

**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: Harold Butts Address: 2191 Keith Rd

City: Lillington State: NC Zip: 27546 Daytime Phone: 910-984-6115

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

Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Daytime Phone: ( ) \_\_\_\_\_

**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: Fallen Rock MH Movers

Phone: 919-775-3600 Address: 1947 S Haver Blvd

City: Sanford State: NC Zip: 27330

State Lic# 3400 Email: N/A

B. **Electrical Contractor** Company Name: Doniel Nash

Phone: 919-354-4916 Address: 123 Merch Ln

City: Broadway State: NC Zip: 27505

State Lic# 23349 Email: NA

C. **Mechanical Contractor** Company Name: Tim Shop

Phone: 919-208-8340 Address: 3189 Edwards Rd

City: Sanford State: NC Zip: 27332

State Lic# 22513 Email: N/A

D. **Plumbing Contractor** Company Name: Larry Measamer

Phone: 919-343-8381 Address: 2521 Westgate Dr

City: Sanford State: NC Zip: 27330

State Lic# 23822 Email: N/A

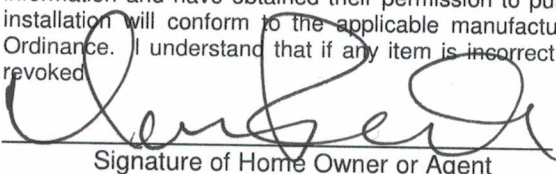
**Part III - Manufactured Home Information**

Model Year: 2004 Size: 14x70

*Complete & follow zoning criteria sheet*

Park Name: Taylor Village Lot Number: 23

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.

  
Signature of Home Owner or Agent

1/17/20  
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.



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) Harold Butts PHONE 910-984-6115 DATE 11/17/20  
 ADDRESS 291 Keith Bliss Rd Lillington, NC 27546 SALESPERSON EJ  
 DELIVERY ADDRESS Lot 23 Taylor Village Angier NC  
 MAKE & MODEL Titan YEAR 1994 BEDROOMS 2 FLOOR SIZE 70 HITCH SIZE 14 STOCK NUMBER  
 SERIAL NUMBER \_\_\_\_\_ COLOR \_\_\_\_\_ PROPOSED DELIVERY DATE \_\_\_\_\_ KEY NUMBERS \_\_\_\_\_  
 NEW  USED

| LOCATION | R-VALUE | THICKNESS | TYPE OF INSULATION | BASE PRICE OF UNIT |                     |
|----------|---------|-----------|--------------------|--------------------|---------------------|
| CEILING  |         |           |                    | OPTIONAL EQUIPMENT |                     |
| EXTERIOR |         |           |                    |                    |                     |
| FLOORS   |         |           |                    |                    |                     |
|          |         |           |                    | <b>SUB-TOTAL</b>   | \$ <u>10,000 00</u> |

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

SALES TAX INC

**OPTIONAL EQUIPMENT, LABOR AND ACCESSORIES**

| DESCRIPTION                           | PRICE    |
|---------------------------------------|----------|
| <u>Delivery &amp; Setup</u>           |          |
| <u>Plumbing</u>                       |          |
| <u>Electrical</u>                     |          |
| <u>Skirting</u>                       |          |
| <u>Hook up HP</u>                     |          |
| BALANCE CARRIED TO OPTIONAL EQUIPMENT | \$ _____ |

NON-TAXABLE ITEMS

VARIOUS FEES AND INSURANCE

| DESCRIPTION                              | PRICE               |
|--|---------------------|
| <b>CASH PURCHASE PRICE</b>               | \$ <u>10,000 00</u> |
| TRADE-IN ALLOWANCE                       | \$ _____            |
| LESS BAL. DUE on above                   | \$ _____            |
| NET ALLOWANCE                            | \$ _____            |
| CASH DOWN PAYMENT                        | \$ _____            |
| CASH AS AGREED                           | \$ _____            |
| <b>LESS TOTAL CREDITS</b>                | \$ <u>10,000 00</u> |
| <b>SUB-TOTAL</b>                         | \$ <u>0</u>         |
| SALES TAX (If Not Included Above)        | \$ <u>0</u>         |
| <b>Unpaid Balance of Cash Sale Price</b> | \$ <u>0</u>         |

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  
 Not Valid Unless Signed and Accepted by an Officer of the Company or an Authorized Agent

Approved By [Signature]

SIGNED X \_\_\_\_\_ BUYER  
 SOCIAL SECURITY NO. \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 SIGNED X \_\_\_\_\_ BUYER  
 SOCIAL SECURITY NO. \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

ORIGINAL