

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: Albert Mullings Address: 145 Presidential BLV
City: Patterson State: N.J. Zip: 07501 Daytime Phone: (973) 417-8628

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

Name: Albert Mullings Address: 145 Presidential BLV
City: Patterson State: N.J. Zip: 07501 Daytime Phone: (973) 417-8628

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: Hudson mobile home man State Lic# 2269
Phone: 910-944-7491 Address: PO Box 1022
City: Aberdeen State: NC Zip: 28315

Setup Signature: Bruce Hudson

B. Electrical Contractor Company Name: _____ State Lic# owner
Phone: _____ Address: _____
City: _____ State: _____ Zip: _____

Electrician's Signature: Albert Mullings

C. Mechanical Contractor Company Name: _____ State Lic# owner
Phone: _____ Address: _____
City: _____ State: _____ Zip: _____

HVAC Signature: Albert Mullings

D. Plumbing Contractor Company Name: _____ State Lic# owner
Phone: _____ Address: _____
City: _____ State: _____ Zip: _____

Plumber's Signature: Albert Mullings

Part III - Manufactured Home Information

Model Year: 1980 Size: 14x76 # of Bedrooms 3

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 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.

Albert Mullings
Signature of Home Owner or Agent

6-4-07
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 new or from a dealer, we need proof of year on the Form 500 and if available, the serial number.

28315

Received

RECEIPT

DATE

6-4-07

No. 716262

RECEIVED FROM

ALBERT MAHINDS

\$7690.00

DOLLARS

FOR RENT
 FOR

1986 Champ:00 Ser # 0142

ACCOUNT	5690.00	FROM	TO
PAYMENT	7690.00	CASH	
BAL. DUE	— 00 —	CHECK	
		MONEY ORDER	

CASH
 CHECK
 MONEY ORDER

BY

Alan Mahinds

1182

Department of Transportation
Division of Motor Vehicles

Certificate of Title of a Motor Vehicle



The Commissioner of Motor Vehicles of the State of North Carolina hereby certifies that an application for a Certificate of Title to the herein described vehicle has been filed pursuant to the General Statutes of North Carolina.

1986 YEAR MODEL	CHAM MAKE	MH BODY STYLE	2369220142 VEHICLE IDENTIFICATION NUMBER
11/17/87 TITLE ISSUE DATE			731712276A TITLE NUMBER

Codes: R—Rebuilt or Reconstructed; M—Motor Change; B—Body Change

PATRICIA ANN WOOD
RT 1 BOX 293
STAR, N.C.

27356

And that the applicant has stated under oath that said applicant is the owner of said motor vehicle and that it is subject to the following liens and encumbrances:

LIENHOLDER DATE 11/09/87	FIRST LIEN RELEASED DATE 1-25-98
LIENHOLDER DATE	SECOND LIEN RELEASED DATE
LIENHOLDER DATE 11/09/87	FIRST LIEN RELEASED DATE 1-25-98
LIENHOLDER DATE 11/09/87	SECOND LIEN RELEASED DATE 1-25-98
LIENHOLDER DATE 11/09/87	FIRST LIEN RELEASED DATE 1-25-98
LIENHOLDER DATE 11/09/87	SECOND LIEN RELEASED DATE 1-25-98

ADDITIONAL LIENS:

He does further certify that reasonable diligence has been used in ascertaining whether or not the facts in said application for a certificate of title are true, and he is satisfied that the applicant is the lawful owner of the above described vehicle or is otherwise entitled to have the same registered in his name. Therefore, he does hereby certify that the above named applicant has been duly registered in the office of the Division of Motor Vehicles as the lawful owner of the above described vehicle, or is otherwise entitled to have the same registered in his name, and that it appears upon the official records of the Division of Motor Vehicles that at the date of the issuance of this certificate, said vehicle is subject to the liens hereinbefore enumerated, if any, and none other.

As WITNESS, his hand and seal of this Division the day and year appearing in this certificate as the title issue date.

34160176

William S. Hunt
COMMISSIONER OF MOTOR VEHICLES

DAMAGE DISCLOSURE STATEMENT
VEHICLES FIVE (5) YEARS OLD AND NEWER (Applies to Numbers 1 and 4)
Alterations or erasures void this form.

STATE LAW REQUIRES THAT EVERY SELLER DISCLOSE TO THE BUYER IF HE KNOWS OR REASONABLY SHOULD KNOW, THE INFORMATION LISTED BELOW. FAILURE TO DO SO WILL RESULT IN CIVIL LIABILITY.

<u>Chgm</u>	<u>M4</u>	<u>1986</u>	<u>2369220142</u>
<small>MAKE</small>	<small>BODY STYLE</small>	<small>YEAR MODEL</small>	<small>VEHICLE IDENTIFICATION NUMBER</small>
1. Has this vehicle been damaged by collision or other occurrence to the extent that damages exceed 25% of its value at the time of the collision or other occurrence? If yes, list parts that were damaged. _____			Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
2. Was this vehicle a salvage motor vehicle?* (ANY Year) If yes, in which state was it titled? _____			Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
3. Is this vehicle a flood vehicle?* (ANY Year)			Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
4. Is this vehicle a recovered theft vehicle? If yes, list parts that were damaged. _____			Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
5. Has this vehicle been reconstructed?* (ANY Year)			Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
I declare that the above information is true to the best of my knowledge:		ACKNOWLEDGEMENT OF BUYER:	
<u><i>Patricia Ann Wood</i></u> <small>SIGNATURE OF SELLER</small>		_____ <small>SIGNATURE OF BUYER</small>	
<small>*Address of Seller _____</small>			

NOTICE TO BUYER: RETAIN THIS INFORMATION. STATE LAW REQUIRES YOU TO DISCLOSE SIMILAR DAMAGE INFORMATION WHEN YOU SELL OR TRANSFER TITLE TO THIS VEHICLE.

**See definitions on reverse side.*

NOTE: RETAIL PURCHASER MUST APPLY FOR NEW TITLE