

Application # 14-50634095

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: Melissa Stephenson Address: 2063 Chalybeate Springs
City: Fuquay Varina State: NC Zip: 27526 Daytime Phone: (919) 621-0913

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

Name: Melissa Stephenson Address: 2063 Chalybeate Springs
City: Fuquay Varina State: NC Zip: 27526 Daytime Phone: (919) 621-0913

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 Mobile Home Movers
Phone: 919-422-8623 Address: 1085 Aquilla Rd.
City: Benson State: NC Zip: 27504
State Lic# 2859 Email: _____
- B. **Electrical Contractor** Company Name: Service Solutions
Phone: 910-635-9363 Address: 5798 McDonald Rd.
City: Paukton State: NC Zip: 28371
State Lic# 20934 Email: _____
- C. **Mechanical Contractor** Company Name: Swaim Electric
Phone: 336-685-9722 Address: 3702 New Salem Rd.
City: Climax State: NC Zip: 27233
State Lic# 13074-113 Email: _____
- D. **Plumbing Contractor** Company Name: Priority Plumbing
Phone: 919-422-4935 Address: P.O. Box 264
City: Willow Springs State: NC Zip: 27592
State Lic# 18550-P-1 Email: _____

Part III - Manufactured Home Information

Model Year: 2011 Size: 28 X 52 **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.*

1099368

DATE: 5-28-14

SALES AGREEMENT

BUYER(S): MELISSA STEPHENSON

ADDRESS: 2063 CHALYBEATE SPRINGS FUQUAY-VARINA NC 27526

DELIVERY ADDRESS: 2063 CHALYBEATE SPRINGS FUQUAY-VARINA NC 27526

TELEPHONE: (919) 621-0913

SALES PERSON FULL NAME: Robert Rice

BASE PRICE: \$77,766.11
State Tax \$3,693.89
Local Tax \$0.00

Make: ROCKWELL MS Model: ROCKETEER 3
Year N/A 2014 Length N/A 52' Width N/A 28' Stock# RSO
Serial No. RSO [X] New [] Used

1. CASH PRICE \$81,460.00

TRADE: Make: N/A Model: N/A
Year N/A Length N/A Width N/A Title #
Serial No.

Amount owed will be paid by: [X] Buyer [] Seller
Owed to:

TITLE FEES \$40.00

OPTIONS:

SELLER RESPONSIBILITIES:

Home delivered and set up, trim out, heat pump installed, electrical and plumbing connections to home, water tap fee, septic installed, building permit, perimeter footers, and brick skirting (2) 4x9 wooden stoops - steps

BUYER RESPONSIBILITIES:

Stops to code front and rear (2) MS
OBTAIN Septic Permits (4) MS

2. TOTAL PACKAGE PRICE \$81,500.00

May not meet local codes and standards. New homes meet Federal Manufactured Home Standards.

Trade Allowance N/A
Less Amount Owed N/A
Trade Equity N/A
Cash Down Payment \$10,000.00

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 TO THE TERMS OF THE PURCHASE AGREEMENT BY THE DEALER WILL CANCEL THIS AGREEMENT.
ESTIMATED RATE OF FINANCING N/A% NUMBER OF YEARS N/A
ESTIMATED MONTHLY PAYMENTS N/A

3. LESS ALL CREDITS \$10,000.00

5/28/14 MS
(2) Due upon Delivery of Home to Site
4. REMAINING BALANCE \$71,500.00

Table with 4 columns: Location, Type of Insulation, Thickness, R-Value. Rows include Floors, Exterior, and Ceilings.

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.

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

SELLER:

CMH Homes, Inc. d/b/a -

[Signature]
CLAYTON HOMES SANFORD, NC
1921 KELLER ANDREWS RD
SANFORD NC 27330

BUYER:

[Signature] MELISSA STEPHENSON
Signature of: MELISSA STEPHENSON
[]
Signature of:
[]
Signature of:
[]
Signature of:



HARNETT COUNTY CENTRAL PERMITTING
P.O. BOX 65
LILLINGTON, NC 27546
For Inspections Call: (910) 893-7525 Fax: (910) 893-2793
Bldg Insp scheduled before 2pm available next business day.

Application Number 14-50034095 Date 7/18/14
Property Address 91045 *UNASSIGNED
PARCEL NUMBER 04-0674- - -0108- -01-
Application type description CP MANUFACTURED HOME RA20R/RA20M CRITERI
Subdivision Name FANNIE JORDAN DIVISION
Property Zoning RES/AGRI DIST - RA-20M

Owner	Contractor
-----	-----
STEPHENSON MELISSA A 2063 CHALYBEATE SPRINGS RD FUQUAY VARINA NC 27526	STATE MOBILE HOME MOVERS 1085 A AQUILLA RD BENSON NC 27504 (910) 894-8038

Applicant

STEPHENSON MELISSA

--- Structure Information 000 000 28X52, 3 BDRMS, DW
Flood Zone FLOOD ZONE X
Other struct info # BEDROOMS 3.00
MOBILE HOME YEAR 2014.00
PROPOSED USE DWMH
SEPTIC - EXISTING? NEW
WATER SUPPLY COUNTY

Permit	MANUFACTURED HOME PERMIT	
Additional desc . .		
Phone Access Code .	1045632	
Issue Date	7/18/14	Valuation
Expiration Date . .	7/18/15	0

Permit	LAND USE PERMIT	
Additional desc . .		
Phone Access Code .	1045616	
Issue Date	7/18/14	Valuation
Expiration Date . .	1/14/15	0

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Application description	CP MANUFACTURED HOME RA20R/RA20M CRITERI		
Subdivision Name	FANNIE JORDAN DIVISION		
Property Zoning	RES/AGRI DIST - RA-20M		

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
Permit type MANUFACTURED HOME PERMIT					
10	501	T501	R*MOBILE HOME FOUND./ M. WALL	_____	___/___/___
10	307	P307	R*PLUMB WATER CONNECTION	_____	___/___/___
20	818	Z818	PZ*ZONING INSPECTION	_____	___/___/___
20	814	A814	ADDRESS CONFIRMATION	_____	___/___/___
30	507	T507	R*MANUFACTURED HOME FINAL	_____	___/___/___
999		H824	ENVIR. OPERATIONS PERMIT	_____	___/___/___
999		H828	ENVIRO. WELL PERMIT	_____	___/___/___
Permit type LAND USE PERMIT					
999	818	Z818	PZ*ZONING INSPECTION	_____	___/___/___
999	820	Z820	PZ*ZONING/FINAL INSPECTION	_____	___/___/___