

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: Mary R McPherson Address: 88 Robertson Rd
City: Erwin State: NC Zip: 28339 Daytime Phone: 919 273-6496

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

Name: ET Womack Enterprises Inc Address: 3335 NC 87 Hwy S
City: Senferd State: NC Zip: 27332 Daytime Phone: 919 775-3600

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: Raven Rock MH Movers
Phone: 919-775-3600 Address: 3335 NC 87 Hwy S
City: Senferd State: NC Zip: 27332
State Lic# 3400 Email: N/A
- B. **Electrical Contractor** Company Name: Hbt Sholtz
Phone: 919-770-4249 Address: 529 Brinn Dr
City: Senferd State: NC Zip: 27330
State Lic# 17702 Email: _____
- C. **Mechanical Contractor** Company Name: Tin Shop
Phone: 919-708-8340 Address: 3489 Edwards Rd
City: Senferd State: NC Zip: 27330
State Lic# 22513 Email: N/A
- D. **Plumbing Contractor** Company Name: Mary McPherson
Phone: 910-273-6490 Address: 88 Robertson Rd
City: Erwin State: NC Zip: 28339
State Lic# SELF Email: _____

Part III - Manufactured Home Information

Model Year: 2013 Size: 28x60 **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]
Signature of Home Owner or Agent

2-4-13
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.

E. J. WOMACK ENTERPRISES INC.

DBA COUNTRY FAIR HOMES

3335 NC 87 Highway S.
SANFORD, NORTH CAROLINA 27332
(919) 775-3600 • Fax: (919) 775-7533

BUYER(S) Mary R. McPherson	PHONE 910-273-6490	DATE 6 Nov 12
ADDRESS 88 Rochester Rd. Erwin NC 28339	SALESPERSON Barry Cooper	
DELIVERY ADDRESS Bent Tree Ct. Lot # 80 Lillington NC 27546		
MAKE & MODEL Champion	YEAR 2013	BEDROOMS 3
	FLOOR SIZE L60 W28	HITCH SIZE L64 W28
SERIAL NUMBER	COLOR Brown / Blk	PROPOSED DELIVERY DATE
<input checked="" type="checkbox"/> NEW <input type="checkbox"/> USED		KEY NUMBERS

LOCATION	R-VALUE	THICKNESS	TYPE OF INSULATION	BASE PRICE OF UNIT	
CEILING				\$103,100	CO
EXTERIOR					
FLOORS					
				SUB-TOTAL	\$103,100 CO

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

SALES TAX **INC**

OPTIONAL EQUIPMENT, LABOR AND ACCESSORIES		NON-TAXABLE ITEMS	
Setup	\$	VARIOUS FEES AND INSURANCE	NA
Drill		1. CASH PURCHASE PRICE	\$103,100 CO
Heat pump		TRADE-IN ALLOWANCE	\$
Plumbing		LESS BAL. DUE on above	\$
Blockwall		NET ALLOWANCE	\$
Stairs		CASH DOWN PAYMENT	\$
Permits		CASH AS AGREED SEE REMARKS	\$
Food 13.50		2. LESS TOTAL CREDITS	\$
SEPTIC EST		SUB-TOTAL	\$
Permits		SALES TAX (If Not Included Above)	
Rain water Lms		3. Unpaid Balance of Cash Sale Price	\$103,100 CO

(Seller to pay up to 6% of closing cost and prepays)

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.

BALANCE CARRIED TO OPTIONAL EQUIPMENT **\$ INC**

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 <input type="checkbox"/> DEALER <input type="checkbox"/> BUYER		

E. J. WOMACK ENTERPRISES INC.
DBA COUNTRY FAIR HOMES DEALER
Barry Cooper Approved

SIGNED X *Mary R. McPherson* BUYER
SOCIAL SECURITY NO _____
SIGNED X _____ BUYER
SOCIAL SECURITY NO _____