

Application # BRES 2110-0009

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: Blanca + Balcazar Gonzalez Address: 80 Tyree Ln

City: Coats State: NC Zip: 27 Daytime Phone: () _____

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: Raven Rock MH Movers

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

City: _____ State: _____ Zip: _____

State Lic# _____ Email: _____

B. **Electrical Contractor** Company Name: SELF

Phone: _____ Address: _____

City: _____ State: _____ Zip: _____

State Lic# _____ Email: _____

C. **Mechanical Contractor** Company Name: SELF

Phone: _____ Address: _____

City: _____ State: _____ Zip: _____

State Lic# _____ Email: _____

D. **Plumbing Contractor** Company Name: SELF

Phone: _____ Address: _____

City: _____ State: _____ Zip: _____

State Lic# _____ Email: _____

Part III - Manufactured Home Information

Model Year: 1991 Size: 28x48

Complete & follow zoning criteria sheet

Park Name: Private Lot Lot Number: _____

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]
Signature of Home Owner or Agent

9/8/22
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.

Date: 9/18/22

Application# BRES2110-0009

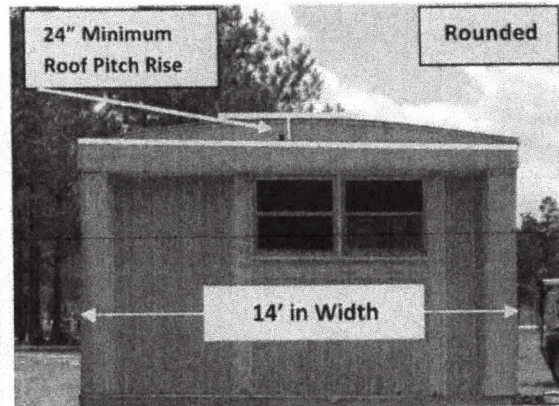
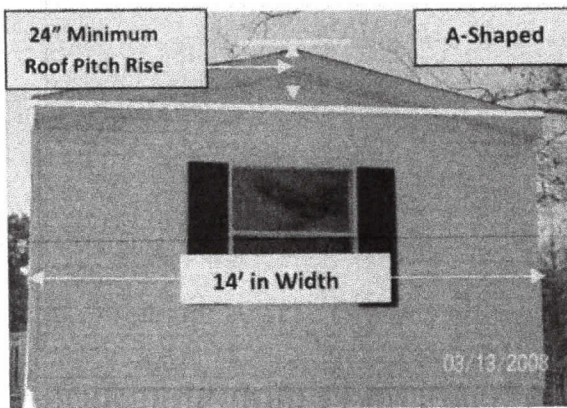
PROCEDURES AND GUIDELINES FOR MANUFACTURED HOME INSPECTIONS

Blanca Bataz
Blanca Gonzalez

RA-20R & RA- 20M Certification Criteria

I understand that because I'm located in a **RA-20R** or **RA-20M** Zoning District and wish to place a manufactured home in this district I must meet the following criteria, verified by zoning inspection approval, before I will be issued a certificate of occupancy for this home.

1. The home must have a pitched roof, for a manufactured home, whether A-shaped or rounded, which has a minimum rise (measured at the center of the home) of twelve (12) inches for every seven (7) feet of total width of the home. (Example: A home measuring fourteen (14 ft.) in width must have a twenty four (24) inch rise as measured from the center of the roofline to the baseline of the roof.) (See Illustrations Below.)

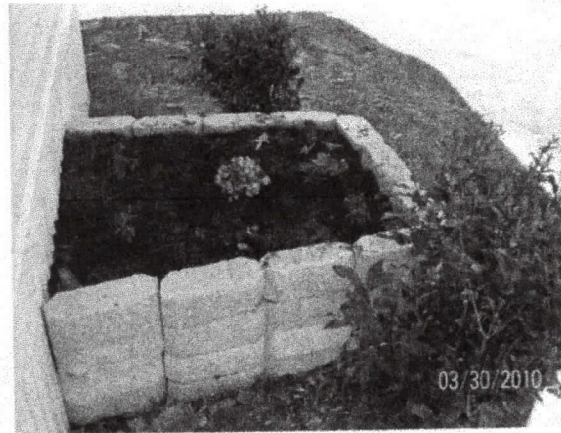
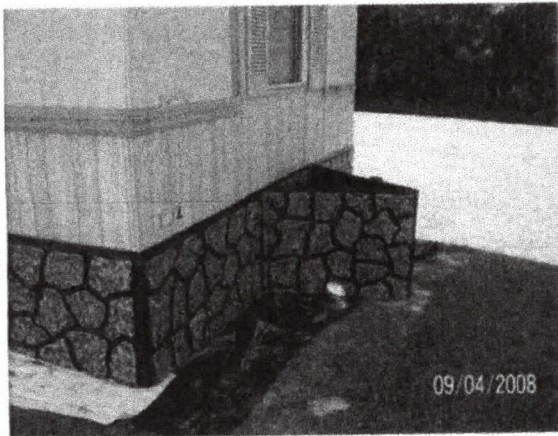


Note: Most Rounded Roofs **Will Not** Meet The Roof Pitch Requirement As Illustrated. The Measurement From The Peak Of The Roof To The Base Line Of The Roof Must Be 12" For Every 7' Of Total Width Of The Home. (Ex: 14' Wide Home = 24" Roof Rise)



Continued.....

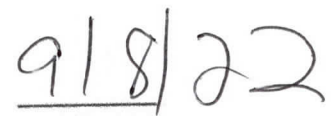
2. The home must be underpinned, consisting of a brick curtain wall or have galvanized metal sheeting, ABS or PBC plastic color skirting with interlocking edges, installed around the perimeter of the home. Skirting shall be consistent in appearance, in good condition, continuous, permanent, and unpierced except for ventilation and access.
3. The homes moving apparatus must be removed, underpinned, or landscaped. (See examples below.)



4. The home must have been constructed after July 1st 1976.



Signature of Property Owner / Agent



Date

- By signing this form the owner / agent is stating that they have read and understand the information on this form.

EJ Womack Enterprises Inc
 2785 Raven Rock Rd
 Lillington NC 27546

BUYER(S) Moises B Martinez
Blanca Estela Gonzalez mendez
 ADDRESS 6210 Farm Gate Rd Raleigh NC 27606
 DELIVERY ADDRESS 80 Tyree Ln Coats NC
 YEAR 91 BEDROOMS 3 FLOOR SIZE L 48 W 28 HITCH SIZE L W STOCK NUMBER
 SERIAL NUMBER GAFLL34A13975H NEW USED COLOR PROPOSED DELIVERY DATE KEY NUMBERS
 SALES PERSON EJ Womack DATE 10/6/21

MAKE & MODEL Double wide

LOCATION	R-VALUE	THICKNESS	TYPE OF INSULATION	BASE PRICE OF UNIT	
CEILING					\$12,000.00
EXTERIOR				OPTIONAL EQUIPMENT	
FLOORS					
THIS INSULATION INFORMATION WAS FURNISHED BY THE MANUFACTURER AND IS DISCLOSED IN COMPLIANCE WITH THE FEDERAL TRADE COMMISSION RULE 16CFR SECTION 460.16.				SUB-TOTAL	\$12,000.00
				SALES TAX	

OPTIONAL EQUIPMENT, LABOR AND ACCESSORIES		NON-TAXABLE ITEMS	
	\$	VARIOUS FEES AND INSURANCE	
<u>Home Sold</u>		CASH PURCHASE PRICE	\$
<u>AS IS</u>		TRADE-IN ALLOWANCE	\$
		LESS BAL. DUE on above	\$
		NET ALLOWANCE	\$
		CASH DOWN PAYMENT	\$6,000.00
		CASH AS AGREED	\$

<u>Delivery + setup</u>		LESS TOTAL CREDITS	\$
<u>only</u>		SUB-TOTAL	\$6,000.00
		SALES TAX (If Not Included Above)	
		Unpaid Balance of Cash Sale Price	\$6,000.00

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 0 %
 NUMBER OF YEARS 15 pagos
 ESTIMATED MONTHLY PAYMENTS \$ \$400.00

<u>10/6/21</u>	<u>1000.00</u>
<u>Balance</u>	<u>5000.00</u>
<u>11/4/21</u>	
BALANCE CARRIED TO OPTIONAL EQUIPMENT	\$

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		

SIGNED X Blanca Gonzalez BUYER
 SOCIAL SECURITY NO. _____
 SIGNED X Moises B Martinez BUYER
 SOCIAL SECURITY NO. _____
 Approved By _____ DEALER
 Not Valid Unless Signed and Accepted by an Officer of the Company or an Authorized Agent

MVR 191 (Rev 1/13)

CERTIFICATE OF TITLE

VEHICLE IDENTIFICATION NUMBER
GAFL134A13974SH
TITLE NUMBER
770384142063075

YEAR MODEL
1991

MAKE
SPRI
TITLE ISSUE DATE
07/30/2014

BODY STYLE
MH
PREVIOUS TITLE NUMBER
000001121350048

MAIL TO

CHAD DANIEL CALHOUN
PO BOX 304
CARTHAGE NC 28327-0304

ODOMETER READING
ODOMETER STATUS
TITLE BRANDS

OWNER(S) NAME AND ADDRESS

CHAD DANIEL CALHOUN
196 MINE RD
CARTHAGE NC 28327-7204



The Commissioner of Motor Vehicles of the State of North Carolina hereby certifies that an application for a certificate of title for the herein described vehicle has been filed pursuant to the General Statutes of North Carolina and based on that application, the Division of Motor Vehicles is satisfied that the applicant is the lawful owner. Official records of the Division of Motor Vehicles reflect vehicle is subject to the liens, if any, herein enumerated at the date of issuance of this certificate.

As WITNESS, his hand and seal of this Division of the day and year appearing in this certificate as the title issue date.

Keeg J. Thomas
COMMISSIONER OF MOTOR VEHICLES



FIRST LIENHOLDER: DATE OF LIEN

LIEN RELEASED BY:
SIGNATURE _____
TITLE _____ DATE _____

SECOND LIENHOLDER: DATE OF LIEN

LIEN RELEASED BY:
SIGNATURE _____
TITLE _____ DATE _____

THIRD LIENHOLDER: DATE OF LIEN

LIEN RELEASED BY:
SIGNATURE _____
TITLE _____ DATE _____

FOURTH LIENHOLDER: DATE OF LIEN

LIEN RELEASED BY:
SIGNATURE _____
TITLE _____ DATE _____

ADDITIONAL LIENS:

93069086
075 T1C0750