

SCANNED  
5/4/10  
DATE

Application # 10-500-24842

Harnett County Central Permitting

PO Box 65 Lillington, 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)

AUG X 5 ENT'D  
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Home Owner Information:

Home Owner Information (To be completed by owner of the manufactured home)

Name: John G Barefoot Address: 1118 Durroch Rd

City: Lillington State: N.C Zip: 27546 Daytime Phone: (910) 425-6697

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

Name: Same as Above 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: SELF

Phone: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Setup Signature: John Barefoot State Lic# OWNER

B. Electrical Contractor Company Name: SELF

Phone: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Electrician's Signature: John Barefoot State Lic# OWNER

C. Mechanical Contractor Company Name: SELF

Phone: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

HVAC Signature: John Barefoot State Lic# OWNER

D. Plumbing Contractor Company Name: SELF

Phone: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Plumber's Signature: John Barefoot State Lic# OWNER

Part III - Manufactured Home Information

Model Year: 1995 Size: 28x48 Complete & follow zoning criteria sheet

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.

John Barefoot  
Signature of Home Owner or Agent

8-5-10  
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. Progress Energy customers must provide Premise Number.

ID # 251908

BUYER(S) John Barefoot + Annie R. Barefoot		PHONE 910-425-6699 910-322-0099	DATE 7/14/10
ADDRESS 118 Darrock Road Lillington, N.C. 27546		SALESPERSON J.A.	
DELIVERY ADDRESS SAME			

MAKE & MODEL 1995 Oakwood	YEAR 1995	BEDROOMS 3	FLOOR SIZE 28x48 L	HITCH SIZE W	STOCK NUMBER
SERIAL NUMBER Vanderbilt repo	COLOR		PROPOSED DELIVERY DATE	KEY NUMBERS	

LOCATION	R-VALUE	THICKNESS	TYPE OF INSULATION	BASE PRICE OF UNIT	\$
CEILING					
EXTERIOR					
FLOORS					
<small>THIS INSULATION INFORMATION WAS FURNISHED BY THE MANUFACTURER AND IS DISCLOSED IN COMPLIANCE WITH THE FEDERAL TRADE COMMISSION RULE 16CFR, SECTION 460.16.</small>				SUB-TOTAL	\$ 13,450.00
				SALES TAX	269.00

**OPTIONAL EQUIPMENT, LABOR AND ACCESSORIES**

- ① Homes are Sold AS-IS/WHERE-IS
- ② No Warranties are implied or given.
- ③ Funds are kept in KS Bank in Kenly, N.C. 27542
- ④ Home must be moved within 30 days after purchase. If not moved we will charge a \$150.00 storage fee.

NON-TAXABLE ITEMS		
VARIOUS FEES AND INSURANCE		
1. CASH PURCHASE PRICE		\$ 13,719.00
TRADE-IN ALLOWANCE	\$	
LESS BAL. DUE on above	\$	
NET ALLOWANCE	\$	
CASH DOWN PAYMENT	\$	
CASH AS AGREED SEE REMARKS	\$	
2. LESS TOTAL CREDITS	\$	
SUB-TOTAL		\$
SALES TAX (If Not Included Above)		
3. Unpaid Balance of Cash Sale Price	\$	0

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 \$ \_\_\_\_\_

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.**

REMARKS:  
 paid in full Bal. 0

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

**NOTE: WARRANTY AND EXCLUSIONS AND LIMITATIONS OF DAMAGES ON THE REVERSE SIDE**

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  DEALER  BUYER

**TRINITY HOME SALES, INC.** DEALER

Signed *X John R. Barefoot* BUYER

Signed \_\_\_\_\_ BUYER

Signed *X Teresa Tedder* Approved

Signed \_\_\_\_\_ BUYER