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)

11	Owner Information: Owner Information (To be complete	ed by owner of the manufactured home)
Name:	Lisa smith - Lindley	Address: 648 Nicole Dr
کِـ City:	Sand For d State:	NC Zip: 2フラウン Daytime Phone: ( )
Landov	ner Information (To be completed	d by landowner, if different than above)
Name:		Address:
City:	State:	Zip: Daytime Phone: ( )
Part II	- Contractor Information (To be on Name, a	completed by Contractors or Homeowner, if applicable. address, & phone must match information on license)
A.	Set-Up Contractor Company Na	ame: Pougle's Mobile Home movers
	Phone: 910 740 - 2020	Address: 4 related De
	City: Lunberton	State: N.C Zip: 28358
	State Lic# 3 [60]	_ Email: Dougichochlear, grail
B.	Electrical Contractor Company	y Name: Joen Hardin Electic
	Phone: 910-746-6694	Address: 2352 Tobacca Od
	City: Tairmont	State: _ X C _ Zip:
	State Lic# 19 728 L	_ Email:
C.	Mechanical Contractor Compa	any Name: Spells Mechanical
	Phone: 910-525-5976	Address: 125 west Binson me
	City: Autogrille	State: Zip:
	State Lic# 10 5 7 4	_ Email:
D.	Plumbing Contractor Compan	y Name: Dobby Mancos plumbing
	Phone:	Address: 630 Monree nd
	City: Saint pauls	State: _ <i>NC</i> Zip:
	State Lic#_ 22007	Email:
Part l	II – Manufactured Home Informa	ation
Mode	Year: <u>2017</u>	
Park l	Name:	Lot Number:
I here inform install: Ordina revoke	by certify that I have the authority to lation and have obtained their permis ation will conform to the applicable ance. I understand that if any item led.	o apply for this permit, that the application is correct including the contracto ssion to purchase these permits on their behalf, and that the construction o manufactured home set-up requirements, and the Harnett County Zoning is incorrect or false information has been provided that this permit could be
57	Signature of Home Owner or A	2-2-17 Date
<u>/</u>	Signature of Home Owner or A	Agent Date

\*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.

## SALES AGREEMENT

CMH Homes, Inc.
PO Box 9790

CUSTOMER No.: 3389829	<del></del>		Maryville, TN 37802
DATE: 1-16-17			
BUYER(S): Lisa Smith-Lindley	<u> </u>	SSN:	
Marcelino Smith-Lind	<u> </u>	SSN:	
ADDRESS: 1668 Nicole Drive	Sanford, NC 27332		<u> </u>
DELIVERY ADDRESS: 668 Nicole Div	e Sanford NC 2733	2	
TELEPHONE: 404-200-7956	HOME CONSULTANT:	Brett Milligan	
BASE PRICE:\$	34027." Make: Ck	ayton Model:_	Breeze I
Commontation	Year: 2bl*1	Length: 76 Width: 28	Stock #:
SALES TAX:\$	1999. Serial #: <u>C</u>	0H CO 26308 NL AB	UNew 🔲 Used
	Trade: Ma	ke: NA Model:_	·····
\$		Length: Width:	
\$	Serial #:		
1. CASH PRICE:	86,006. Amount or	wed will be paid by:	☐ Buyer ☐ Seller
Trade Allowance:\$	Owed to:_		
Less Amount Owed:\$	OPTIONS:_	Demo of current home li	ot preps trian
Trade Equity:\$	not joci	he of home, 4 ton splits	ishem heat pump
Cash Down Payment:\$			
Other Payments:\$			
3 I rec At Christie	SELLER RE	SPONSIBILITIES: deliver & Se	t to average 34" heart
3. REMAINING BALANCE:	5,926,000 electric a	and plumbing connections to	existing Sources
ESTIMATED MORTGAGE. Buyer is voluntarily pu	chasing any	x In code on lear dox -	8x8 word deck will _
insurance products listed below. All numbers a	re estimated.	fruit door ving 1 stime	op moretwe barrier,
A. Other Charges:\$		SPONSIBILITIES: provide &	gry access to property,
Property Insurance: \$\$	health :	zoning permits provide	te home owners
Credit Life Insurance:\$		e prior to delivery of t	
HBPP:\$			
Title Fees:\$	May not n	neet local codes and standards	s. New homes meet
License Fees:\$	reaeral N	lanufacturéd Home standards	
License Fees:\$	■ II Buver(s	s) agree: (1) that the terms and	d conditions on page two
S	are par	t of this agreement; (2) to pung the options; (3) they rec	eived and acknowledge
	receivin	ng a completed copy of this	agreement; (4) that all
TOTAL:\$		es and representations ma ent; and (5) there are no other	de are listed on this
	I II	unless evidenced in writing a	nd signed by the parties.
B. Unpaid Bal./Amt. Financed (3+A):\$ C. Interest Rate:%_			
	7-7/1/	HH SY	isa USmith UNI
D. Finance Charge:		- Of	(lignature)
E. Total of Payments (B+D):		<u>/</u> x <u>'</u>	ara has the John Jo
F. Total Sales Price (1+A+D):\$_		*>	(signature)
G. Number of Payments:		X	(signature)
H. Payment Amount:		X	
This is not a loan commitme	n.		(signature)

For Inspections Call: (910) 893-7525 Tax. Bldg Insp scheduled before 2pm available next business day.  Application Number 17-50040559 Date 1/20/17  Application Number
Owner  LINDLEY MARCELINO  668 NICOLE DRIVE SANFORD  Applicant LINDLEY LISA SMITH 668 NICOLE DR
LINDLEY MARCELINO OWNER  668 NICOLE DRIVE SANFORD NC 27332  Applicant LINDLEY LISA SMITH 668 NICOLE DR
LINDLEY MARCELINO  668 NICOLE DRIVE SANFORD  Applicant LINDLEY LISA SMITH 668 NICOLE DR
LINDLEY LISA SMITH 668 NICOLE DR
668 NICOLE DR
(404) 200-7956 (404) 200-7956 Representation 000 000 28X76 4 BR RAMP/PORCH ON FRONT STEPS BCK
Flood Zone
Permit RESIDENTIAL BUILDING PERMIT
Additional desc
Permit MANUFACTURED HOME PERMIT  Additional desc  Phone Access Code . 1174986  1/20/17 Valuation 0
Issue Date 1/20/17 Valuation
Permit LAND USE PERMIT Additional desc
Phone Access Code . 1175009  Issue Date 1/20/17  Expiration Date 7/19/17
Special Notes and Comments T/S: 01/13/2017 03:11 PM DJOHNSON

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.						
Appli Prope PARCE Appli Subdi	cation rty Ad L NUMB cation vision	Numbe dress ER descr	r 17-50040559 668 NICOLE DR 03-9587-020020- iption CP MANUFACTURED HOM PENDING	Page Date 51- ME RA20R/RA2	3 1/20/17 OM CRITERI	
Required Inspections						
Seq		Insp Code		Initials	Date	
Permit type RESIDENTIAL BUILDING PERMIT						
999 999 999 999	101 229	B103 B101 R229 R225	R*BLDG FOUND & TEMP SVC POLE R*BLDG FOOTING / TEMP SVC POLE TWO TRADE FINAL TWO TRADE ROUGH IN		_/_/_ _/_/_ _/_/_	
Permit	type		. MANUFACTURED HOME PERMIT			
10 20 20 30	818	Z818 A814	R*MOBILE HOME FOUND./ M. WALL PZ*ZONING INSPECTION ADDRESS CONFIRMATION R*MANUFACTURED HOME FINAL		_/_/_ _/_/_	
Permit	type		. LAND USE PERMIT			
999	818	Z818	PZ*ZONING INSPECTION		/ /	

HARNETT COUNTY CENTRAL PERMITTING

HARNETT COUNTY CENTRAL PERMITTING P.O. BOX 65 LILLINGTON, NC 27546 For Inspections Call: (910) 893-7525 Fax: (910) Bldg Insp scheduled before 2pm available next but	893-2793 siness day	7.
Application Number 17-50040559	Page Date	2 1/20/17
Special Notes and Comments OVERVIEW ESTATES PHS 6 LOT 78		

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