

**E. J. WOMACK ENTERPRISES INC.
DBA COUNTRY FAIR HOMES**

3335 NC 87 Highway S.
SANFORD, NORTH CAROLINA 27332
(919) 775-3600 • Fax: (919) 775-7533

BUYER(S) <i>Terry Lee Wilson</i>	PHONE <i>870 321-8912</i>	DATE <i>7-21-18</i>
ADDRESS <i>66 Harding Ln, Cameron, NC</i>	SALESPERSON <i>Chris</i>	
DELIVERY ADDRESS <i>westside Park, Cameron, NC</i>		

MAKE & MODEL <i>Fleetwood 166632</i>	YEAR <i>2018</i>	BEDROOMS <i>3</i>	FLOOR SIZE <i>L 66 W 16</i>	HITCH SIZE <i>L 70 W 16</i>	STOCK NUMBER
SERIAL NUMBER <i>FLE270VA-73794A</i>	COLOR		PROPOSED DELIVERY DATE		KEY NUMBERS
NEW <input checked="" type="checkbox"/> USED <input type="checkbox"/>					

LOCATION	R-VALUE	THICKNESS	TYPE OF INSULATION
CEILING			
EXTERIOR			
FLOORS			

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

BASE PRICE OF UNIT	\$ <i>45,550.00</i>
OPTIONAL EQUIPMENT	<i>ENC</i>
SUB-TOTAL	\$ <i>45,550</i>
SALES TAX	<i>ENC</i>

OPTIONAL EQUIPMENT, LABOR AND ACCESSORIES	
<i>Del & Set to County Codes</i>	\$
<i>Vinyl Skirting</i>	
<i>Electrical & Plumbing Hookup</i>	
<i>Heat Pump</i>	
<i>2 Sets of steps</i>	
<i>Permits</i>	
<i>Taxes</i>	
<i>(Tires & Axles to be Returned to the Dealer)</i>	
BALANCE CARRIED TO OPTIONAL EQUIPMENT	\$

NON-TAXABLE ITEMS	
VARIOUS FEES AND INSURANCE	
CASH PURCHASE PRICE	\$ <i>45,550.00</i>
TRADE-IN ALLOWANCE	\$
LESS BAL. DUE on above	\$
NET ALLOWANCE	\$
CASH DOWN PAYMENT	\$ <i>45,550.00</i>
CASH AS AGREED	\$
LESS TOTAL CREDITS	\$
SUB-TOTAL	\$
SALES TAX (If Not Included Above)	
Unpaid Balance of Cash Sale Price	\$ <i>45,550.00</i>

Dealer and Buyer certify that the additional terms and conditions printed on the other side of this Agreement 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 AGREEMENT. BUYER(S) ACKNOWLEDGE RECEIPT OF A COPY OF THIS ORDER AND THAT BUYER(S) HAVE READ AND UNDERSTAND THE BACK OF THIS AGREEMENT.

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.

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

DESCRIPTION OF TRADE-IN	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		

E. J. WOMACK ENTERPRISES INC. DBA COUNTRY FAIR HOMES DEALER	SIGNED X <i>Terry L. Wilson</i> BUYER SOCIAL SECURITY NO. _____ / _____ / _____ SIGNED X _____ BUYER SOCIAL SECURITY NO. _____ / _____ / _____
Approved By <i>Chris</i>	

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: Terry Wilson Address: 216 Westside DV
City: Cameron State: N.C. Zip: 28326 Daytime Phone: 810-321-8092

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

Name: Jimmy Cook Address: 17140 NC 27 West
City: Sanford State: NC Zip: 27332 Daytime Phone: (910-308-2492)

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 MH Movers
Phone: 919-75-3600 Address: 3335 NC Hwy 875
City: Sanford State: NC Zip: 27332
State Lic# 3400 Email: _____

B. **Electrical Contractor** Company Name: Edwin Johnson
Phone: 919-499-3475 Address: 1610 Cedarsprings Rd
City: Sanford State: NC Zip: 27330
State Lic# 19422-L Email: NTA

C. **Mechanical Contractor** Company Name: Tin Shop
Phone: 919-208-8340 Address: 3489 Edwards Rd
City: Sanford State: NC Zip: 27332
State Lic# 22513 Email: _____

D. **Plumbing Contractor** Company Name: Raven Rock MH Movers
Phone: 919-75-3600 Address: 3335 NC Hwy 875
City: Sanford State: NC Zip: 27332
State Lic# 3400 Email: N/A

Part III - Manufactured Home Information

Model Year 2018 Size: 16 X 70 Complete & follow zoning criteria sheet

Park Name: Westend MHP Lot Number: 19

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.

Clayton P. [Signature]
Signature of Home Owner or Agent

8/13/18
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.