Application # BRES 1901 - 0024

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)

Home Owner Information: Home Owner Information (To be completed by owner of the manufactured home)	
Name: Richard Johnson Address: 17 Hound TR	
City: <u>Broadway</u> State: <u>NC</u> Zip: <u>37505</u> Daytime Phone: () <u>258-5904</u>	
Landowner Information (To be completed by landowner, if different than above)	
Name: Franklin R Johnson Address: 15 Hound Tru	
City: Broadway State: NC Zip: 2750 State Phone: 919 478 - 954	3
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: State with Willyards	
Phone: 9A-422-9623 Address: 1085-A Aguilla Road	
City: Bewson State: Ne Zip: 29504	
State Lic#2859 Email:	
B. Electrical Contractor Company Name: Mabry Electric Service Frc.	
Phone: 9,19-639-4837 Address: 731 Mabry Road	
City: Angier State: NC Zip: 27501	
State Lic# 150114 Email:	
C. Mechanical Contractor Company Name: Spell Mechanical	
Phone: 910-525-5976 Address: P.O. Box 93	
City: Autryville State: NC Zip: Z8318	
State Lic# 10574 Email:	
D. Plumbing Contractor Company Name: Priority Plumbing	
Phone: 919-439-7200 Address: P.O. Box 254	
City: Willow Spring State: Ne Zip: 27592	
State Lic#Email:	_
Part III – Manufactured Home Information	
Model Year: Size: 28 x 56 Complete & follow zoning criteria sheet	
Park Name:Lot Number:	
I hereby certify that I have the authority to apply for this permit, that the application is correct including the contract information and have obtained their permission to purchase these permits on their behalf, and that the construction installation will conform to the applicable manufactured home set-up requirements, and the Harnett County Zon Ordinance. I understand that if any item is incorrect or false information has been provided that this permit could revoked.	or
Signature of Høme Owner or Agent Date	
Date .	

*Effective July 1, 2004, a County <u>Tax Department Moving Permit</u> 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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1317910			S	ALES AGREEMENT		
DATE:	1/25/2019					
BUYER(S	S): Richard Adam Johns	on				
					_	
ADDRES	S: 17 HOUND TR BROA	ADWAY NO	27505			
DELIVER	Y ADDRESS: 17 HOU	IND TRAIL	BROADW	/AY NC 27505		
	ONE: (919) 258-5904			N FULL NAME:Catherine Long	_	
BASE PR				1	_	
DAGETT	NOL.	3	574,589.00	Make: CMH Model: 36TRU28564AH19 Year: 2019 Length: 5 (Width: 28 Stock#: WH0999	_	
State T	ax:		\$1 771 49		_	
Local 7	Гах:		\$.00			
				Make: N/A Model: N/A		
1. CASH	PRICE	9	76 360 49	Year: N/A Length: N/A Width: N/A Title #:		
		3	7 0.000.40			
TITLE	FEES		\$52.00	Amount owed will be paid by: Buyer Seller Owed to:		
			<u> </u>		_	
				OPTIONS:14 seer heat pump installed, plumb water up to 75 ft. and sewer up to 20 connections, wire panel box to home for power, 2 sets wood steps to code, white vin	ft.	
2. TOTAL	PACKAGE PRICE	\$	76,412,49	skirting installed.		
				SELLER RESPONSIBILITIES:Deliver and setup to county code, contractor permits, 2000.00 furn, allowance.		
	Allowance		N/A			
		N/A	BUYER RESPONSIBILITIES:zoning and septic permits, septic and water supply on			
Trade E	quity own Payment		N/A	property to hook into. Lot ready and level for new home.		
Cash D	own Payment		\$3.820.00	May not meet local codes and standards. New homes meet Federal Manufactured		
3. LESS ALL CREDITS \$3.820.00		\$3.820.00	Home Standards.			
			95.620.00	I UNDERSTAND THAT I HAVE THE RIGHT TO CANCEL THIS PURCHASE BEFORE MIDNIGHT OF THE TH BUSINESS DAY AFTER THE DATE THAT I HAVE SIGNED THIS AGREEMENT. I UNDERSTAND THAT T	THE	
4. REMAIN	NING BALANCE	\$	72,592.49	CANCELLATION MUST BE IN WRITING. IF I CANCEL THE PLIRCHASE AFTER THE THREE DAY DEDIC	20 1	
				UNDERSTAND THAT THE DEALER MAY NOT HAVE ANY OBLIGATION TO GIVE ME BACK ALL THE MON THAT I PAID THE DEALER. I UNDERSTAND ANY CHANGE TO THE TERMS OF THE PURCHA	ACE	
Location	Type of Insulation	Thickness		AGREEMENT BY THE DEALER WILL CANCEL THIS AGREEMENT. ESTIMATED RATE OF FINANCING 8.7 NUMBER OF YEARS 23 ESTIMATED MONTHLY PAYMENTS \$636.08	5%	
Floors	Fiberglass	7.00	22	Buyer(s) agree: (1) that the terms and conditions on page two are part of the	his	
Exterior	Fiberglass	3.50	11	agreement; (2) to purchase the above home including the options: (3) that the	VA	
Ceilings	blown cellulose	8.00	30	acknowledge receiving a completed copy of this agreement; (4) that all promises and representations made are listed on this agreement; and (5) that there are no other		
This insulation	on information was furnished	ed by the M	anufacturer	agreements written or verbal unless avidenced in writing and signed by the	101	
and is disclosed in compliance with the Federal Trade Commission Rule 16CRF, SECTION 460.16.		erar Trade	SELLER: BUYER:			
				Richard Adam Johnson		
			- 1	1/25/2019 1/25/2019	9	
				CMH Homes, Inc. d/b/a - Signature of: Richard Adam Johnson		
			1	LILANIEC DACE		
			- 1	CHARLES PAGE		
				CLAYTON HOMES DUNN, NC Signature of:	-	
				2001 W CUMBERLAND ST DUNN NC 28334		
			- 1	Signature of:	-	
			- 1	Orginature of.		
				Signature of:		



HTE#	
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HARNETT COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH 307 CORNELIUS HARNETT BOULEVARD LILLINGTON, NC 27546

EXISTING SEPTIC SYSTEM INSPECTION

EXISTING SEPTIC STSTEM IN	SPECITON
NAME : Fichard Adam Johnson	PHONE # 919-258-5904
ADDRESS 17 HOUND TRAIL Brondway N.	C. 27505
NAME OF MOBILE HOME PARK OR S/D	
NAME OF OWNER (IF DIFFERENT)	
ADDRESS OF OWNER (IF DIFFERENT)	
PROPERTY LOCATION: STATE ROAD NAME AND #_	SR 1268 DEMENS 22
PURPOSE OF INSPECTION Replace Successful weeks The exportant of the station Addition to the period Taylogoge at the station Addition to the period	ાલાં સ્ટાનામાં કૃષ્ટ (ક્લાના માટે કરો છે. આ તેલા કાર્યો કૃષ્ટ (ક્લાના માટે કરો છે.
ញ់ទាស់ស្រាស់មួយមួយគ្នាស្រែក នៅស្រែកនៅក្នុងស្រាស់មួយមួយមួយមួយ ក្នុងសម្រេច មួយមួយមួយ គ្រួស្រាស់មួយ	on the ownerstance and hotelo
THIS INSPECTION IS VOID IF: (1) the intended use of the septic system should change, and/ (2) the system should fail or malfunction, and/or (3) the owner or tenant of the property changes, and/or (4) after six months	or
BUILDING MUST BE 5 FROM ANY PARTIC DO NOT DRIVE OR PARK ON SEP	OF SEPTIC SYSTEM TIC SYSTEM
AUTHORIZATION OF EXISTING	SYSTEM
James & Manhant FRE RENS	1-31-19
Signature of Environmental Health Specialist	Date