Application #_

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)

Part I -Owner Information Home Owner Information (To be completed by owner of the manufactured home)
Name Adam Swann Address 216 Buc Rd
City Bradway State NC Zip 27505 Daytime Phone (17) 498 5809
Landowner Information (To be completed by landowner if different than above)
Name CAVIN SWORN Address 384 Bule Rd
City Broodway State NC Zip 27905 Daytime Phone (17) 498 5419
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 Marks Montractors or Homeowner if applicable
Phone 40170 48 T Address 1258 Black Rd City (UMUN) State NC Zip 28326
State Lic# 3441 Email B Electrical Contractor Company Name Apple white Elect -
Phone 842-8248' Address 102 Bowlee NC:
City Bowler State NC Zip
State Lic# 20 440 C' Email
Name of the second
Phone Address
City State Zip
State Lic#SUD Email
D Plumbing Contractor Company Name Chris Dalrymple Plumbing
Phone 919770 1488 Address 53 Frances Louise Ln
City Sanfavo State NC Zip 27332
State Lic# 2894
Part III – Manufactured Home Information
Model Year 2011 Size 54 x 30'4" Complete & follow zoning criteria sheet
Park NameLot Number
I hereby certify that I have the authority to apply for this permit that the application is correct including the contractor information and have obtained their permission to purchase these permits on their behalf and that the construction of installation will conform to the applicable manufactured home set up requirements and the Harnett County Zonin Ordinance. I understand that if any item is incorrect or false information has been provided that this permit could be revoked.
Oden Saran 10-17-11
Signature of Home Owner or Agent Date

List of inspections and Egress requirements available upon request Progress Energy customers must provide Premise Number

^{*}Effective July 1 2004 a County <u>Tax Department Moving Permit</u> 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.

FACTORY EXPO HOME CENTER

115 Titan Roberts Rd , PO Box 1829 • Lillington, NC 27546 • 1-800-504-3238

BUYER 1	Adam Keith Swann					October 3, 2011				1
MAILING ADDRESS	216 Buie Road		Broadway STATE NC		STATE NC	ZIP 27505	9119	PHONE	919	498 5809
DELIVERY ADDRESS	216 Buie Road		CITY Broadway		STATE NC	ZIP 27505	9119	CELL		
DELIVERY COUNTY	Y Harnett W			Vind Zo	od Zone 1 ZONE Therm Zone 2				ne 2	
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FACTORY EXPO HOME CENTER MANAGER REVIEW & ACCEPTANCE

PURCHASE AGREEMENT Printed 10/3/2011 6 58 PM

Jennifer Brock

From:

Connie Johnson <conniembj@aol.com>

Sent:

Wednesday, November 02, 2011 2:08 PM

To:

Jennifer Brock

Can you please remove Chris Dalrymple as my plumber and put Marks Home Set as their license encompasses the plumbing.

Adam K Swann 919/499-5265

Connie Johnsonconniembj@aol.com