



Application # BRES1912-0040

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

* Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address, company name & phone must match information on license.

Application for Residential Building and Trades Permit

Owner's Name: Joey Smith Date: 3/23/20
Site Address: 27 Brown Rd Lillington Phone: 919-498-4806
Subdivision: _____ Lot: _____
Description of Proposed Work: Off frame modular Total Job Cost: 160,000.00

General Contractor Information

EJ Womack Enterprises Inc 919-75-3600
Building Contractor's Company Name Telephone
1475 Harner Blvd Sanford N/A
Address Email Address
3400
License #

Electrical Contractor Information

Description of Work: Hookup electric Service Size: 100 Amps T-Pole: Yes No
Daniel Dash 919-935-4496
Electrical Contractor's Company Name Telephone
63 Mercu Ln Broadwater NC N/A
Address Email Address
23349
License #

Mechanical/HVAC Contractor Information

Description of Work: Hook up Heatpump
Tin Shop 919-708-8340
Mechanical Contractor's Company Name Telephone
3489 Edwards Rd Sanford NA
Address Email Address
22513
License #

Plumbing Contractor Information

Description of Work: Hook up water/sewer lines # Baths: 2
Larry Measomer 919-343-8387
Plumbing Contractor's Company Name Telephone
2521 Westgate Dr Sanford NC N/A
Address Email Address
23822
License #

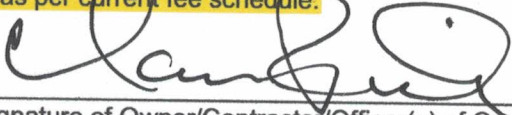
Insulation Contractor Information

N/A
Insulation Contractor's Company Name & Address Telephone

***NOTE: General Contractor / owner must fill out and sign the second page of this application.**

I hereby certify that I have the authority to make necessary application, that the application is correct and that the construction will conform to the regulations in the Building, Electrical, Plumbing and Mechanical codes, and the Harnett County Zoning Ordinance. I state the information on the above contractors is correct as known to me and that **by signing below I have obtained all subcontractors permission to obtain these permits** and if **any** changes occur including listed contractors, site plan, number of bedrooms, building and trade plans, Environmental Health permit changes or proposed use changes, I certify it is my responsibility to notify the Harnett County Central Permitting Department of any and all changes.

EXPIRED PERMIT FEES - 6 Months to 2 years permit re-issue fee is \$150.00. After 2 years re-issue fee is as per current fee schedule.



Signature of Owner/Contractor/Officer(s) of Corporation

3/23/20

Date

Affidavit for Worker's Compensation N.C.G.S. 87-14

The undersigned applicant being the:

General Contractor Owner Officer/Agent of the Contractor or Owner

Do hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:

Has three (3) or more employees and has obtained workers' compensation insurance to cover them.

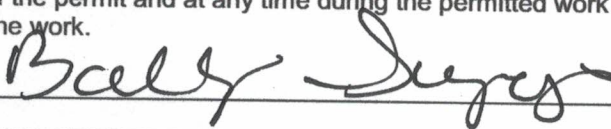
Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them.

Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance covering themselves.

Has no more than two (2) employees and no subcontractors.

While working on the project for which this permit is sought it is understood that the Central Permitting Department issuing the permit may require certificates of coverage of worker's compensation insurance prior to issuance of the permit and at any time during the permitted work from any person, firm or corporation carrying out the work.

Sign w/Title:



Date:

3/23/20

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 1211254

Filed on: 03/20/2020

Initially filed by: countryfairhomes

Designated Lien Agent

First American Title Insurance Company

Online: www.liensnc.com (mailto:support@liensnc.com)

Address: 19 W. Hargett St., Suite 507 /
Raleigh, NC 27601

Phone: 888-690-7384

Fax: 913-489-5231

Email: support@liensnc.com (mailto:support@liensnc.com)

Project Property

27 brown rd
lillington, NC 27546
harnett County

Property Type

1-2 Family Dwelling

Print & Post



Contractors:

Please post this notice on the Job Site.

Suppliers and Subcontractors:

Scan this image with your smart phone to view this filing. You can then file a Notice to Lien Agent for this project.

Owner Information

ej womack
3335 nc hwy 87 s
sanford, NC 27332
United States
Email: countryfairhomes@gmail.com
Phone: 919-775-3600

View Comments (0)

Technical Support Hotline: (888) 690-7384

DBA COUNTRY FAIR HOMES

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

BUYER(S) Joey Smith PHONE 919-498-4806 DATE 3/23/20
 ADDRESS PO Box 2001 Sanford NC 27331 SALESPERSON EJ Womack
 DELIVERY ADDRESS 27 Brown Rd Lillington NC 27546
 MAKE & MODEL Champion CC3264-01 YEAR 2018 BEDROOMS 3 FLOOR SIZE 64 HITCH SIZE 30 STOCK NUMBER 6432
 SERIAL NUMBER 013-006-1-A0041474/BX COLOR NEW USED PROPOSED DELIVERY DATE _____ KEY NUMBERS _____

| 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.

| OPTIONAL EQUIPMENT, LABOR AND ACCESSORIES | | |
|---|--|----|
| <u>Delivery & Setup</u> | | \$ |
| <u>Foundation</u> | | |
| <u>Footers</u> | | |
| <u>Plumbing</u> | | |
| <u>Electrical</u> | | |
| <u>Septic</u> | | |
| <u>Steps</u> | | |
| <u>Heat Pump</u> | | |
| <u>Land</u> | | |
| BALANCE CARRIED TO OPTIONAL EQUIPMENT | | \$ |

| BASE PRICE OF UNIT | |
|---------------------|-------------------|
| <u>\$160,000.00</u> | <u>INC</u> |
| OPTIONAL EQUIPMENT | |
| SUB-TOTAL | <u>160,000.00</u> |
| SALES TAX | <u>INC</u> |

| CASH PURCHASE PRICE | | |
|-----------------------------------|----|---------------------|
| TRADE-IN ALLOWANCE | \$ | |
| LESS BAL. DUE on above | \$ | |
| NET ALLOWANCE | \$ | |
| CASH DOWN PAYMENT | \$ | |
| CASH AS AGREED | \$ | |
| LESS TOTAL CREDITS | \$ | |
| SUB-TOTAL | \$ | |
| SALES TAX (If Not Included Above) | | |
| Unpaid Balance of Cash Sale Price | | <u>\$160,000.00</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

SIGNED X Joey Smith BUYER
 SOCIAL SECURITY NO. _____ / _____ / _____
 SIGNED X _____ BUYER
 SOCIAL SECURITY NO. _____ / _____ / _____

Approved By [Signature]

ORIGINAL