

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)

Part I - Owner Information:

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

Name: Angela Kelly Address: 236 Still pond Lane
City: Cameron State: NC Zip: 28326 Daytime Phone: (919) 478-9258

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

Name: Johnny Faircloth Address: 152 Rental lane
City: Sanford State: NC Zip: 27332 Daytime Phone: (919) 499-8211

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: Home owner - Angela Kelly
Phone: 919 478-9258 Address: 236 Still pond Ln Cameron
City: Cameron State: NC Zip: 28326
State Lic# _____ Email: AKellyCAM.AM@gmail.com
- B. **Electrical Contractor** Company Name: Home owner - ~~Angela Kelly~~
Phone: 919 478-9258 Address: 236 Still pond Ln
City: Cameron State: NC Zip: 28326
State Lic# _____ Email: AKelly CAM. AM@gmail.com
- C. **Mechanical Contractor** Company Name: Home owner - Angela Kelly
Phone: 919 478-9258 Address: 236 Still pond Lane
City: Cameron State: NC Zip: 28326
State Lic# _____ Email: AKelly CAM. AM@gmail.com
- D. **Plumbing Contractor** Company Name: Home owner - Angela Kelly
Phone: 919 478-9258 Address: 236 Still pond Lane
City: Cameron State: NC Zip: 28326
State Lic# _____ Email: AKelly cam.am@gmail.com

Part III - Manufactured Home Information

Model Year: 1998 Size: 14 x 80 Complete & follow zoning criteria sheet

Park Name: Pine Village Mobile Home Park Lot Number: 152

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.

Angela Kelly
Signature of Home Owner or Agent

10/31/18
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.

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8/1/18

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Moving Permit from Maricopa County Law Dept
Set up Application
Copy of Lease Agreement for let



MOBILE HOME MOVING PERMIT

COUNTY OF Harnett
STATE OF NORTH CAROLINA

PERMIT NUMBER 10312018

Date October 31, 2018

Permission is granted to:

Angela Kelly 236 Still Pond Ln Cameron NC 28326

Owner

Address

Clayton Mobile Home Movers 1921 Keller Andrews Rd Sanford NC 27332

Carrier

Address

to move the following mobile home:

Redman

1998

80x14

13840571

Make

Model

Size

Serial Number

From: 236 Still Pond Ln Cameron NC 28326 PID 099566 0086 01
Address

To: 152 Rental Ln Sanford NC 27332 PID 039576 0101
Address

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

THIS PERMIT VALID FOR THIS MOVE ONLY.

Crystal Thomas
County-City Tax Collector

Lease Agreement

I/We offer and agree to Rent from Johnny Faircloth, The property located at 152 Rental lane Sanford 27332 Beginning 7-26-18 to N/A 7-26-19 Rent at the rate of \$ 225 per month, payable on or before the first of each month. Late fees after the 5th day of each month will be \$25.00(Due and payable with rent).

Renter further agrees:

1. To deposit with the owner, receipt of which is herewith acknowledged \$ 0 security for performing of all the conditions of this contract. Which sum, or so much thereof as may be necessary, may be applied by the owner toward the remedy of default by tenant, and the remainder thereof, if any shall be refunded to the tenant as soon as possible after tenant vacates the premises and terminates this contract.
2. The tenant must give a 30day notice prior to moving or he/she will be liable for rent up to 30day from the date they vacate the premises or until said property is rented.
3. That the premises have been inspected and found to be in good condition. Any damages other than normal wear and tear will be at the expense of the tenant.
4. That the property shall not be used for any unlawful activities, or immoral practice that would constitute a nuisance.
5. Not to sublet the premises or any part thereof, and that the premises shall be occupied only by these parties specified.
6. To permit owner to inspect property with reasonable notice to tenants.
7. All utilities services to be paid by renter during occupancy and upon vacating, to pay for all utility services due, to see that the property is swept out, trash removed, home left secured and clean, keys returned to owner.
8. No pets allowed indoors, No exceptions. No Pets
9. If the premises is abandoned or becomes vacant during the term of this contract, or without notice, or the tenant fails to pay rent when due, or violates any other provision of this contract, the owner shall have the right to terminate this contract, reenter and take possessions of the premises. Any legal action required during the term of the contract will be at the tenant's expense.

Tenant Angie Kelly Date 7-26-18

Tenant _____ Date _____

Day Time telephone number _____

Landlord: Johnny Faircloth Date 7-26-18

Property Manager: Margaret Lemons Telephone number: 919-353-2250

Address: 213 Dickens Rd., Broadway NC 27505

*** No refund. ***Cut grass.***Change filters!!!!!!

haul trash OFF

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