Application #

## 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)

	-Owner Information: Owner Information (To be	e completed by	owner of the ma	nufactured home)	
Name	Thad Strickland		Address: 320	Lucky Ln	
City: _E	Bunn Level	State: NC	Zip: _28323	_ Daytime Phone: (	) <u>919-964-9404</u>
Lando	wner Information (To be c	ompleted by la	ndowner, if differ	ent than above)	
Name:	<u></u>		Address:		
City: _		State:	_ Zip:	_ Daytime Phone: (	)
Part II A.	- Contractor Information Set-Up Contractor Con	Name, address pany Name: <u>st</u>	s, & phone must ma eve Stone MH Movers	atch information on lice	cable. nse)
	Phone: 9107360618	Addre	ess: P.O. Box 9	01	
	City: Lumberton			_ Zip: _28359	
	State Lic#3556				
B.	Electrical Contractor C				
	Phone: 9107407791				
	City: Pembroke	State:	NC	_ Zip:	
	State Lic#_L.28068  Mechanical Contractor	Email	:		
C.	<b>Mechanical Contractor</b>	Company Nam	ne: Spells Mecha	anical	
	Phone: 910-525-5976	Addre	ss: 123 W. Vins	son St.	
	City: Autryville	State:	NC	Zip: 28318	
	State Lic#_10574	Email	-		
D.	Plumbing Contractor C	ompany Name:	Priority Plumb	oing	
	Phone: 919-422-4935	Addre	ss: P.O. Box 2	64	
	City: Willow Springs	State:	NC	Zip: 27592	
	State Lic#_L18550	Email:			
	- Manufactured Home In				
Model Y	ear: 2023 Size: 28	X 76	Complete & foli	low zoning criteria s	sheet
Park Na	me:		Lot Nun	nber:	
ntormation	certify that I have the author and have obtained their on will conform to the applie. I understand that if any	permission to pu cable manufactu	rchase these pern red home set-up	nits on their behalf, and requirements, and the	d that the construction or Harnett County Zoning
C	A Darker Signature of Home Owner	or Agent		8/24/202 Date	23
	-	0		- 440	

\*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.

**SETUP** 

1526414		
Wal	come Home	

## SALES AGREEMENT

Home Consultant Name: NOAH WHEELER

Buyer(s): Th	AD STRICKLAND	JR				Phone #:	
	ANCY STRICKLAN					(910) 964-9404	
	0 LUCKY LN BUNI						
	dress: 320 LUCKY						
Home Info Trade Info 4621 THE					Pricing		
	ARLESTON	Make: N/	Ά		Home Price		
	ROC28764FH23	Model: N/			State Tax	\$3,981.65	
Serial #: ROC744452NCAB Serial #:		Local Tax	\$.00				
_		-	andh.				
Size. Lei Wid	ngth: <u>N/A</u> dth: N/A			N/A			
	<del></del>			N/A_	Cash Price	\$171,629.94	
		Year: N/	Α				
Stock #: RS			Title #:		TITLE FEES	\$56.00	
X	New Used	Owed to:					
		Amount ow					
		区 Bu	ıyer 🔲 S	Seller			
						-	
Location	Type of Insul	lation Thi	ickness	R-Value	Total Package Price		
Floors:	Fiberglass	7.00		R22	Trade Allowance		
Exterior:	Fiberglass	3.50		R11			
				$\overline{}$	Trade Equity		
Ceilings.	Loose Fiberglass	11.0		R33	·		
This insulation it lisclosed in con	nformation was furnis npliance with the Fedi	hed by the Manu arel Trade Comm	ufacturer al mission Ru	nd is le 16CRF	Less Ali Credits		
SECTION 460.1					Remaining Delative	\$170,000.9 <del>1</del>	
				Respons	ibilities		
Seller Responsibilitie	Deliver and set I s: grade, Engineer I	nome to avg heig letter. Permits, Tri	ght, Footen	s, Brick, Heat	pump, Electrical, Plumbing, Surewall, Steps to code,	Termite treatment, Fi	
Buyer Responsibilitie	Clear and easy	access to proper			m home, 911 address on home, Contact power com	pany, Septic Inspecti	
	8: Health and zoning	g permus.					
Options:				Antonousto			
low Mondock w	nd Homon most fodo	nol otomdondo for		Acknowle	agment  n, but mey not meet local codes and standards.		
UNDERSTAND 1 IGNED THIS AGI NDERSTAND TI HANGE TO THI UMBER OF YEA Uyer(s) agree: ptions: (3) that	THAT I HAVE THE RIG REEMENT. I UNDERST. LAT THE DEALER MAY E TERMS OF THE PUI RS <u>MA</u> ESTIMATED MO (1) that the terms an they acknowledge re	HT TO CANCEL ' AND THAY THIS ( Y NOT HAVE ANT KCHASE AGREE CONTHLY PAYMEN d conditions on ecciving a comp	THIS PURCEANCELLAY  Y OBLIGAT  MENT BY  ITS N/A  pages two  leted copy	CHASE BEFORE THON MUST BE THON TO GIVE THE DEALER TO AND THESE THE DEALER TO AND THESE THES THES	E MIDNIGHT OF THE THIRD BUSINESS DAY AFTER 1 EIN WRITING, IF I CANCEL THE PURCHASE AFTER THI ME BACK ALL THE MONEY THAT I PAID THE DEALE WILL CANCEL THIS AGREEMENT. ESTIMATED RATI are part of this agreement; (2) to purchase the abo ement; (4) that all promises and representations of ss evidenced in writing and signed by the parties.	E THREE-DAY PERIOD R. I UNDERSTAND AI E OF FINANCING <u>NI</u>	
16- E Sto 9			6-2	29-2023			
Ignature of Buy	er: THAD STRICKLAI	ND JR			D	ate	
Mara Signature of Buy	Shake) Br. NANCY STRICKL	AND				ate	
J. 20)					Di	160	
gnature of Buy	<b>#</b> .		Date	9 5	Signature of Buyer:	Date	
( the	X				L	120 100	
aller: CMH Horn	ies, Inc. d/b/a - OAKW ESDIE ST. FAYETTE	OOD HOMES F	AYETTEV	/ILLE, NC	De	10110	