

Application # 1850043019

**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: Timothy Ryan Address: 691 Eisler Drive  
City: Lillington State: NC Zip: 27546 Daytime Phone: (910) 709-4543

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 Aquilla Road  
City: Beason State: NC Zip: 27504  
State Lic# 2859 Email: \_\_\_\_\_
- B. **Electrical Contractor** Company Name: Mabry Electric Service Inc.  
Phone: 919-639-4837 Address: 731 Mabry Road  
City: Angier State: NC Zip: 27501  
State Lic# 150976 Email: \_\_\_\_\_
- C. **Mechanical Contractor** Company Name: Spell Mechanical  
Phone: 910-525-5976 Address: P.O. Box 254  
City: Autryville State: NC Zip: 28318  
State Lic# 10574 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: 2016 Size: 28 X 76 **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.

Charles E. Pugh  
Signature of Home Owner or Agent

1-22-18  
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.

1262057

# SALES AGREEMENT

DATE: 12/1/17  
BUYER(S): Timothy R Ryan

ADDRESS: 691 EISLER DR LILLINGTON NC 27546

DELIVERY ADDRESS: 691 EISLER DR LILLINGTON NC 27546

TELEPHONE: (910) 709-4543 SALES PERSON FULL NAME: Ronnie Edwards

**BASE PRICE:** \$90,343.80

State Tax: \$2,145.67

Local Tax: \$ .00

**1. CASH PRICE** \$92,489.47

**TITLE FEES** \$52.00

**2. TOTAL PACKAGE PRICE** \$92,541.47

Trade Allowance N/A

Less Amount Owed N/A

Trade Equity N/A

Cash Down Payment \$92,541.47

**3. LESS ALL CREDITS** \$92,541.47

**4. REMAINING BALANCE** \$ .00

Location	Type of Insulation	Thickness	R-Value
Floors	Fiberglass	7.00	R22
Exterior	Fiberglass	3.50	R11
Ceilings	Blown fiberglass	8.80	R33

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

Make: CMH OXFORD 929 Model: THE BREEZE II  
Year: N/A Length: N/A Width: N/A Stock#: OX5326  
Serial No.: OHC025326NCAB New  Used

**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:  Buyer  Seller  
Owed to: \_\_\_\_\_

**OPTIONS:** 14 seer heat pump installed, 2 sets of wood steps installed, Wire home for power box, Plumb water up to 75ft., Plumb sewer line up to 20 ft., Pier and prem. footers and brick skirting wall. Note All Furniture and decor items as seen in home.

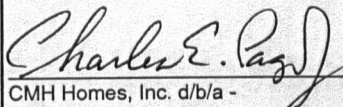
**SELLER RESPONSIBILITIES:** Delivery and set up per county code. All contractors permits.

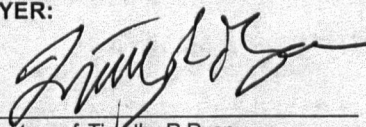
**BUYER RESPONSIBILITIES:** Zoning and Health Permit, Access to land to place home must be cleared for delivery and set up. Customer to provide water and sewer to hook up to. Removal of existing home.

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

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

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) that they acknowledge receiving a completed copy of this agreement; (4) that all promises and representations made are listed on this agreement; and (5) that there are no other agreements, written or verbal, unless evidenced in writing and signed by the parties.

**SELLER:**  
  
CMH Homes, Inc. d/b/a -

**BUYER:**  
  
Signature of: Timothy R Ryan

CLAYTON HOMES DUNN, NC  
2001 W CUMBERLAND ST  
DUNN NC 28334

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 . . . . .	18-50043019	Page	3
Property Address . . . . .	691 EISLER DR	Date	1/22/18
PARCEL NUMBER . . . . .	03-9597- - -0157- -66-		
Application description . . . . .	CP MANUFACTURED HOME RA20R/RA20M CRITERI		
Subdivision Name . . . . .			
Property Zoning . . . . .	RES/AGRI DIST - RA-20R		

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	814	A814	ADDRESS CONFIRMATION	_____	___/___/___
20	818	Z818	PZ*ZONING INSPECTION	_____	___/___/___
30	507	T507	R*MANUFACTURED HOME FINAL	_____	___/___/___
999		H824	ENVIR. OPERATIONS PERMIT	_____	___/___/___
999		H828	ENVIRO. WELL PERMIT	_____	___/___/___
999	307	P307	R*PLUMB WATER CONNECTION	_____	___/___/___
Permit type . . . . . LAND USE PERMIT					
999	818	Z818	PZ*ZONING INSPECTION	_____	___/___/___
999	820	Z820	PZ*ZONING/FINAL INSPECTION	_____	___/___/___

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Application Number . . . . . 18-50043019 Date 1/22/18  
Property Address . . . . . 691 EISLER DR  
PARCEL NUMBER . . . . . 03-9597- - -0157- -66-  
Application type description CP MANUFACTURED HOME RA20R/RA20M CRITERI  
Subdivision Name . . . . .  
Property Zoning . . . . . RES/AGRI DIST - RA-20R

Owner

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RYAN TIMOTHY R & ANGELA W  
691 EISLER DRIVE  
LILLINGTON NC 27546

Contractor

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STATE MOBILE HOME MOVERS  
1085 A AQUILLA RD  
BENSON NC 27504  
(910) 894-8038

Applicant

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RYAN TIMOTHY & ANGELA  
691 EISLER DR  
LILLINGTON NC 27546  
(910) 709-4543

--- Structure Information 000 000 27X76 DWMH 3BDR  
Flood Zone . . . . . FLOOD ZONE X  
Other struct info . . . . . # BATHS 2  
# BEDROOMS 4.00  
MOBILE HOME YEAR 2017.00  
PROPOSED USE SFD  
SEPTIC - EXISTING? EXIST  
WATER SUPPLY COUNTY

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Permit . . . . . MANUFACTURED HOME PERMIT

Additional desc . . .  
Phone Access Code . . 1225572  
Issue Date . . . . . 1/22/18 Valuation . . . . . 0  
Expiration Date . . . 1/22/19

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Permit . . . . . LAND USE PERMIT

Additional desc . . .  
Phone Access Code . . 1225556  
Issue Date . . . . . 1/22/18 Valuation . . . . . 0  
Expiration Date . . . 7/21/18

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Special Notes and Comments

T/S: 01/02/2018 11:13 AM LLUCAS ----  
691 EISLER DR  
GO DOWN 27 W TO DOCS RD - TURN LEFT  
ONTO DOCS RD - GO DOWN 2 MILES TURN  
RIGHT ONTO MICRO TOWER RD - GO 1 MILE

-----  
\_\_\_\_\_  
\_\_\_\_\_



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Page 2  
Date 1/22/18  
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Special Notes and Comments  
ON RIGHT TO EISLER DR - HOUSE IS 691

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\_\_\_\_\_  
\_\_\_\_\_

## HARNETT COUNTY CASH RECEIPTS

\*\*\* CUSTOMER RECEIPT \*\*\*

Oper: LLUCAS                    Type: CP    Drawer: 1  
Date: 1/22/18 53                Receipt no: 226098

Year	Number	Amount
2018	50043019	
691 EISLER DR		
LILLINGTON, NC 27546		
B1	BP - PERMIT FEES	
		\$225.00

CMH HOMES, INC.

Tender detail		
CK CHECK PAYMEN	4959349	\$225.00
Total tendered		\$225.00
Total payment		\$225.00

Trans date: 1/22/18                Time: 14:20:45

\*\* THANK YOU FOR YOUR PAYMENT \*\*