

# Marty Wright Home Sales, Inc.

1140 N. Roberts Avenue  
Lumberton, NC 28358

BUYER(S) <b>William Thomas Duckworth</b>		PHONE <b>704-991-6150</b>	DATE <b>5-9-25</b>
ADDRESS <b>170 Sundown Dr. Vass, NC 28394</b>		SALESPERSON <b>Taylor</b>	
DELIVERY ADDRESS <b>Lt #7 Atkins Corner, Cypress Church Rd. Camerun, NC 28326</b>			
MAKE & MODEL <b>Clayton</b>	YEAR <b>2025</b>	BEDROOMS <b>4</b>	FLOOR SIZE <b>76</b>
SERIAL NUMBER	COLOR	HITCH SIZE <b>32</b>	STOCK NUMBER
<input checked="" type="checkbox"/> NEW <input type="checkbox"/> USED		PROPOSED DELIVERY DATE	KEY NUMBERS

  

LOCATION	R-VALUE	THICKNESS	TYPE OF INSULATION	BASE PRICE OF UNIT	OPTIONAL EQUIPMENT	STOCK NUMBER
CEILING						
EXTERIOR						
FLOORS						
THIS INSULATION INFORMATION WAS FURNISHED BY THE MANUFACTURER AND IS DISCLOSED IN COMPLIANCE WITH THE FEDERAL TRADE COMMISSION RULE 16CRF, SECTION 460.16.				SUB-TOTAL		<b>\$201,200.00</b>
<b>OPTIONAL EQUIPMENT, LABOR AND ACCESSORIES</b>				SALES TAX		<b>4778.50</b>
<b>Delivery / Setup</b> <b>Trimout</b> <b>Brick Skirting</b> <b>Heat pump sized by Installer</b> <b>Elect / Plumb Hookup</b> <b>3 sets Steps</b> <b>Septic Tank Up to \$5000.00</b>				NON-TAXABLE ITEMS		<b>133.50</b>
				VARIOUS FEES AND INSURANCE		
				<b>CASH PURCHASE PRICE</b>		<b>206,112.00</b>
				TRADE-IN ALLOWANCE \$		
				LESS BAL. DUE on above \$		
				NET ALLOWANCE \$		
				CASH DOWN PAYMENT \$		
				CASH AS AGREED \$		
				<b>LESS TOTAL CREDITS</b>		<b>\$</b>
				SUB-TOTAL		<b>\$</b>
				SALES TAX (If Not Included Above)		
				<b>Unpaid Balance of Cash Sale Price</b>		<b>\$</b>
<p>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.</p>						
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.		
All used homes are sold "AS IS" <u>No Warranty</u> . Dealer <u>NOT</u> responsible for any repairs for any reason (For example but <u>not</u> limited to the following: leaks, mold, mildew, water damage, structural damage, roof repairs, plumbing, electrical, etc.). Buyer understands <u>completely</u> that the Dealer is <u>NOT</u> responsible for any repairs or damages to my <u>Used</u> Home. I acknowledge that the Dealer may use the funds from my deposit to complete the contract entered into on this purchase agreement; including, but not limited to site, preparation, conducting a title search, the issuance of the permits, etc.				BUYER(S) ACKNOWLEDGE RECEIPT OF A COPY OF THIS ORDER AND THAT BUYER(S) HAVE READ AND UNDERSTAND THE BACK OF THIS AGREEMENT.		
NOTE: WARRANTY AND EXCLUSIONS AND LIMITATIONS OF DAMAGES ON THE REVERSE SIDE.				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.		
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						

  

Marty Wright Home Sales, Inc.		DEALER	SIGNED X _____	BUYER
Not Valid Unless Signed and Accepted by an Officer of the Company or an Authorized Agent			SOCIAL SECURITY NO. _____	
By _____	<i>Approved</i>		SIGNED X _____	BUYER
			SOCIAL SECURITY NO. _____	