

Application # 1250 29987

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: Tammy Mossengill Address: 430 E H Street

City: Spring Lake State: NC Zip: 28390 Daytime Phone: (919) 478-9166

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

Name: _____ 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: State MH Movers

Phone: 919-422-8623 Address: 1085-A Aguilla Road

City: Benson State: NC Zip: 27504

State Lic# 2859 Email: _____

B. **Electrical Contractor** Company Name: Jonathan Beasley

Phone: 910-892-5697 Address: 191 Fred McLeod Lane

City: Coats State: NC Zip: 27521

State Lic# 26739 Email: _____

C. **Mechanical Contractor** Company Name: Mark Shockey

Phone: 919-624-2174 Address: 544 October Drive

City: Willow Springs State: NC Zip: 27592

State Lic# 12730 H3 Email: _____

D. **Plumbing Contractor** Company Name: Priority Plumbing

Phone: 919-639-7200 Address: P.O. Box 254

City: Willow Springs State: NC Zip: 27592

State Lic# 18550 P-1 Email: _____

Part III - Manufactured Home Information

Model Year: 2012 Size: 28 x 70 *Complete & follow zoning criteria sheet*

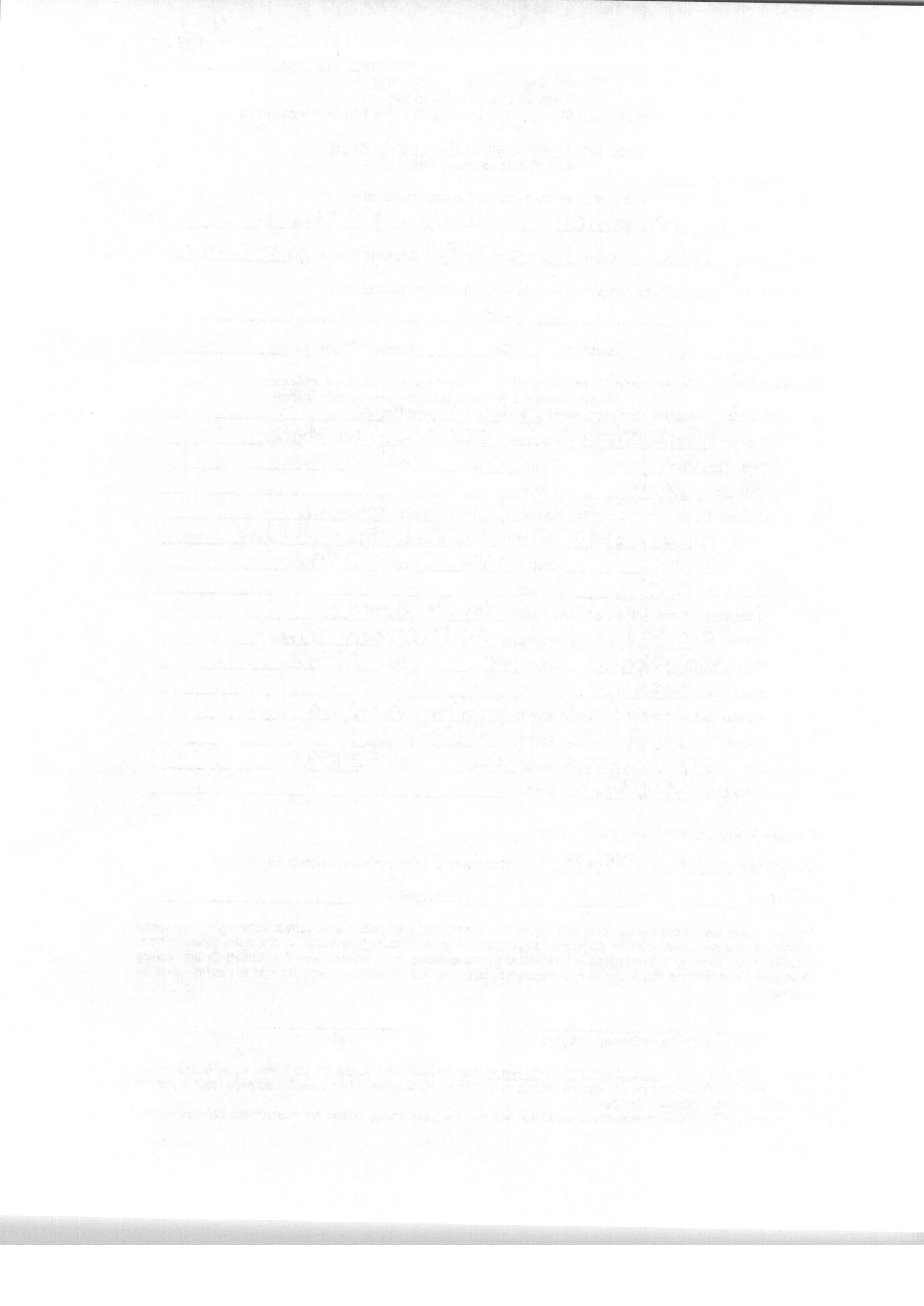
Park Name: _____ Lot Number: _____

I hereby certify that I have the authority to apply for this permit, that the application is correct including the contractor information and have obtained their permission to purchase these permits on their behalf, 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.

Signature of Home Owner or Agent

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.



SALES AGREEMENT

CUSTOMER NO.: _____

DATE: 10/11/12

BUYER(S): Tammy S. Massengill
Cheryl Carlson

SSN: _____

SSN: _____

ADDRESS: 430 1/2 H St. Spring Lake, NC. 28390

DELIVERY ADDRESS: TBD Festus Rd. Coats, NC.

TELEPHONE: 919-478-9166

SALES PERSON: Cathy Long

BASE PRICE:	\$ <u>67,984.⁰⁰</u>
Dealer Prep	\$ <u>N/A</u>
SUB-TOTAL	\$ <u>67,984.⁰⁰</u>
Sales Tax	\$ <u>600.⁰⁰</u>
Title Fees	\$ <u>40.⁰⁰</u>
<u>Options</u>	\$ <u>14,500.⁰⁰</u>
1. CASH PRICE	\$ <u>83,124.⁰⁰</u>
Trade Allowance	\$ _____
Less Amount Owed	\$ _____
Trade Equity	\$ _____
Cash Down Payment	\$ <u>25,500.⁰⁰</u>
Other Payments	\$ _____
2. LESS ALL CREDITS	\$ <u>25,500.⁰⁰</u>
3. REMAINING BALANCE	\$ <u>57,624.⁰⁰</u>

Make: CMH Model: Rocketeer
 Year: 12 Length: 30 Width: 88 Stock #: _____
 Serial No.: RS0 New Used

TRADE: Make: _____ Model: _____
 Year: _____ Length: _____ Width: _____ Title #: _____
 Serial No.: _____
 Amount owed will be paid by: Buyer Seller

Owed to: _____
 OPTIONS: 13 SEER Heat pump, nice home for price
2 sets of wood steps, Plumb Water 100 sewer 20'
White Vinyl Siding.
 SELLER RESPONSIBILITIES: Delivery and set-up per
county code

BUYER RESPONSIBILITIES: Health, zoning all other
permits

***NOTE: Ins. and Closing Cost Added By Bank @ closing**
 May not meet local codes and standards. New homes meet Federal Manufactured Home Standards

Location	R-Value	Thickness	Type of Insulation
Ceiling			
Exterior			<u>Energy Star</u>
Floors			

This insulation information was furnished by the Manufacturer and is disclosed in compliance with the Federal Trade Commission Rule 16CRF, Section 460.16.

ESTIMATED MORTGAGE. Buyer is voluntarily purchasing any insurance products listed below. All numbers are estimated.

A. OTHER CHARGES	
Property Insurance	\$ _____
HBPP Insurance	\$ _____
License Fees	\$ _____
_____	\$ _____
_____	\$ _____
TOTAL	\$ _____
B. Unpaid Bal/Amt Fin. (3+A)	\$ _____
C. Interest Rate % _____	
D. Finance Charge	\$ _____
E. Total of Payments (B+D)	\$ _____
F. Total Sales Price (1+A+D)	\$ _____
G. Number of Payments # _____	
H. Payment Amount	\$ _____

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 THE MONEY THAT I PAID THE DEALER. I UNDERSTAND ANY CHANGE OF THE TERMS OF THE PURCHASE AGREEMENT BY THE DEALER WILL CANCEL THIS AGREEMENT.
 ESTIMATED RATE OF FINANCING: N/A % NUMBER OF YEARS: NULL
 ESTIMATED MONTHLY PAYMENTS \$ N/A

Buyer(s) agree: (1) that the terms and conditions on page two are part of this agreement; (2) to purchase the above home including the options; (3) they received and acknowledge receiving a completed copy of this agreement; (4) that all promises and representations made are listed on this agreement; and (5) there are no other agreements, written or verbal, unless evidenced in writing and signed by the parties.

SELLER: [Signature]
 BUYER:
 X Tammy S. Massengill
 X Cheryl Carlson
 X _____
 X _____

This is not a loan commitment

MEMORANDUM

TO : [Illegible]

FROM : [Illegible]

SUBJECT : [Illegible]

[Illegible text block]

[Illegible text block]

[Illegible text block]

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