LOCATOR: US 401 S, Lillington 117 Bomb Dr.  
SUBDIVISION \_\_\_\_\_ LOT # 2

Authorized State Agent: [Signature] Date: 07/18/2019  
Barbara REHS-I Drawing NTS

This drawing is for illustrative purposes only.  
System installation must meet all pertinent laws, rules,  
and regulations.





House  
↑

6x24  
free standing shed porch

House  
↑

Deck

Double 2x10x6 girder

2x8x10 joist 16"OC

6x6x16 supports 42" embedded with rebar and concrete. Through bolted with 5/8" bolts

Stairs

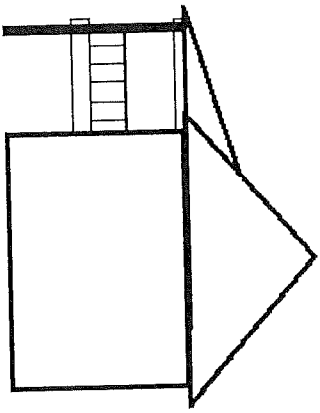
Roof

2x10x14 double header beam

2x8x12 rafters 24"OC

7/16 OSB

2x4x10 ceiling rafters for ceiling  
soffit/vinyl



lements: \_\_\_\_\_

15.9 KB

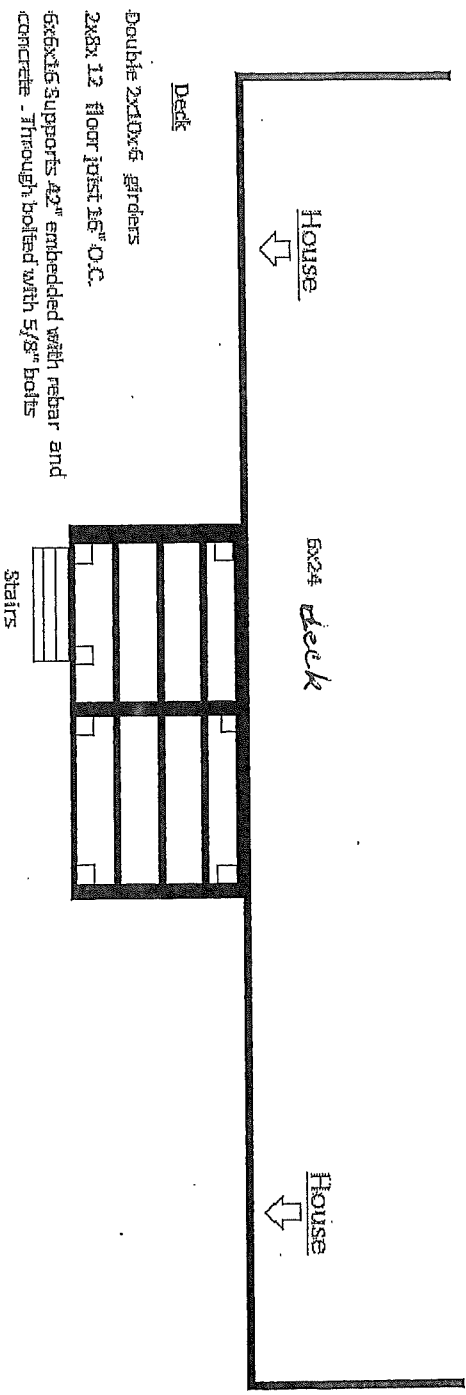
15.9 KB

From: Jason <lisaandjay\_01@centurylink.net>

Date: February 19, 2018 at 6:45:49 PM EST

To: Donna Austin <donnaaustin@modularforless.com>

Sent from Mail for Windows 10



For Registration Kimberly S. Hargrove  
Register of Deeds  
Harnett County, NC  
Electronically Recorded  
2019 Feb 20 11:46 AM NC Rev Stamp: \$ 0.00  
Book. 3674 Page: 473 - 477 Fee: \$ 26.00  
Instrument Number: 2019001956

HARNETT COUNTY TAX ID#  
10-0558-0100-01

TRUE AND CERTIFIED

02-20-2019 BY CW

**Prepared by and Return to:**  
**Reginald B. Kelly, Attorney at Law, P.O. Box 1118, Lillington, NC 27546**

*The attorney preparing this instrument has made no record search or title examination of the property described herein, and expresses no opinions as to title or tax consequences, unless contained in a separate written certificate.*

PID#: 100558 0100 01  
REVENUE STAMPS: -0-

STATE OF NORTH CAROLINA  
COUNTY OF HARNETT

**WARRANTY  
DEED**

This **WARRANTY DEED** is made the 1st day of February, 2019, by and between **Demond DeVane and wife, Danisha DeVane**, of 105 Bright Court, Aberdeen, NC, 28315; **Shodre Pegram and wife, Monica DeVane Pegram**, of 321 E. Forest Oaks Drive, Sanford, NC, 27330; and **Dwayne DeVane and wife, Angela DeVane**, of 813 Old World Drive, Harker Heights, TX, 76548 (hereinafter referred to in the neuter singular as "the Grantor") and **Demond DeVane and wife, Danisha DeVane**, of 105 Bright Court, Aberdeen, NC, 28315 (hereinafter referred to in the neuter singular as "the Grantee");

**WITNESSETH:**

**THAT** said Grantor, for valuable consideration, receipt of which is hereby acknowledged, has given, granted, bargained, sold and conveyed, and by these presents does hereby give, grant, bargain, sell and convey unto said Grantee, its heirs, successors, administrators and assigns, all of that certain piece, parcel or tract of land situate, lying and being in Lillington Township of said County and State, and more particularly described as follows:

BEING all of **Lot 2 containing 2.78** acres as shown on "Recombination Survey for DeVane Family Heirs" dated January 4, 2019 by Shawn T. Rumberger, PLS and recorded on January 22, 2019 in Map Number 2019-16, Harnett County Registry.

Submitted electronically by Kelly & West Attorneys PA in compliance with North Carolina statutes governing recordable documents and the terms of the submitter agreement with the Harnett County Register of Deeds.

For future reference to chain of see Deed Book 3613, Page 330, Harnett County Registry.

\*\*The property herein described is not the primary residence of the Grantor (NCGS 105-317.2)

**TO HAVE AND TO HOLD** the above-described lands and premises, together with all appurtenances thereunto belonging, or in anywise appertaining, unto the Grantee, its heirs, successors, administrators and assigns forever, but subject always, however, to the limitations set out above.

**AND** the said Grantor covenants to and with said Grantee, its heirs, successors, administrators and assigns that it is lawfully seized in fee simple of said lands and premises, and has full right and power to convey the same to the Grantee in fee simple (but subject, however, to the limitations set out above) and that said lands and premises are free from any and all encumbrances, except as set forth above, and that it will, and its heirs, successors, administrators and assigns shall forever warrant and defend the title to the same lands and premises, together with the appurtenances thereunto appertaining, unto the Grantee, its heirs, successors, administrators and assigns against the lawful claims of all persons whomsoever.

**IN WITNESS WHEREOF**, the Grantor has hereunto set its hand and seal and does adopt the printed word "SEAL" beside its name as its lawful seal.

GRANTOR

[Signature] (SEAL)  
DEMOND DEVANE

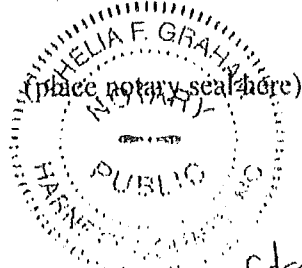
[Signature] (SEAL)  
DANISHA DEVANE

\*\*\*\*\*

STATE OF North Carolina  
COUNTY OF Harnett

I, a Notary Public of the County and State aforesaid, certify that Demond Devane & Danisha Devane personally appeared before me this day and acknowledged the due execution of the foregoing instrument.

Witness my hand and official seal, this 1st day of February, 2019.



[Signature]  
Notary Public

My Commission Expires: 8/8/2021

HARNETT COUNTY  
DEPARTMENT OF PUBLIC UTILITIES  
Equal Opportunity Provider and Employer

RESIDENTIAL WATER/SEWER USER AGREEMENT

\*COPY OF RECORDED DEED & PICTURE ID ARE REQUIRED\*

( ) Water Water and Sewer District of Harnett County

( ) Retrofitted Sprinkler Connection (For accounts with county sewer)

( ) Full Service Sprinkler Connection

Owner's Mailing/Billing Address: 10 Bladen Street  
Spring Lake NC 28390

For Office Use Only:

Demand & Danisha Devane  
LAND OWNER'S NAME

AMOUNT PAID

10 Bladen Street  
CURRENT STREET, ROUTE OR P.O. BOX

CUSTOMER NO.

Spring Lake NC 28390  
CITY OR TOWN, STATE, ZIP

PROPERTY NO.

919-608-3383  
TELEPHONE NUMBER

STATE RD NAME & NO.

6

NUMBER OF PERSONS LIVING IN

246-39-4867 NC 20815631

OWNER SOCIAL SECURITY & DRIVERS LICENSE #

238-57-1910 NC 21745250

SPOUSE'S SOCIAL SECURITY & DRIVERS LICENSE#

Enviva Mangement 7200 Wisconsin Ave. Bethesda, MD 910-705-6423

EMPLOYER, ADDRESS AND PHONE NUMBER

Harnett County Schools 1008 S 11th St. Lillington, NC 27546

SPOUSE'S EMPLOYER, ADDRESS AND PHONE NUMBER

Monica Pegram 155 Bombo Dr. Lillington, NC 27546 919-523-0407

NAME OF NEAREST RELATIVE, ADDRESS AND PHONE NUMBER

6/6/2018

This Agreement, made and entered into this the 25<sup>th</sup> day of September, 2018, between the Harnett County Department of Public Utilities, as operator of the water supply and distribution system indicated above, (hereinafter "County") and Demond's Danisha Devane (hereinafter "Owner").

WITNESSETH:

The County, as operator of the water supply and distribution system indicated above, sells water to citizens and residents of Harnett County. The County also treats wastewater for its citizens and residents where such treatment facilities are located within Harnett County. The Owner above named desires to purchase water and/or sewer treatment services from the County and further desires to enter into this Agreement with the County to obtain these services described.

NOW THEREFORE, In consideration of the mutual promises herein set forth, it is agreed by the County and Owner as follows:

1. The property which is the subject of this Agreement and to which water shall be supplied and/or sewer treatment services provided is described as follows;
2. Owner agrees to pay to County the amount of \$ 2,500 per connection as a tap-on charge, said amount being due upon the execution of this Agreement by Owner.
3. County, pursuant to its Rules and Regulations, agrees to provide a water and/or sewer service connection on the above described property and to provide potable water and treatment of said wastewater to the Owner, provided that there is an existing water line capable of providing a connection on said property. **IN THE EVENT THE COUNTY DETERMINES THAT THERE IS NO EXISTING WATER AND/OR SEWER LINE CAPABLE OF PROVIDING A WATER SERVICE CONNECTION TO THE PROPERTY DESCRIBED ABOVE, ALL MONIES PAID PURSUANT TO THIS RESIDENTIAL WATER/SEWER USER AGREEMENT WILL BE REFUNDED TO OWNER.**
4. Owner agrees to pay to County a minimum amount of Twenty-five Dollars (\$25.00) as a water deposit (and \$25 as a sewer deposit, if water and sewer tap requested, \$50 total), provided they are approved by the On-line Utility Database procedure described in Section 20 (c) of the County Rules and Regulations. If not approved by the above-mentioned procedure, the owner agrees to pay a minimum of Fifty Dollars (\$50.00) as a water deposit (and \$50 as a sewer deposit, if water and sewer tap requested, \$100 total). This deposit may be returned without interest as provided by said Rules and Regulations. Said deposit shall be due upon the execution of this Agreement by Owner.
5. Owner grants the County, its successors and assigns, a perpetual easement in, over, under, and upon the above described land with the right to erect, construct, install, lay and thereafter use, operate, inspect, repair, maintain, replace and remove water and/or sewer lines, meters, meter service facilities and appurtenant facilities thereon, together with the right of ingress and egress over adjacent land for the purposes mentioned above.
6. Owner shall install and maintain at Owner's own expense a 3/4 inch cut-off valve on the Owner's side of the County's water meter and a service line which shall begin at the meter and extend to the dwelling or place of use, and such other facilities as may be required by the Inspections Section of the Harnett County Planning and Inspections Department. The service line shall connect with the water system of the County at the nearest place of desired use by the Owner, provided the County has determined in advance that the county water system is of sufficient capacity to permit the delivery of water at that point.
7. Owner agrees to comply with all requirements, rules and regulations applicable to water users adopted by the Division of Health Services of North Carolina Department of Human Resources. Owner further agrees that upon and after the date a plumbing connection is made between the Owner and the County, Owners shall allow no cross connection to exist between the County's system and any pipeline containing a contaminant or any pipeline connected to other present or future sources of water.
8. Owner agrees to pay for water and/or sewer service at such rates, time, and place as shall be determined by the County and agrees to the penalties for non-compliance with the above, as set out in the County's Rules and Regulations.
9. County shall install a water and/or sewer service connection for the Owner, and Owner shall then have thirty (30) days from the date of such installation to make the plumbing connection from the place of use on the above described property to the

6/6/2018

County's system. Charges for water and/or sewer shall commence on the date that the plumbing connection is completed, but in no event later than the end of the thirty (30) day period. That is to say, if the plumbing connection is not completed by the end of the thirty (30) day period, user charges shall commence and Owner shall be obligated to pay the minimum user bill from and after the end of such period, regardless of whether water and/or sewer service is being provided to Owner.

9A. THIS PARAGRAPH APPLIES ONLY TO AGREEMENTS FOR RETROFITTED SPRINKLER CONNECTIONS.

No monthly minimum charge will be made to Owner except during those months when the connection has been used. The Bill rendered will be for gallons used, but in no event less than the applicable minimum bill. A separate bill will be provided for the connection and the same schedule of rates applicable in the service District shall apply to it. No sewer charges will be made to Owner for water used through the connection. The Retrofitted Sprinkler Connection shall not be connected to any plumbing or other pipeline where residential water there from is required to be discharged into the public sewer system.

10. Owner agrees to abide by the Rules and Regulations of the County as from time to time promulgated by the Harnett County Board of Commissioners, and further agrees to abide by such other Harnett County ordinances, rules and regulations with respect to water and/or sewer service connections, as are adopted by the Harnett County Board of Commissioners. Additionally, Owner agrees to obtain the necessary inspections and permits related to water and/or sewer service connections as required by the Inspections Section of the Harnett County Planning and Development Department.

11. County shall purchase and install a cutoff valve and water meter for each service. The County shall own said meter and shall have the exclusive right to use it.

12. Owner agrees that there shall be one water and/or sewer connection for each building or structure requiring connections on the above described property. A tap-on charge shall be due for each such connection.

13. County shall have final jurisdiction on any question of location of any service line connection to its distribution system; shall determine the allocation of water to Owner in the event of a water shortage and may shut off water to Owner if Owner allows a connection or extension to be made to Owner's service for the purpose of supplying water and/or sewer service to another user.

14. In the event User transfers title or agrees to transfer title to the above described property, before or after such connection, User agrees that this agreement shall run with the property title thereto and agrees to advise the new owner with respect hereto and furnish new owner a copy thereof.

15. After County has executed this Agreement, a copy shall be provided to Owner by person delivery or by mailing to the Owner's address as indicated above.

Signed by Owner this 25 day of September, 2018

*Demond Hill*  
Owner

*Demisha Rouse*  
Owner

*Kellee Bucke*  
Witness

Signed by County this \_\_\_\_\_ day of \_\_\_\_\_, 2018

**HARNETT COUNTY DEPARTMENT  
OF PUBLIC UTILITIES**

BY: \_\_\_\_\_  
Steve Ward, Director

WHEN RETURNING THIS AGREEMENT BY MAIL PLEASE SENT TO:  
Harnett County Department of Public Utilities

6/6/2018



Post Office Box 1119  
Lillington, NC 27546

APPLICATION DIRECTIONS

DATE: 9/25/2020

Demond DeVane / Danisha DeVane is requesting a water and/or sewer service at the location as noted below. This request is for a 1" inch water service and/or a residential sewer service. The cost of the service will be as follows:

Water tap total cost + deposit:

3/4" \$2800

1" \$3500

2" \$4500

Residential Sewer tap total cost + deposit:

ALL DISTRICTS \$3500

BUNNLEVEL & RIVERSIDE \$4500

Retrofitted sprinkler tap fee for customers with county sewer: \$300

\*There will also be a deposit on all new accounts for water and/or sewer as required.

For all other sizes refer to Harnett County Department of Public Utilities @ (910) 893-7575.

Should a line extension be required to install this service, the customer would be required to pay the amount of \$ \_\_\_\_\_ before the installation of the requested service. This amount is based on materials and labor as required to extend the line to the customer's property.

DIRECTIONS TO LOCATION OF REQUESTED TAP: Detailed Map/Description

117 Bombo Lane Lillington NC 27546

CUSTOMERS SIGNATURE Danisha Devane  
Demond A. Devane

Office Use:

This service can be installed as noted above. \_\_\_\_\_

This service requires a line extension: cost above. \_\_\_\_\_

Date of returned notification from Maintenance. \_\_\_\_\_

Maintenance Personnel Signature: \_\_\_\_\_

6/6/2018

# Acknowledgement

STATE OF North Carolina

COUNTY OF Cumberland

I certify that Demond & Danisha Devane personally appeared before me this day, acknowledging to me that he or she signed the foregoing document: Residential Water/Sewer Agreement.  
Name or description of attached document

I further certify that (select one of the following identification options):

- I have personal knowledge of the identity of the principal(s)
- I have seen satisfactory evidence of the principal's identity, by a current state or federal identification with the principal's photograph in the form of a NCDL.  
type of identification
- A credible witness, \_\_\_\_\_, has sworn or affirmed to me the  
name of credible witness  
identity of the principal, and that he or she is not a named party to the foregoing document, and has no interest in the transaction.

Date: 01/25/2020

Taylor Baker  
Notary Public  
Taylor Baker  
Typed or Printed Notary Name

My commission expires: 3/16/2025

