

Harnett County Central Permitting
420 McKinney Pkwy Lillington, NC 27546
PO Box 65 Lillington, NC 27546

Telephone Number: 910-893-7525 ext. 1 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: Edra Shanay Pierce Address: 222 High Ridge Apt G
City: Sanford State NC Zip: 27330 Daytime Phone: (252) 916-8314

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

Name: Tracy Marlow Address: 13782 Mc Dougall Rd
City: Sanford State NC Zip: 27332 Daytime Phone: 919-935-4292

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: Rodney Brown
Phone: 919-775-2271 Address: 23 Polly Ln
City: Sanford State: NC Zip: 27330 Email: _____
Setup Signature: Edra Pierce for Rodney Brown State Lic# 3550

B **Electrical Contractor** Company Name: JAL Electrical Service Inc
Phone: 910-977-0310 Address: 870 Three Wood Dr.
City: Fayetteville State: NC Zip: 28312 Email: hee@jalelectricalservice.com
Electrician's Signature: Edra Pierce for Tony Lee State Lic# 13276-L

C **Mechanical Contractor** Company Name: _____
Phone: 910-322-5113 Address: 775 Dowfield Dr
City: FAYETTEVILLE State: NC Zip: 28311 Email: overhillsheatingandair@gsma-1.com
HVAC Signature: Nathan S Hill State Lic# 24106

D **Plumbing Contractor** Company Name: Double J Plumbing LLC
Phone: 910-814-7705 Address: 614 Byrd Rd.
City: Bunnlevel State: NC Zip: 28323 Email: jamiejohnsonplumbing@gmail.com
Plumber's Signature: Edra Pierce for Jamie Johnson State Lic# 21649

Part III - Manufactured Home Information

Model Year: 2024 Size 13'4" x 56 Complete & follow zoning criteria sheet

Park Name: -not a park, private property Lot Number: private property

I hereby certify that I have the authority to apply for this permit, that the application is correct including the contractor information and signatures, 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.

Edra Shanay Pierce
Signature of Home Owner or Agent

2-21-24
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.

Champion Homes Center

• 115 Titan Roberts Rd. • Lillington, NC 27546 • 1 (800) 504-3238

BUYER 1 Edra Shanay Pierce		BUYER 2		DATE 2/19/2024	THIS CONTRACT REVISED FROM
MAILING ADDRESS 13782 McDougald Rd		CITY Sanford	STATE NC	ZIP 27332	PHONE (252) 916-8316
DELIVERY ADDRESS 13782 McDougald Rd		CITY Sanford	STATE NC	ZIP 27332	CELL
SALESPERSON Reyna Mondragon - 46927		EMAIL ADDRESS 1 newz2mi@gmail.com		EMAIL ADDRESS 2	
MAKE & MODEL Craycroft (L) 1456H22P01 by Champion		YEAR 2024	BEDROOMS 2	BATHS 2	DEN
SERIAL NUMBER	NEW / USED NEW	FLOOR SIZE 14x56	HITCH SIZE 14x60	APPROX. SQ. FT. 747	
NOTICE OF CONSTRUCTION & FINAL PAYMENT					
Buyer intends to finance this purchase and through buyer's lender will provide a loan approval letter to Champion Homes Center. Purchase Agreement is contingent as indicated under Notation & Remarks. Buyer agrees to and understands that all down payments will be handled per the Payment Disclosure and Notice of Cancellation and are non-refundable after 30 days. <u>X esp X</u>			Retail Price		1456H22P01 - \$ 54,796.19
			Factory Direct Discount Craycroft (L)		\$ (10,896.19)
			Sub Total 1		\$ 43,900.00
			Addendum "A" Upgrades		\$ 194.00
			Sub Total 2		\$ 44,094.00
NOTICE OF COMPLETION					
Buyer understands that the approximate completion month for home is: May Buyer understands that in the event delivery of the home does not occur to property within 12 days after home is completed at the factory there will be a \$20 per day storage charge that must be paid prior to shipment. <u>X esp X</u> Buyer is financially responsible for insurance coverage on the home once completed by manufacturer and responsible for any damage incurred. <u>X esp X</u>					
NOTICE OF FREIGHT					
Buyer understands that unless otherwise stated, the quoted freight price is estimated for the current date and may not reflect fluctuating fuel charges, Department of Transportation highway construction re-routing, highway patrol escorts, or unique complicated placements based on terrain of delivery site. <u>X esp X</u>					
NOTATIONS & REMARKS					
Contingent on financing terms and conditions. Contingent on county issuing septic and build permit. Champion Homes Center requires documentation for any cancellation request.					
		Home Preparation Fee		\$ 395.00	
		Taxes		\$ 1,106.49	
		Taxes may change based on final delivery address.			
		Total		\$ 47,695.49	
		Down Payment		(-) \$ (3,749.76)	
		Additional Payment as Agreed		(-) \$ 0.00	
		Unpaid Balance		\$ 43,945.73	
*NO VERBAL PROMISES Changes may only be made via signed change order request and may incur extra charges. <u>X esp X</u>					
Buyer understands that if not paid 7 business days prior to completion, balance must be paid in certified funds. <u>X esp X</u>					
Buyer agrees that the unpaid balance due will be paid in full on or before: Per Lender Requirements <u>X esp X</u>					
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 PURCHASE AGREEMENT. I UNDERSTAND THAT THIS CANCELLTION 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 AGREEMENT BY THE DEALER WILL CANCEL THIS AGREEMENT.					
Please read your Payment Disclosure carefully for termination of Purchase Agreement by any party. All sales are subject to fees for cancellation.					
Unless otherwise stated, if for any reason buyer is not ready to authorize construction of the above home, the amount of this purchase agreement is subject to an increase. If the cost of the home increases between the date of this agreement and the date buyer authorizes construction, buyer agrees that the purchase agreement amount will be adjusted to cover the increases incurred during such time. <u>X esp X</u>					
THIS AGREEMENT ALONG WITH ADDENDUMS CONTAIN THE ENTIRE UNDERSTANDING BETWEEN DEALER AND BUYER AND NO OTHER REPRESENTATION OR INDUCEMENT, VERBAL OR WRITTEN, HAS BEEN MADE WHICH IS NOT CONTAINED IN THIS PURCHASE AGREEMENT.					

By Reyna Mondragon 2/19/24 SIGNED Edra Shanay Pierce 2-19-24
 Reyna Mondragon - 46927 Champion Homes Center Representative X BUYER Edra Shanay Pierce Date

By Shirley Miller 2/19/2024 SIGNED _____ Date
 Champion Homes Center MANAGER REVIEW & ACCEPTANCE X BUYER

Application # _____

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Name: Edna Shanay Pierce Address: 222 High Ridge Apt G

City: Sanford State: NC Zip: 27330 Daytime Phone: (910) 916-8316

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

Name: Tracy Maxwell Address: 13782 Mc Dougall Rd

City: Sanford State: NC Zip: 27332 Daytime Phone: 919-935-4292

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: _____

Phone: _____ Address: _____

City: _____ State: _____ Zip: _____ Email: _____

Setup Signature: _____ State Lic# _____

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

Phone: _____ Address: _____

City: _____ State: _____ Zip: _____ Email: _____

Electrician's Signature: _____ State Lic# _____

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

Phone: 910-322-5113 Address: 775 Dawfield Dr

City: FAYETTEVILLE State: NC Zip: 28311 Email: overhillsheatingandair@gmail.com

HVAC Signature: Nathan S Hall State Lic# 24106

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

Phone: _____ Address: _____

City: _____ State: _____ Zip: _____ Email: _____

Plumber's Signature: _____ State Lic# _____

Part III - Manufactured Home Information

Model Year: 2024 Size: 13'4" x 56 Complete & follow zoning criteria sheet

Park Name: -not a park, private property Lot Number: _____

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Signature of Home Owner or Agent

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Name: Tracy Marrow Address: 13782 McDougall Rd

City: Sanford State: NC Zip: 27332 Daytime Phone: 919-935-4292

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Name, address, & phone must match information on license)

A. **Set-Up Contractor** Company Name: _____

Phone: _____ Address: _____

City: _____ State: _____ Zip: _____ Email: _____

Setup Signature: _____ State Lic# _____

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

Phone: _____ Address: _____

City: _____ State: _____ Zip: _____ Email: _____

Electrician's Signature: _____ State Lic# _____

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

Phone: _____ Address: _____

City: _____ State: _____ Zip: _____ Email: _____

HVAC Signature: _____ State Lic# _____

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

Phone: _____ Address: _____

City: _____ State: _____ Zip: _____ Email: _____

Plumber's Signature: _____ State Lic# _____

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Name: Tracy Morrow Address: 13782 McDougall Rd
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A. **Set-Up Contractor** Company Name _____
Phone _____ Address _____
City _____ State _____ Zip _____ Email _____
Setup Signature _____ State Lic# _____

B. **Electrical Contractor** Company Name: JALElectricalSERVICE INC
Phone: 910-977-0310 Address: 870 Three Wood Dr.
City: Fayetteville State: NC Zip: 29312 Email: lee@jalelectricalservice.com
Electrician's Signature: [Signature] State Lic# 13276-L

C. **Mechanical Contractor** Company Name _____
Phone: _____ Address _____
City _____ State _____ Zip _____ Email _____
HVAC Signature _____ State Lic# _____

D. **Plumbing Contractor** Company Name _____
Phone: _____ Address _____
City _____ State _____ Zip _____ Email _____
Plumber's Signature _____ State Lic# _____

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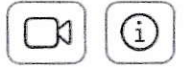
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Signature of Home Owner or Agent

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To: +1 (910) 814-7705



iMessage
Today 6:35 PM

Double J Plumbing LLC
614 Byrd Rd Bunnlevel 28323
[910-814-7705](tel:910-814-7705)
jamiejohnsonplumbing@gmail.com
License #21649

Thank You!

Delivered

Your welcome



iMessage

