

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: Joseph K Revels Address: 210 Revels Rd

City: Fuquay Varina State: NC Zip: 27526 Daytime Phone: (919) 427-7267

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 Horner Blvd

City: Sanford State: NC Zip: 27330

State Lic# 3400 Email: N/A

B. **Electrical Contractor** Company Name: King Heating Air Conditioning

Phone: 919-890-4898 Address: 300 Wilson Rd

City: Sanford State: NC Zip: 27330

State Lic# 21207-U Email: N/A

C. **Mechanical Contractor** Company Name: Tin Shop

Phone: 919-708-8340 Address: 3489 Edward Rd

City: Sanford State: NC Zip: 27330

State Lic# 22513 Email: N/A

D. **Plumbing Contractor** Company Name: Thomas Plumbing & repairs

Phone: 919-499-8300 Address: 841 McArthur Rd

City: Broadway State: NC Zip: 27505

State Lic# 12286 Email: N/A

Part III - Manufactured Home Information

Model Year: 2025 Size: 28 X 56 **Complete & follow zoning criteria sheet**

Park Name: _____ 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.

DocuSigned by:

EJ Nomack

Signature of Home Owner or Agent

11/27/28

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

1947 S Horner Blvd
Sanford NC 27330

919-775-3600 countryfairhomes@gmail.com

BUYER(S) Joseph Kent Revels
 ADDRESS 210 Revels Rd Fuquay Varina NC 27526
 DELIVERY ADDRESS 144 Thornburg Ln Fuquay NC 27526
 MAKE Champion MODEL 2856 Ironclad YEAR 2025 BEDROOMS 3 FLOOR SIZE 56 W 28 HITCH SIZE 56 W 28 STOCK NUMBER
 THIS UNIT IS NEW USED SERIAL NUMBER COLOR PROPOSED DELIVERY DATE KEY NUMBERS
 PHONE 919-427-7267 DATE 11/21/24 SALESPERSON

LOCATION	R-VALUE	THICKNESS	TYPE OF INSULATION	BASE PRICE OF UNIT	
CEILING				OPTIONAL EQUIPMENT	
EXTERIOR					
FLOORS				SUB-TOTAL	\$ 159,900.00

THIS INSULATION INFORMATION WAS FURNISHED BY THE MANUFACTURER AND IS DISCLOSED IN COMPLIANCE WITH THE FEDERAL TRADE COMMISSION RULE 16CRF, SECTION 460.16.

OPTIONAL EQUIPMENT, LABOR AND ACCESSORIES

Delivery and setup	\$			NON-TAXABLE ITEMS	
Electrical				VARIOUS FEES AND INSURANCE	
Plumbing to exterior of home				CASH PURCHASE PRICE	159,900.00
Brick				TRADE-IN ALLOWANCE	\$
Heat Pump				LESS BAL. DUE on above	\$
2 set of steps				NET ALLOWANCE	\$
				CASH DOWN PAYMENT	\$ 127,920.00
				CASH AS AGREED	\$
				LESS TOTAL CREDITS	\$
				SUB-TOTAL	\$ 31,980.00
				SALES TAX (If Not Included Above)	
				Unpaid Balance of Cash Sale Price	\$ 31,980.00

when house is finished , when CO issued (31,980.00)

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 _____ %
 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 DEALER BUYER

EJ WOMACK ENTERPRISES INC DEALER
 Not Valid Unless Signed and Accepted by an Officer of the Company or an Authorized Agent
 DocuSigned by: EJ Womack Approved

By _____ SIGNED X _____ BUYER
 _____ SIGNED X _____ BUYER