

**Application for Building and Trade Permit**

Owner's Name: Gregory P. Hicks Date: 8-1-06  
 Address: JK Stewart Ln Lot 4 Phone: 919-842-6855  
 Directions to job site: Go to old 421 turn @ on McColgan Rd  
Go approx 13 miles turn @ into JK Stewart Ln Lot 4  
 to the  
 Subdivision: Dorothy Stewart Lot: 4  
 Construction Type: (Please Check) Building Use: (Please Check)  
 New  Residential  
 Renovation  Modular  
 Addition  Commercial  
 Moved House  Multi-Family  
 Other  
 Description of Proposed Work: ON Frame Modular  
 Total Project Cost: 85,000.00

**Building Permit Information**

Heated SF 1547 Crawl Space () Building Construction Cost \$ 65,000.00  
 Unheated SF 0 Slab () Acres Disturbed 1.01 Stories 1  
Power Rock m.H. movers Telephone 919-775-3600  
 Building Contractor's Company Name Address 2516 Jefferson Davis Hwy  
Bobby Suggs License #  
 Signature of Officer(s) of Corporation

**Electrical Permit Information**

Description of Work Hook up Electrical Electrical Cost \$ 850.00  
 TS Pole: Yes () No () Underground () Overhead ()  
 Permanent Service: Underground () Overhead () Service Size: 200 Amps  
Bobby Sharpe Telephone 919-499-3338  
 Electrical Contractor's Company Name Address 735 Sharpe Rd  
Bobby Sharpe License #  
 Signature of Officer(s) of Corporation

**Mechanical Permit Information**

Description of Work Hook up Heat Pump  
 Number of Units 1 Type System HPump Mechanical Cost \$ 3,000.00  
Tim Shop Telephone 919-499-1757  
 Mechanical Contractor's Company Name Address 3489 Edwards Rd  
Kevin Wilkerson License #  
 Signature of Officer(s) of Corporation

**Plumbing Permit Information**

Description of Work Hook up water/sewer lines  
 Number of Baths 2 Plumbing Cost \$ -0-  
Gregory P. Hicks Telephone 919-842-6855  
 Plumbing Contractor's Company Name Address 161 Allendale Ln  
Gregory Hicks License #  
 Signature of Officer(s) of Corporation

**Insulation Permit Information**

Residential () Other () Not/Required ()  
 Insulation Contractor's Company Name Address Telephone

**Affidavit for Worker's Compensation  
N.C.G.S. 87-14**

The undersigned applicant for Building Permit # \_\_\_\_\_ being the:

- Contractor
- Owner
- Officer/Agent of the Contractor or Owner

Do hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:

- Has/have three (3) or more employees and has/have obtained workers' compensation insurance to cover them.
- Has/have one (1) or more subcontractors(s) and has/have obtained workers' compensation insurance to cover them.
- Has/have one (1) or more subcontractors(s) who has/have their own policy of workers' compensation insurance covering themselves.
- Has/have not more than two (2) employees and no subcontractors.

While working on the project for which this permit is sought it is understood that the Central Permitting Department issuing the permit may require certificates of coverage of worker's compensation insurance prior to issuance of the permit and at any time during the permitted work from any person, firm or corporation carrying out the work.

Firm Name: Raven Rock mth mowers  
By/Title: Bobby Suggs / Supervisor  
Date: 8-1-06

(MODULAR)

GREG. HICKS

8-1-06

Required Inspections for SFA/SFD

Appl # 0650015281  
Valuation \$100,512  
Sq. Ft 1547

<u>Seq</u>		<u>Seq</u>	
10	<input checked="" type="checkbox"/> R*Bldg Footing	60	Two Trade Final > 2500
10-30	<input checked="" type="checkbox"/> R*Elec Temp Service Pole	60	One Trade Final
20	<input type="checkbox"/> R*Bldg Foundation	60	One Trade Final > 2500
20	<input type="checkbox"/> Address Confirmation	999	Envir. Operations Permit
30-999	<input type="checkbox"/> R*Open Floor		
30-999	<input type="checkbox"/> R*Bldg Slab Insp		
30-999	<input type="checkbox"/> R*Elec Under Slab		
30-999	<input type="checkbox"/> R*Plumb under Slab		
30-999	<input type="checkbox"/> R*Bldg Water/Damp Proofing		
40	<input type="checkbox"/> Four Trade Rough In		
40	<input type="checkbox"/> Four Trade Rough In > 2500		
40	<input type="checkbox"/> Three Trade Rough In		
40	<input type="checkbox"/> Three Trade Rough In > 2500		
40	<input type="checkbox"/> Two Trade Rough In		
40	<input type="checkbox"/> Two Trade Rough In > 2500		
40	<input type="checkbox"/> One Trade Rough In		
40	<input type="checkbox"/> One Trade Rough In > 2500		
50	<input type="checkbox"/> R*Insulation Inspection		
60	<input type="checkbox"/> Four Trade Final		
60	<input type="checkbox"/> Four Trade Final > 2500		
60	<input type="checkbox"/> Three Trade Final		
60	<input type="checkbox"/> Three Trade Final > 2500		
60	<input type="checkbox"/> Two Trade Final		

**E. J. WOMACK ENTERPRISES INC.  
DBA COUNTRY FAIR HOMES**

2516 Jefferson Davis Highway  
SANFORD, NORTH CAROLINA 27330  
(919) 775-3600 • 1-800-509-3600 • Fax: (919) 775-7533

BUYER(S) <u>Gregory Phillip Hicks</u>		PHONE <u>719 842 6855</u>	DATE <u>7-21-66</u>
ADDRESS <u>161 Alledale Lane Sanford NC 27330</u>		SALESPERSON <u>EJWomack</u>	
DELIVERY ADDRESS			
MAKE & MODEL <u>Champion Mod 272</u>	YEAR <u>2007</u>	BEDROOMS <u>3</u>	FLOOR SIZE <u>58' x 28'</u>
SERIAL NUMBER <u>Special order</u>	COLOR <u>Cl-1</u>	PROPOSED DELIVERY DATE <u>ASAP</u>	HITCH SIZE <u>2 1/2"</u>
<input checked="" type="checkbox"/> NEW <input type="checkbox"/> USED		KEY NUMBERS	
LOCATION	R-VALUE	THICKNESS	TYPE OF INSULATION
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.			BASE PRICE OF UNIT \$ <u>85,000.00</u>
OPTIONAL EQUIPMENT, LABOR AND ACCESSORIES			OPTIONAL EQUIPMENT
<p><u>Home to be delivered set up to include 3 1/2 Ton Heat Pump</u></p> <p><u>Septic, Electrical, footers, shw-wall, steps, Brick water hookups incl.</u></p>			SUB-TOTAL \$
			SALES TAX
			NON-TAXABLE ITEMS
			VARIOUS FEES AND INSURANCE
			1. CASH PURCHASE PRICE \$
			TRADE-IN ALLOWANCE \$
			LESS BAL. DUE on above \$
			NET ALLOWANCE \$
			CASH DOWN PAYMENT \$
			CASH AS AGREED SEE REMARKS \$
2. LESS TOTAL CREDITS \$			
REMARKS:			SUB-TOTAL \$
BALANCE CARRIED TO OPTIONAL EQUIPMENT \$			SALES TAX (If Not Included Above)
<b>NOTE: WARRANTY AND EXCLUSIONS AND LIMITATIONS OF DAMAGES ON THE REVERSE SIDE</b>			3. Unpaid Balance of Cash Sale Price <u>85,000.00</u>
DESCRIPTION OF TRADE-IN	YEAR	SIZE	<p>Dealer and Buyer certify that the additional terms and conditions printed on the other side of this contract 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> <p>ESTIMATED RATE OF FINANCING _____ %</p> <p>NUMBER OF YEARS _____</p> <p>ESTIMATED MONTHLY PAYMENTS \$ _____</p> <p>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 CONTRACT.</p> <p>BUYER(S) ACKNOWLEDGE RECEIPT OF A COPY OF THIS ORDER AND THAT BUYER(S) HAVE READ AND UNDERSTAND THE BACK OF THIS AGREEMENT.</p> <p><b>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.</b></p>
MAKE	MODEL	BEDROOMS	
TITLE NO.	SERIAL NO.	COLOR	
MOUNT OWING TO WHOM			
ANY DEBT BUYER OWES ON TRADE-IN IS TO BE PAID BY <input type="checkbox"/> DEALER <input type="checkbox"/> BUYER			
E. J. WOMACK ENTERPRISES INC. DBA COUNTRY FAIR HOMES			SIGNED X _____ BUYER
Not Valid Unless Signed and Accepted by an Officer of the Company or an Authorized Agent			SOCIAL SECURITY NO. _____
Approved _____			SIGNED X _____ BUYER
			SOCIAL SECURITY NO. _____

NORTH CAROLINA MODULAR BUILDING  
SET-UP CONTRACTOR LICENSE BOND

.RSB 410 4793

WE E. J. Womack Enterprises Inc. DBA Raven Rock Mobile Home Movers as principal, located at  
2516 Jefferson Davis Hwy, Sanford, NC and RLI (surety) of  
Po Box 3967, Peoria, IL 61612 (address) a corporation incorporated under the laws of the  
State of North Carolina and duly licensed to transact a surety business in the State of North Carolina as surety,  
are indebted and bound to the Harnett (city or county inspection department) in the sum of  
five thousand (\$5,000) dollars for which payment we bind ourselves and our legal representatives jointly and severally.

THE CONDITION OF THIS OBLIGATION IS SUCH, that whereas the principal has entered into a contract for the set-up and  
installation of the modular building described herein;

NOW, THEREFORE, if the principal and all his agents and employees shall set-up and install said modular building in compliance  
with the regulations of the North Carolina State Building Code governing installation of modular buildings, then this obligation shall be null  
and void; otherwise, it shall be in full force and effect.

It is expressly provided that:

1. This bond is executed by the said principal and surety to enable the principal to set-up one North Carolina labeled modular building.
2. This bond is in full force and effect as to the above State Building Code obligations of the principal for the set-up of one North Carolina labeled modular building at the following address:  
Street Lot 4, JK Stewart Ln.  
City Broadway, NC 27505, North Carolina
3. This bond will remain in full force and effect for one year following the issuance of the certificate of compliance for the modular building.
4. The bond must remain on file with the Harnett (city or county inspection dept.).
5. The owner of the modular building described in paragraph 2, who sustains any loss or damage by reason of any act or omission covered by this bond may, in addition to any other remedy that he may have, bring an action in his own name on this bond for the recovery of damages sustained by him.
6. It is further understood and agreed that this bond shall be open to successive claims up to the face value of the bond. The surety shall not be liable for successive claims in excess of the bond amount, regardless of the number of claims made against the bond.

In Witness Whereof, the above bounden parties have executed this instrument under their several seals, this the 1 day  
of Aug, 1980, the names and corporate seal of each corporate party being hereto annexed and these presents  
duly signed by its undersigned representative, pursuant to authority of its governing body.

[Signature]  
Signature of Principal  
President  
Title

Surety by M. L. Rhodes  
(signature)  
x Michael Rhodes  
(printed name)

Title Agent  
Address Po Box 1705, Sanford, NC  
x M. L. Rhodes  
N.C. Resident Agent  
Po Box 1705, Sanford, NC 27331  
Address



Power of Attorney Attached



9025 North Lindbergh Dr. • Peoria, IL 61615  
(309) 692-1000 or (800) 645-2402

# LICENSE AND PERMIT BOND

(For County, City, Town or Village Only)

Bond No. RSB- 804871

### Know All Men By These Presents:

That we E. J. Womack Enterprises Inc. DBA Raven Rock Mobile Home Movers  
of Sanford, State of North Carolina as Principal,  
and the RLI Insurance Company, a corporation duly licensed to do business in the state of North Carolina, as  
Surety, are held and firmly bound unto the Harnett Co.

(Valid only when a County, City, Town or Village is named as Obligee)

State of North Carolina, Obligee, in penal sum of Five thousand (\$ 5,000 ) DOLLARS.  
(Not valid if filled in for more than \$25,000)

lawful money of the United States, to be paid to the said Obligee, for which payment well and truly to be made, we bind ourselves and our legal representatives, jointly and severally by these presents.

THE CONDITION OF THE ABOVE OBLIGATION IS SUCH, that whereas, the said Principal has been licensed as Mobile Home Set-up by the Obligee.

NOW, THEREFORE, if the said Principal shall faithfully perform the duties and in all things comply with the laws and ordinances, including all Amendments thereto, pertaining to the license or permit applied for, then this obligation to be void, otherwise to remain in full force and effect for a period commencing on the 1 day of Aug, 2006, and ending on the 1 day of Aug, 2007, unless renewed by Continuation Certificate.

This bond may be terminated at any time by the Surety upon sending written notice to the clerk of the Political Subdivision with whom this bond is filed and to the Principal, addressed to them at their first known address, and at the expiration of thirty-five (35) days from the mailing of said notice, or as soon thereafter as permitted by applicable law, whichever is later, this bond shall ipso facto terminate and the Surety shall thereupon be relieved from any liability for any acts or omissions of the Principal subsequent to said date.

Dated this 1 day of Aug, 2006

## COMPANY COPY

Mail this copy to RLI Insurance Company the same day the Bond is issued. Do not attach your Power of Attorney as these bonds have been signed by an officer of our Company.

### UNDERWRITING CRITERIA

RLI may verify this information and obtain any additional information from other sources.

Applicant's Mailing Address 2516 Jefferson Davis Hwy Sanford, NC

Applicant's Social Security Number 56-1454849

If you believe the applicant has good character and adequate experience and financial resources to perform the work or service, you may issue the bond. Please refer to the instructions on the back of this pad for restrictions.

<u>M. L. Rhoads</u> Agent's Signature	<u>Payne Insurance Services</u> Agency Name
	<u>41372</u> Agency Code
Date <u>8-1-06</u>	<u>P.O. Box 1705, Sanford, NC 27330</u> Mailing Address
	<u>Sanford</u> City
	<u>NC 27330</u> State Zip Code

