

Application # BRES 2203-0051

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: KBC Group LLC Address: 2604 Timber Dr
City: Garner State: NC Zip: 27529 Daytime Phone: () 614-256-6414

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)

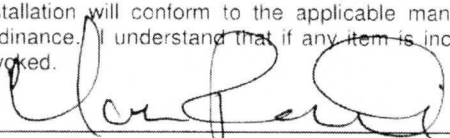
- A. **Set-Up Contractor** Company Name: Raven Rock mlt movers
Phone: 919-775-3600 Address: 1947 S Horner Blvd
City: Sanford State: NC Zip: 27330
State Lic# 3400 Email: N/A
- B. **Electrical Contractor** Company Name: Reuben Copeland
Phone: 919-755-9387 Address: 2705 Boxelder Ct
City: Raleigh State: NC Zip: 27610
State Lic# L15382 Email: N/A
- C. **Mechanical Contractor** Company Name: Tin Shop
Phone: 919-708-8340 Address: 3489 Edwards Rd
City: Sanford State: NC Zip: 27332
State Lic# 22513 Email: N/A
- D. **Plumbing Contractor** Company Name: Raven Rock mlt movers
Phone: 919-775-3600 Address: 1947 S Horner Blvd
City: Sanford State: NC Zip: 27330
State Lic# 3400 Email: N/A

Part III - Manufactured Home Information

Model Year: 1987 Size: 14 x 76 *Complete & follow zoning criteria sheet*

Park Name: Pine Forest Lot Number: 49

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

4/14/2022

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.

EJ Womack Enterprises Inc DBA Country Fair Homes

1947 S Horner Blvd
Sanford NC 27330
919-775-3600 Fax 919-775-7533

BUYER(S) KBC Group		PHONE 614-256-6414	DATE 5/18/22
ADDRESS* 2664 Timber Dr Garner NC		SALESPERSON EJ Womack	
DELIVERY ADDRESS Privet Ln Lillington NC			
MAKE & MODEL Baro	YEAR 1987	BEDROOMS 3	FLOOR SIZE 7614
SERIAL NUMBER SMHNC13303	COLOR	HITCH SIZE 76	STOCK NUMBER 14
<input type="checkbox"/> NEW <input checked="" type="checkbox"/> USED	PROPOSED DELIVERY DATE	KEY NUMBERS	

LOCATION	R-VALUE	THICKNESS	TYPE OF INSULATION	BASE PRICE OF UNIT	
CEILING				\$ 18000.00	
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				NON-TAXABLE ITEMS	
Sold AS				VARIOUS FEES AND INSURANCE	
				CASH PURCHASE PRICE	
JS				TRADE-IN ALLOWANCE	\$ 18000.00
				LESS BAL. DUE on above	
				NET ALLOWANCE	
				CASH DOWN PAYMENT	
				CASH AS AGREED	
				LESS TOTAL CREDITS	\$ 17000.00
				SUB-TOTAL	\$

SALES TAX (If Not Included Above) \$ **0**

Unpaid Balance of Cash Sale Price \$ **0**

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.

BALANCE CARRIED TO OPTIONAL EQUIPMENT \$			
DISCLAIMER: ANY AND ALL EXCLUSIONS AND LIMITATIONS OF DAMAGES ON THE REVERSE SIDE			
DESCRIPTION OF TRADE-IN	YEAR	SIZE	
MAKE	MODEL	BEDROOMS	
VEHICLE NO	SERIAL NO	COLOR	
PARTY TO WHOM			
PAYMENT TERMS TO WHOM			
PAYMENT TERMS ON TRADE-IN TO BE PAID BY <input type="checkbox"/> DEALER <input type="checkbox"/> BUYER			

EJ Womack Enterprises Inc DBA Country Fair Homes DEALER **14BC**

(Signature) BUYER

SOCIAL SECURITY NO _____

SIGNATURE _____

SOCIAL SECURITY NO _____