Marty Wright Home Sales, Inc. 10201;Andrew Jackson Highway Laurol Hill, NC 28351 (910) 563-5933

ENTENNS C 1 GOVERTY MOVESTARS	PHONE 19-763 2135 DATES 7.19							
ADDRESS P. PORY 196 (WIYICK, NC	27525 SHESTERSON -07534							
DELIVERY ADDRESY UYS DC HWY 55 F FR	UID NC 78325							
MAKERMODEL	YEAR EXERCIONS PLOOR SIZE   HITCH SIZE STOCKNUMBER							
	020 3 165 W14.70 W4							
SERVE NUMBER COTOR OF NEW GUSED DZ	167 WOODS PROPOSED DELIVERY DATE KEY NUMBERS							
LOCATION   R-VALUE THICKNESS  TYPE OF INSULATION	BASE PRICE OF UNIT \$ 411/2/							
CEILING 28 FACILLY	OPTIONAL EQUIPMENT							
EXTERIOR								
FLOORS 127.	SUB-TOTAL \$							
THIS INSULATION INFORMATION WAS FURNISHED BY THE MANUFACTURER AN IS DISCLOSED IN COMPLIANCE WITH THE FEDERAL TRADE COMMISSION RUL								
16CRF, SECTION 460.16.	" Javera and " " " " " " " " " " " " " " " " " " "							
OPTIONAL EQUIPMENT, LABOR AND ACCESSORIES	NON-TAXABLE ITEMS							
and the same of th	VARIOUS FEES AND INSURANCE 5200							
<del></del>	CASH PURCHASE PRICE. 3016-4 54							
<u> Andrewski za zakonienia zakonie</u>	TRADE-IN ALLOWANCE \$ LESS BALL DUE on above \$							
	NET ALLOWANCE 5							
Tricipialy LIZEP	CASH DOWN PAYMENT \$							
	CASHAS AGREED SOLL SALL							
	LESS TOTAL CREDITS \$							
	SUB-TOTAL S SALES TAX (If Not Included Above)							
<u> </u>	Unpaid Balance of Cash Sale Price \$ /2							
	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							
<u> </u>	- 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%							
BALANCE CARRIED TO OPTIONAL EQUIPMENT S	NUMBER OF YEARS							
All used homes are sold "AS IS" <u>No Warrenty</u> . Dealer <u>NOT</u> responsible for any repairs for any reason (For example but <u>not</u> limited to the follow	ESTIMATED MONTHLY PAYMENTS \$							
ing: looks, mold, mildow, water damage, structural damage, roof repairs	THIS AGREEMENT CONTAINS THE ENTIRE UNDERSTANDING BETWEEN DEALER AND BUYER AND NO OTHER REPRESENTATION OR INDUCEMENT,							
plumbing, electrical, etc.). Buyer understands completely that the Dealer is	VERBAL OR WRITTEN, HAS BEEN MADE WHICH IS NOT COVERED IN THIS							
NOT responsible for any repairs or damages to my <u>Used</u> Home.	AGREEMENT. BUYER(S) ACKNOWLEDGE RECEIPT OF A COPY OF THIS ORDER AND THAT							
acknowledge that the Dealer may use the funds from my deposit to complete the contract entered into on this purchase agreement; including, but not	BUYER(S) HAVE READ AND UNDERSTAND THE BACK OF THIS AGREEMENT.							
limited to site, preparation, conducting a title search, the issuance of the	PROMORESTAND THAT I HAVE THE RIGHT TO CANCEL							
permits, etc.	THIS PURCHASE BEFORE MIDNIGHT OF THE THIRD							
NOTE: WARRANTY AND EXCLUSIONS AND LIMITATIONS OF DAMAGES ON THE REVERSE SID	THIS AGREEMENT, I UNDERSTAND THAT THIS							
DESCRIPTION OF TRADE-IN YEAR SIZE	CANCELLATION MUST BE IN WRITING IF I CANCEL THE PURCHASE AFTER THE THREE DAY PERIOD, I							
MAKE MODEL MEDROOMS	UNDERSTAND THAT THE DEALER MAY NOT HAVE							
TITLE NO. SERIAL NO COLOR	ANY OBLIGATION TO GIVE ME BACK ALL OF THE MONEY THAT I PAID THE DEALER, LUNDERSTAND							
MOHW TO WHOM	ANY CHANGE TO THE TERMS OF THE PURCHASE							
ANY DEBT BUYER OWES ON TRADE IN IS TO BE PAID BY C DEALER. C BUYER	-LAGREEMENT BY THE DEALER WILL CANCEL THIS !							
/ Marty Wright Home Sales, Inc. **	GNEDX AND BUYER							
DOMESTIC CONTRACTOR OF THE PROPERTY OF THE PRO	OCIAL SECURITY NO							
	GNEO X BUYER							
By I Company of the C	ICIAL SECURITY NO							
FORM SOUNCE A PLAIN LANGUAGE PURCHASE AGREEMEN	T Copyright Disastencins Business FORMS (800) 651-4-24 Rev 01/04							
of the second se								

BLES 1810.0024

MVR-1 (Rev. 05/17)

## North Carolina Division of Motor Vehicles

## TITLE APPLICATION

Title Only—Vehicle Not in Operation  Truck Weight Desired.  This boulds of Lineary Plans Class of Lineary Plans Cl	CHECK Appropriate Block/s (Application cannot be processed without certification of services)																	
Clare Peter Number and Exprinting Inoperable Vehicle — Vehicle redutinalisty diseasembled Inoperable Vehicle — Vehicle Technisms of the Company of the Compa								(This includes the truck, trailer and load)										
and unfit or unaste to be operated on the highway    Teertify that all the above Information is correct. (Customer's initials)   Customer's initials)   VEHICLE SECTION			Plate					☐ Plate	No. Transi		Nun	ber and Expir	ntion)	_				
VEHICLE SECTION   VEHICLE SECTION   VEHICLE SECTION   VEHICLE DENTIFICATION NUMBER   FUEL TYPE   ODONIETER READING 2020   SCOTBILT   MH   EADER   SERIES NODEL   VEHICLE DENTIFICATION NUMBER   FUEL TYPE   ODONIETER READING 2020   SCOTBILT   MH   VEHICLE DENTIFICATION NUMBER   FUEL TYPE   ODONIETER READING 2020   OWNER SECTION											1)							
VEAR   MAKE   MH   BODY STYLE   SERIES MODEL   VEHICLE IDENTIFICATION NUMBER   FUEL TYPE   ODONIETER READING	I certify that all the above information is correct (Customer's initials)											_						
Content   December	16377				7 A S A S A S A S A S A S A S A S A S A	Consult to							1		Langua			
Over 1 to 9, 000025040989 NC PROPERTY INVESTERS Fall Legal Name of Ower 1 grat, Models, Last, Suffilly or Company Name Joint applicants request this title to be issued with Joint Tenants with Rights of Survivorabily? Check appropriate block: Ves No  Residence Address (Instituted) Bustarts Address (Printy)  Clay and State CLAYTON NC Z7520  Mail Address (Instituted) Bustarts Address (Printy)  Clay and State CLAYTON NC Z7520  Mail Address (Instituted) Bustarts Address (Printy)  Clay and State CLAYTON NC Z7528  CLAYTON NC Z7528  While Lecation Address (Instituted) Bustarts Address (Printy)  Clay and State Clay Code CLAYTON NC Z7528  Vehicle Lecation Address (Instituted) Bustarts Address above)  Clay and State Clay Code CLAYTON NC Z7528  Vehicle Lecation Address (Instituted) Bustarts Address above)  LIEN SECTION  FIRST LIEN Account # Maturity Date (Mit)  Date of Use  First Lien Meanthy Date (Mit)  Date of Use Maturity Date (Mit)  Date of Use  Lienheder (D# Lienheder Name Lienheder)  Lienheder (D# Lienheder Name Lienheder (D# Lienhe													EADING					
Owner 3 10 9    Owner 3 10 9   Owner							-	OWN	ER SE	CTION								
Joint applicants request this title to be issued with Joint Tenants with Rights of Sorvivorship? Check appropriate block: Yes No   Residence Address (Individual) Business Address (Firm)   City and State   Zip Code   Zip	Owner   10 p 00	002504	989	NC P	ROPERY			er i diere h	CONTRACT SEC	To No Common Name	_							
Joint applicants request this title to be issued with Joint Tenants with Rights of Sorvivorship? Check appropriate block: Yes No  Residence Address (Individual) Bindines Address (Plro)  Clay and State Zip Code  CLAYTON NC 27520  Mail Address (Individual) Bindines Address (Plro)  Clay and State Zip Code  CLAYTON NC 27528  While Address (Individual) Bindines Address (Plaifferest from residence address above)  Clay and State Zip Code  CLAYTON NC 27528  Weblede Lecation Address (Indifferent from residence address above)  Clay and State Zip Code  Tax County  LIEN SECTION  EIRSTLIEN Account #  Date of Lien Meanity Date (Mit)	Owner 2 10 0																	
Section   State   St						oint Tenants	with Ri	ghia of Su	rvivorship?	Check appropr	iate b	lock: Y	'es		No			
PO BOX 190  Vehicle Leastion Address (if different from residence address above)  City and State  LIEN SECTION  LIEN SECTION  Date of Lien  BIRST LIEN  Account # Maturity Date (MH)  Date of Lien  Maturity Date (MH)  Date of Lien  Maturity Date (MH)  Date of Lien  Maturity Date (MH)  Lienhalder ID #  Lienhalder																		
LIEN SECTION    Date of Lien																		
EIRST LIEN Account # Maturity Date (MH)  Date of Lien  Maturity Date (MH)  Date of Lien  Maturity Date (MH)  Lienbelder 10 # Lienbelder Name  Lienbelder 10 # Lienbelder Name  Lienbelder 10 # Lienbelder Name  Address  City	Vehicle Location Address (if different from residence address above) City and State Zip Codo Tax County																	
EIRST LIEN Account # Maturity Date (MH)  Date of Lien  Maturity Date (MH)  Date of Lien  Maturity Date (MH)  Lienbelder 10 # Lienbelder Name  Lienbelder 10 # Lienbelder Name  Lienbelder 10 # Lienbelder Name  Address  City			-					LIEI	VSECT	ION								
Limbelder ID # Limbelder ID # Limbelder Name    Limbelder ID # Limbelder Name																		
Address									Date of Li	eń				Matu	rity Date (M	III)		
Insurance Company suthorized in N.C.    Policy Number	Lienhalder (D # Lienhalder Name								Lienhelder ID # Lienhelder Name									
Insurance Company suthorized in N.C.    Policy Number	Address								Address									
Insurance Company suthorized in N.C.  Purchased  Purchased Date  Purchased Date  Prom Whom Purchased (Name and Address)  N.C. Dealer No.  46060  If Yea, Attach Form MVR-330    Yea	CityStateZjp Code							_	CityStateZip Code									
Purchased Purchase Date From Whom Purchased (Name and Address)    N.C. Dealer No.   Is this vehicle leased?   Equipment #     1	I certify for	the mo	tor yebi	icle des	scribed ab	ove that 1 l	nve fl	nancial r	esponsibi	ity as required	d by	law.						
DISCLOSURE SECTION  All motor vehicle records maintained by the North Carolina Division of Motor Vehicles will remain closed for marketing and solicitation unless the block below is checked.  I (We) would like the personal information contained in this application to be available for disclosure.  APPLICATION MUST BESIGNED IN INK BY EACH OWNER OR AITHORIZED REPRESENTATIVE OF FIRMS OR CORPORATIONS.  I (we) am (are) the owner(s) of the vehicle described on this application and request that a North Carolina Certificate of Title be issued. I (we) certify that the botton is sorted to the best of my (our) knowledge. The vehicle is subject to the liens named and no others. If a registration plate is issued or transferred, I (we) further certify that there has not been a registration plate revocation and that liability insurance is in effect on this vehicle on the date of this application as required by the North Carolina Financial Security Act of 1937.  OWNER'S SIGNATURE  OWNER'S SIGNATURE  OWNER'S SIGNATURE  OCCURTY SCOTLAND  State NO  County SCOTLAND  Notary Printed or Typed Name  CARRIES KNIGHT  CARRIES KNIGHT		Insuren	» Сопър	any suth	orized in N	.c.		-	_			Policy Numb	ct			_		
DISCLOSURE SECTION  All motor vehicle records maintained by the North Carolina Division of Motor Vehicles will remain closed for marketing and solicitation unless the block below is checked.    I (We) would like the personal information contained in this application to be available for disclosure.    APPLICATION MUST BE SIGNED IN INK BY EACH GWNER OR AUTHORIZED REPRESENTATIVE OF FIRMS OR CORPORATIONS.  I (we) am (are) the owner(s) of the vehicle described on this application and request that a North Carolina Cartificate of Title be issued. I (we) certify that the information on the application is correct to the best of my (Gar) knowledge. The vehicle is subject to the lites named and no others. If a registration plate is issued or transferred, I (we) further certify that there has not been a registration plate revocation and that liability insurance is in effect on this vehicle on the date of this application as required by the North Carolina Financial Security Act of 1957.  OWNER'S ZIGNATURE No.   Proper Complete Security Act of 1957.   County SCOTLAND   State No.      Owner of the County o	Purchased	Purchased Purchase Date From Whom Purchased (Name an				nbbA bus												
All motor vehicle records maintained by the North Carolina Division of Motor Vehicles will remain closed for marketing and solicitation unless the block below is checked.    I (We) would like the personal information contained in this application to be available for disclosure.    APPLICATION MUST BE SIGNED IN INK BY EACH OWNER OR AUTHORIZED REPRESENTATIVE OF FIRMS OR CORPORATIONS.   I (we) am (are) the owner(s) of the vehicle described on this application and request that a North Carolina Certificate of Title be issued. I (we) certify that the information on the application is correct to the best of my (oral) knowledge. The vehicle is subject to the lites named and notes. If a registration plate is issued or transferred, I (we) further certify that there has not been a registration plate revocation and that liability insurance is in effect on this vehicle on the date of this application as required by the North Carolina Financial Security Act of 1957.    OWNER'S SIGNATURE   V	□ New □ Used -			4606			)											
Toward like the personal information contained in this application to be available for disclosure.  APPLICATION MUST BE SIGNED IN INK BY EACH GWNER OR AITHORIZED REPRESENTATIVE OF FIRMS OR CORPURATIONS.  I (we) am (are) the owner(s) of the vehicle described on this application and request that a North Carolina Certificate of Title be issued. I (we) certify that the information on the application is correct to the best of my (cir) knowledge. The vehicle is subject to the liters named and no others. If a registration plate is issued or transferred, I (we) further certify that there has not been a registration plate revocation and that liability insumned is in effect on this vehicle on the date of this application as required by the North Carolina Financial Security Act of 1957.  OWNER'S SIGNATURE NC. Proper Charles Signature  County SCOTLAND  State NC  County Scotland  Notary Printed or Typed Name  CARRIE S KNIGHT  CARRIE S KNIGHT	DISCLOSURE SECTION																	
APPLICATION MUST BE SIGNED IN INK BY EACH OWNER OR AUTHORIZED REPRESENTATIVE OF FIRMS OR CORPORATIONS.  1 (we) am (ure) the owner(s) of the vehicle described on this application and request that a North Carolina Cartificate of Title be issued. I (we) cartify that the information on the application is correct to the best of my (our) knowledge. The vehicle is subject to the liters named and no others. If a registration plate is issued or transferred, I (we) further certify that there has not been a registration plate revocation and that liability insumnee is in effect on this vehicle on the date of this application as required by the North Carolina Financial Security Act of 1937.  OWNER'S SIGNATURE   County SCOTLAND  State NC  County SCOTLAND  State NC  County Scotland in the capacity indicated:  Notary Printed or Typed Name  CARRIE S KNIGHT  CARRIE S KNIGHT																		
the application is correct to the best of my (our) knowledge. The vehicle is subject to the liens named and no others. If a registration plate is issued or transferred, I (we) further certify that there has not been a registration plate revocation and that liability insurance is in effect on this vehicle on the date of this application as required by the North Carolinas Financial Security Act of 1937.  OWNER'S SIGNATURE    Or   C   P   P   P   P   P   P   P   P   P													once	DREOR	ATIONS.			
North Caroline Financial Security Act of 1957.  OWNER'S SIGNATURE NC Conclusing ScotLand State NC  Date 08/22/2019 County ScotLand State NC  I certify that the following personally expected before me this day, each acknowledging to me that he or she voluntarily signed the foregoing document for the purpose stated therein and in the capacity indicated:  Notary Printed or Typed Name CARRIES KNIGHT	the application is correct to the best of my (our) knowledge. The vehicle is subject to the liens named and no others. If a registration plate is issued or transferred, I (we)																	
Tecrtify that the following person(s) personally appeared before me this day, each acknowledging to me that he or she voluntarily signed the foregoing document for the purpose stated therein and in the capacity indicated:  Notary Printed or Typed Name CARRIES KNIGHT  CARRIES KNIGHT	North Carolina Financial Security Act of 1957.																	
Tecrtify that the following person(s) personally appeared before me this day, each acknowledging to me that he or she voluntarily signed the foregoing document for the purpose stated therein and in the capacity indicated:  Notary Printed or Typed Name CARRIES KNIGHT  CARRIES KNIGHT	OWNER'S SIGNATURE WE Propicty Provides SCOTLAND																	
Notary Printed or Typed Name CARRIES KNIGHT	I certify that the following personally appeared before me this day, each acknowledging to me that he or she voluntarily signed the foregoing document for the																	
	A district										(+) }·							
My Commission Express	Signature	, ,	N A	<del>عز بد</del> ا	<i>////</i>	4									-			

15