Application # 18-5004 3356

Harnett County Central Permitting PO Box 65 Lillington NC 27546 910 893 7525 Fax 910 893 2793 www harnett org/permits

Each section below to be filled out by whomever performing work Must be owner or licensed contractor Address company name & phone must match

Application for Residential Building and Trades Permit

| Owners Name Nick Ambrose | Date 6-15-18 |
|--|-----------------------|
| Site Address Lat 5 Land Lane, Coats, NC 2 | 7521 Phone 9/9-621-09 |
| Directions to job site from Lillington | |
| Directions to job site from Limitigion | |
| | |
| | |
| | Lot |
| Description of Proposed Work Modules | # of Bedrooms 3 |
| Heated SF Unheated SF Finished Bonus Room? | |
| General Contractor Information | 1 |
| Tirst Moice Hornes | |
| Building Contractor's Company Name | Telephone |
| Address | Email Address |
| Address - has swity bond | Email Address |
| License # | |
| Electrical Contractor Informatio | <u>n</u> |
| | 200 Amps T-PoleYesNo |
| Nelson Harrison Electric | 919-738-9590 |
| Electrical Contractor's Company Name | Telephone |
| 5048 Harrison Philps Rd LaborageNC 28551 | |
| Address | Email Address |
| 13558 | |
| License # Mechanical/HVAC Contractor Inform | nation |
| Description of Work AC installation | |
| Hase mechanial | 252-560-4437 |
| Mechanical Contractor s Company Name | Telephone |
| 3791 OLL PIAK Hill Rd Pink Hill Mc 28572 | • |
| Address | Email Address |
| 3731 | |
| License # | |
| Plumbing Contractor Information | - · |
| Description of Work Yumb Home | #Baths 2 |
| Plumbing Contractor's Company Name | 252-939-4783 |
| | Telephone |
| RO Box 1587 Swanshro Ne 28584 | Email Address |
| Address | citiali Address |
| 20017 - E1 License # | |
| Insulation Contractor Information | on_ |
| | |
| Insulation Contractor's Company Name & Address | Telephone |

I hereby certify that I have the authority to make necessary application that the application is correct and that-the construction will conform to the regulations in the Building Electrical Plumbing and Mechanical codes and the Harnett County Zoning Ordinance. I state the information on the above contractors is correct as known to me and that by signing below I have obtained all subcontractors permission to obtain these permits and if any changes occur including listed contractors site plan number of bedrooms building and trade plans. Environmental Health permit changes or proposed use changes. Lecrify it is my responsibility to notify the Harnett County Central Permitting Department of any and all changes.

any and all changes **EXPIRED PERMIT FEES -** 6 Months to 2 years permit re-issue fee is \$150 00 After 2 years re-issue fee is as per current fee schedule

Signature of Owner/Contractor/Officer(s) of Corporation Affidavit for Worker's Compensation N C G S 87-14 _______Officer/Agent of the Contractor or Owner The undersigned applicant being the General Contractor ____ 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 华 人名英格兰斯 电电流电路 Has three (3) or more employees and has obtained workers compensation insurance to cover them Has one (1) or more subcontractors(s) and has obtained workers compensation insurance to cover Has one (1) or more subcontractors(s) who has their own policy of workers compensation insurance covering themselves Has no 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 Company or Name

FIRST CHOICE HOMES, INC.

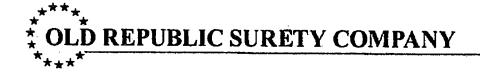
800 East New Bern Road KINSTON, NORTH CAROLINA 28504 Phone: (252) 523-3680 • Fax: (252) 523-6130

www.firstchoicenc.com

| BUYER(S) NICK F | Ambrose | | | | | P | HONE 19 | -6.21 | -0 | 9011 | DATE | 3-23- | . 18 |
|---|--------------------------|-----------------|--------------|----------------|--------------|--|--|------------------|----------------|-----------|--|-------------|-----------|
| ADDRESS. 3 | Sellie | | <u> </u> | | | | | 1 | SALESPE | 06 | <i></i> | 24.3. | 10 |
| DELIVERYADDRESS . | 1 : | - J. A | - | | | | <u> </u> | | | C/ G | 155 | | - 1 |
| MAKE & MODEL | d Lane | <u>(ಬಿ</u> | als | NC | | 775 | | 1 | · | | | | |
| CAvaliEn | T. | Lingde | 1 L | - | - 1 | YEAR | BEDROOMS 3 | FLOOR | - 1 | | H SIZE | STOCK NU | IMBER |
| SERIAL NUMBER | _ w | - | -2-74 | | COLOR | 018 | | | | LIVERY DA | W 25 | KEY NUMB | EDG |
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| IS DISCLOSED IN COMPL | IANCE WITH THI | E FEDERAL | TRADE | COMMISSION | I RULE | SAL | LES TAX | | | | | INC | |
| 16CFR SECTION 460.16. | QUIPMENT, LA | POP AND / | * C C E C | CODIEC | | Nov Taylor T | | | | | | | |
| LAND | MOIT WEIVI, LA | BUKANUA | | | | | N-TAXABLE | | | | | | |
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| WATER METER | | | | INC | | TRA | ADE-IN ALLO | I PURCHA | , | IICE | | 777777 | 11/1// |
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| 2-10 WARRANTY | | | | | + | agre | ed to as a | part of the | his Aqı | reemen | nt. the sa | ame as if | f printed |
| SOIL TREATMENT | | | | | + | abov | above the signatures. Buyer is purchasing the a described manufactured home; the optional equipmen | | | | | above | |
| FLAG LOT / SURVEY | | | | | 7 | acce | accessories, the insurance as described has been voluntary; | | | | | tary: that | |
| FOUNDATION CERTIFICA | TION | | | | | Buyer's trade-in is free from all claims whatsoever, except | | | | | | | |
| FINAL INSPECTION | | | | | | as noted. | | | | | | | |
| CONSTRUCTION LOAN FE | <u>=</u> E | | | ٠٨٧ | | ESTIMATED RATE OF FINANCING | | | | | .% | | |
| primits | | | | | _ | NUMBER OF YEARS | | | | | | | |
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| | | | | | + | ESTIMATED MONTHLY PAYMENTS \$ THIS AGREEMENT CONTAINS THE ENTIRE UNDERSTANDING BETWEEN | | | | | | | |
| • | | <i>)</i> | | | +- | DEAL | LER AND B | BUYER AI | ои ди | OTHE | R REPR | ESENTAT | TION OR |
| Seller may con | ntribute up to | % toward cl | losing | | | COVE | CEMENT, VE RED IN THIS | RBAL OR V | WRITTE INT. | in, has | BEEN MA | DE WHICH | H IS NOT |
| costs, prepaid items, or bro | ker non-allowed f | fees. | | | + | BUYE | R(S) ACKNOW | VLEDGE RE | CEIPT C | OF A COP | Y OF THE | S ORDER / | AND THAT |
| Buyer and Seller agree to p | participate in | in the am | nount | | | | R(S) HAVE RE | | | | | | |
| of plus a fee. | | | | | | | S PURCH | | | | | | |
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| MAKE | MODEL | | | BEDROOF | MS | UND | DERSTAN | id that | THE | DEAL | LER M | AY NOT | T HAVE |
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| AMOUNT OWING TO WHOM ANY CHANGE TO THE TERMS OF THE PURCHASE AGREEMENT BY THE DEALER WILL CANCEL THIS AGREEMENT. ANY DEBT BUYER OWES ON TRADE-IN IS TO BE PAID BY DEALER BUYER BUYER. | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| FI | RST CHOICE HO | OMES, INC. | | beurn | SIGN | IED X _ | | | | | | | BUYER |
| Not Valid Unless Signed and Accept | led by an Officer of the | Company or an / | Authorized | DEALER I Agent | soci | IAL SEC | URITY NO | | | <i>I</i> | / | | |
| | | | | | SIGN | IED X _ | | | | | | | BUYER |
| Approved By | | | | | 0001 | 141 050 | LIDITY NO | | | , | , | | |

NORTH CAROLINA MODULAR BUILDING SET-UP CONTRACTOR LICENSE BOND

| | | | | W150317296 |
|----------------|---|---|---|---|
| We,_ | | ies, Inc. | | , as principal, located at |
| | 800E. New Bern Road Kinston, NC 28504 | and | Old Republic S | Surety Company |
| (sure | ty) of 445 S Moorland Rd, Suite 2 | 00 Brookfie | ld, WI 53005 | _ (address) a corporation |
| incor | porated under the laws of the State of | Wisconsin | and duly licensed to | transact a surety business |
| | e State of North Carolina as surety, are in | | | |
| (city o | or county inspection department) of five telves and our legal representatives jointly a | thousand (\$ and severall | 55,000.00) dollars for y. | which payment we bind |
| modu instal | THE CONDITION OF THIS OBLIGATIOn of the set-up and installation of the mode NOW, THEREFORE, if the principal and alar building in compliance with the regular lation of modular buildings, then this obligation. | ular building all his ager tions of the | described herein; nts and employees sh North Carolina State | all set-up and install said Building Code governing |
| lt is e | expressly provided that: | | | |
| 1, | This bond is executed by the said princi | pal and sur | ety to enable the prin | cinal to set un one Morth |
| | Carolina labeled modular building. | , | or to origination the print | orbar to sociate one 1401111 |
| 2. | This bond is in full force and effect as to the | he above St | ate Building Code obli | gations of the principal for |
| • | the set-up of one North Carolina labele | d modular l | ouilding at the followi | ng address: |
| | Street | · · · · · · · · · · · · · · · · · · · | Lot 3 Loyd Lane | |
| 3. | City This bond will remain in full force and eff | Co | als | , North Carolina |
| . | compliance for the modular building. | ect for one | year following the issi | uance of the certificate of |
| 4. | The bond must remain on file with the _ | | Harnett Coun | h |
| | (city or county inspection dept.). | · · · · · · · · · · · · · · · · · · · | Tiamer Coun | <u> </u> |
| 5. 6. | The owner of the modular building descr reason of any act or omission covered by have, bring an action in his own name on t It is further understood and agreed that to value of the bond. The surety shall not be regardless of the number of claims made | this bond mand this bond for his bond shape the his bond shape for su | ay, in addition to any the recovery of damagall be open to successucessive claims in ex | other remedy that he may ges sustained by him. sive claims up to the face |
| corpo | In Witness Whereof, the above bounder this the 5th day of June rate party being hereto affixed and these ant to authority of its governing body. | parties hav | re executed this instru | and comporate sool of each |
| | | _ | of Principal | First Choice Homes, Inc. |
| TO\A/A | NE INCURANCE ACENOVILLO | | | |
| | VE INSURANCE AGENCY LLC sident Agent | Surety by _ | Roberts 8 1 | Signature) |
| 4.O. NE | sident Agent | | • | S. Witherow |
| Addres | 22 AE4E EALL & OF NELIGE DOAD, CHIEF 200 | - | | nted Name) |
| | SS 4515 FALLS OF NEUSE ROAD, SUITE 300 SH, NC 27609 | Title | = | • |
| | | Address | | d Rd, Suite 200 |
| | | ``. | Brookfield, | WI 53005 |
| | | POWER OF A | Yornay Attached | /JC & |



POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS: That OLD REPUBLIC SURETY COMPANY, a Wisconsin stock insurance corporation, does make, constitute and appoint:

Roberta S. Witherow of Brookfield, WI

its true and lawful Altomey(s)-in-Fact, with full power and authority, not exceeding \$10,000,000, for and on behalf of the company as surety, to execute and deliver and affix the seal of the company thereto (if a seal is required), bonds, undertakings, recognizances or other written obligations in the nature thereof, (other than ball bonds, bank depository bonds, mortgage deficiency bonds, mortgage guaranty bonds, guarantees of installment paper and note guaranty bonds, self-insurance workers compensation bonds guaranteeing payment of benefits, asbestos abatement contract bonds, waste management bonds, hazardous waste remediation bonds or black lung bonds), as follows: Effective Date: 6/5/2018 12:00:00 AM

Bond Number: W150317296

Bond Amount:

Five Thousand Dollars

\$ 5,000,00

Principal Name: First Choice Homes, Inc.

TOWNE INSURANCE AGENCY LLC

Obligee Name: Harnett County of Lillington, NC

and to bind OLD REPUBLIC SURETY COMPANY thereby, and all of the acts of said Attorneys-in-Fact, pursuant to these presents, are ratified and confirmed. This appointment is made under and by authority of the board of directors at a special meeting held on February 18, 1982.

This Power of Attorney is signed and sealed by facsimile under and by the authority of the following resolutions adopted by the board of directors of the OLD REPUBLIC SURETY COMPANY on February 18,1982.

RESOLVED that the president, any vice president or assistant vice president, in conjunction with the secretary or any assistant secretary, may appoint attorneys-in-fact or agents with authority as defined or limited in the instrument evidencing the appointment in each case, for and on behalf of the company to execute and deliver and affix the seal of the company to bonds, undertakings, recognizances, and suretyship obligations of all kinds; and said officers may remove any such attorney-in-fact or agent and revoke any Power of Attorney previously granted to such person.

RESOLVED FURTHER that any bond, undertaking, recognizance, or suretyship obligation shall be valid and binding upon the Company

- (i) when signed by the president, any vice president or assistant vice president, and attested and sealed (if a seal be required) by any secretary or assistant secretary; or
- (ii) when signed by the president, any vice president or assistant vice president, secretary or assistant secretary, and countersigned and sealed (if a seal be required) by a duly authorized attorney-in-fact or agent; or
- (iii) when duly executed and sealed (if a seat be required) by one or more attorneys-in-fact or agents pursuant to and within the limits of the authority evidenced by the Power of Attorney Issued by the company to such person or persons.

RESOLVED FURTHER that the signature of any authorized officer and the seal of the company may be affixed by facsimile to any Power of Attorney or certification thereof authorizing the execution and delivery of any bond, undertaking, recognizance, or other suretyship obligations of the company; and such signature and seal when so used shall have the same force and effect as though manually affixed.

| signature and seat which so asea 2119 | ill have the same force and | errect as though manually affix | ed. | | |
|--|---|---|---|--|------------------------------|
| IN WITNESS WHEREOF, OLD RE affixed this day of | PUBLIC SURETY COMPA | NY has caused these presents | to be signed by its proper | officer, and its corpor | ate seal to be |
| | | C SURPLE STATE | OLD REPUBLI | C SURETY COMPA | NY |
| Jane ? Phe | enus | SEAL SHE | Ma | Milie | • |
| Assistant Secretary | | The same of manufacture | | President | |
| STATE OF WISCONSIN, COUNTY OF W | /AUKESHA - SS | withing. | | | |
| On this 5th day of | June | 2018 personally came b | efore me. | Alan Pavlic | |
| and Jane E. Chemey | | . to me known to be the individu | ials and officers of the OLF | REPUBLIC SURET | Y COMPANY |
| who executed the above instrument, and | they each acknowledged t | he execution of the same, and | being by me duly swom of | lid cavarally danaca | and cau: that |
| mey are me said officers of the corporatio | in aforesaid, and that the se | 23! affixed to the above instrum: | ent is the seal of the comor | ation, and that eaid o | ornerate real |
| and their signatures as such officers were | duly anixed and subscriber | to the said instrument by the a | uthority of the board of dire | ctors of said corpora | tion. |
| | | OTAA) | Kothry K | L. Penson | |
| CERTIFICATE | | | My Commission Expires: | 09/28/201 | 8 |
| | | (Exp | ration of notary's commissi | on does not invalidate | this instrument |
| I, the undersigned, assistant secretary Power of Attorney remains in full force of Attorney remains in full force of Attorney remains in full force of the secretary force of the secre | ary of the OLD REPUBLIC and has not been revoked. | SURETY COMPANY, a Wisco ; and furthermore, that the Re | onsin corporation, CERTIF' solutions of the board of d | f that the foregoing irectors set forth in | and attached the Power of |
| Altorney, are now in force. | | | | | |
| 0876855 | Signed and sealed at | the City of Brookfield, Wi this | 5th day of | June . | <u>2018</u> . |
| ORSC 22262 (3-06) | | • | - Jane | - (neinus | |
| | | | / A\$812 | tant Secretary | |

Dale's Service

1244 Grays Mill Road Snow Hill, NC 28580 (252)-559-0359

To Whom It May Concern:

I Dale Walters authorize First Choice Homes INC of Kinston to purchase any and all manufactured home set up permits using my license number while they are purchasing other permits for this project.

Set Up License # 2172

Please feel free to contact me with any questions.

Thanks,

Dale Walters Date

I certify that Dale Walters appeared before me this day, acknowledging to me he voluntarily signed the foregoing document for the purpose state herein and in the capacity indicated.

Notary Public Signature:

Notary Print Name:

My Commission Expires:

1-6-2020

Hope Mechanical 3791 Old Pink Hill Rd. Pink Hill, NC 28572 (252) 560-4437

To Whom it May Concern:

Richard Koonce authorize First Choice Homes INC of Kinston to purchase manufactured home, set up permits using my license number while they are purchasing other permits for this project.

Mechanical License # 3731

Thanks,

Richard Koonce

I certify that Richard Koonce appeared before me this day, aknowledging to me he voluntarily signed the foregoing document for the purpose stated herien and in the capacity indicated.

Notary Public Signature

Notary Print Name

My commission expires:

Nelson Harrison Electric

5048 Harrison Phelps Road LaGrange, NC 28551 (919)-738-9590

To Whom It May Concern:

I, Nelson Harrison of Nelson Harrison Electric, authorize First Choice Homes to purchase electrical permits for me, using my license number while they are purchasing other permits needed for this project.

Electrical License # 13558

Please feel free to contact me with any questions.

Thanks, Hanson

Nelson Harrison

I certify that Nelson Harrison appeared before me this day, acknowledging to me he voluntarily signed the foregoing document for the purpose sated herein and in the capacity indicated.

Notary Public Signature:

Notary Print Name

My commission expires: 16-1010

Mikes Plumbing Service

PO BOX 1587
Swansboro, NC 28584
252)-764-9289

To whom it May Concern:

I Mike Lewis authorize First Choice Homes INC of Kinston to purchase plumbing permits using my license number while they are purchasing other permits for this project.

Plumbing License # 20017

Mike Lewis

| Thank | You, Mike | ws | |
|-------|--|----|--|
| | - Projection of the Control of the C | | |
| | ٠, | | |

I certify that Mike Lewis appeared before me this day, acknowledging to me he voluntarily signed the foregoing document for the purpose stated herein and in the capacity indicated.

Notary Public Signature:

Notary Print Name

Kenneth Kennel

1-6-2020

My commission expires.