

OCT 28 2008 7:33AM

WHHS

FAIR HOMES 9197757533

TD: 9191085 NO. 635 P. 2.1

Application # 20650

Harnett County Central Permitting  
PO Box 65 Ullington, 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: BML, LLC Address: PO Box 577  
City: ULLINGTON State: NC Zip: 27546 Daytime Phone: 910-890-2103

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

Name: SAME 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: Davey Back MH Movers  
Phone: 919-715-3600 Address: 2516 Jefferson Davis Hwy  
City: Sanford State: NC Zip: 27330  
Setup Signature: Baley Suggs State Lic# 3400

B. Electrical Contractor Company Name: Bobby Sharpe  
Phone: 919-499-3388 Address: 735 Sharpe Rd  
City: Sanford State: NC Zip: 27330  
Electrician's Signature: \_\_\_\_\_ State Lic# 23262

C. Mechanical Contractor Company Name: Tin Shop  
Phone: 919-499-1757 Address: 3489 Edwards Rd  
City: Sanford State: NC Zip: 27330  
HVAC Signature: James Wilkinson State Lic# 23513

D. Plumbing Contractor Company Name: WW Plumbing Co. INC  
Phone: 919-639-4195 Address: PO Box 1235  
City: Angier State: NC Zip: 27501  
Plumber's Signature: Rick Wells State Lic# 14087

**Part III - Manufactured Home Information**

Model Year: 2007 Size: 14x80 # of Bedrooms 3  
Park Name: N/A 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 form is incorrect or false information has been provided that this permit could be revoked.

\_\_\_\_\_  
Signature of Home Owner or Agent

10/27/08  
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.

**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) Kenneth Moso PHONE \_\_\_\_\_ DATE 9-11-08  
 ADDRESS \_\_\_\_\_ SALESPERSON CD  
 DELIVERY ADDRESS \_\_\_\_\_

MAKE & MODEL Champion YEAR 07 BEDROOMS 3 FLOOR SIZE 66 W 14 L 70 W 14 STOCK NUMBER \_\_\_\_\_  
 SERIAL NUMBER 023-000-H-012218 NEW  USED  COLOR \_\_\_\_\_ PROPOSED DELIVERY DATE ASAP KEY NUMBERS \_\_\_\_\_

LOCATION	R-VALUE	THICKNESS	TYPE OF INSULATION	BASE PRICE OF UNIT	
CEILING					
EXTERIOR					
FLOORS					

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

OPTIONAL EQUIPMENT, LABOR AND ACCESSORIES	NON-TAXABLE ITEMS	
	VARIOUS FEES AND INSURANCE	
	1. CASH PURCHASE PRICE	\$ 28,340.00
	TRADE-IN ALLOWANCE \$	
	LESS BAL. DUE on above \$	
	NET ALLOWANCE \$	
	CASH DOWN PAYMENT \$	
	CASH AS AGREED SEE REMARKS \$	
	2. LESS TOTAL CREDITS	\$
	SUB-TOTAL	\$ 28,340.00
	SALES TAX (If Not Included Above)	
	3. Unpaid Balance of Cash Sale Price	\$ 28,340.00

Home to be delivered and setup. To include 3 ton heat pump

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.

ESTIMATED RATE OF FINANCING \_\_\_\_\_ %  
 NUMBER OF YEARS \_\_\_\_\_  
 ESTIMATED MONTHLY PAYMENTS \$ \_\_\_\_\_

REMARKS: \_\_\_\_\_  
 BALANCE CARRIED TO OPTIONAL EQUIPMENT \$ \_\_\_\_\_

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. 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 _____		X _____
TITLE NO _____ SERIAL NO _____ COLOR _____		

AMOUNT OWING TO WHOM \_\_\_\_\_  
 ANY DEBT BUYER OWES ON TRADE-IN IS TO BE PAID BY  DEALER  BUYER

**E. J. WOMACK ENTERPRISES INC. DBA COUNTRY FAIR HOMES** DEALER  
 Not Valid Unless Signed and Accepted by an Officer of the Company or an Authorized Agent  
 By E. J. Womack Approved \_\_\_\_\_  
 SIGNED X \_\_\_\_\_ BUYER  
 SOCIAL SECURITY NO. \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 SIGNED X \_\_\_\_\_ BUYER  
 SOCIAL SECURITY NO. \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_