

Application # 1850043690

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: Joshua Barrus Address: 80 Turner Bailey Lane

City: Lillington State: NC Zip: 27546 Daytime Phone: (919) 586-1495

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: Mabry Electric Service Inc.

Phone: 919-639-4831 Address: 731 Mabry Road

City: Angier State: NC Zip: 27501

State Lic# 15077U Email: _____

C. **Mechanical Contractor** Company Name: Spell Mechanical

Phone: 910-525-5976 Address: P.O. BDX 93

City: Autryville State: NC Zip: 28318

State Lic# 10574 Email: _____

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

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

City: Willow Springs State: NC Zip: 27592

State Lic# 18550A1 Email: _____

Part III – Manufactured Home Information

Model Year: 2018 Size: 28 X 56 **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 P. [Signature]
Signature of Home Owner or Agent

6/18/18
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.

1285045

SALES AGREEMENT

DATE: 06/06/2018
BUYER(S): Joshua David Barrus
Stacy Lynn Marsh-barrus

ADDRESS: 6600 LUNETTE CT HOLLY SPRINGS NC 27540

DELIVERY ADDRESS: 80 TURNER BAILEY LN LILLINGTON NC 27546

TELEPHONE: _____ SALES PERSON FULL NAME: Catherine Long

BASE PRICE: \$78,687.70
State Tax: \$1,868.84
Local Tax: \$0.00

Make: CMH Model: 36TRU28563RH18
Year: N/A Length: N/A Width: N/A Stock#: WH4910
Serial No.: CWP034910TNAB New Used

1. CASH PRICE \$80,556.54
LAND PURCHASE \$24,250.00
FILING FEES \$116.00

TRADE: Make: N/A Model: N/A
Year: 2018 Length: 56 Width: 28 Title #: _____
Serial No.: _____

Amount owed will be paid by: Buyer Seller
Owed to: _____

2. TOTAL PACKAGE PRICE \$104,922.54
Trade Allowance N/A
Less Amount Owed N/A
Trade Equity N/A
Cash Down Payment \$10,000.00

OPTIONS: 14 seer heat pump installed, 2 sets of wood steps, wire panel box to home, plumb water yo to 50ft., plumb sewer up to 20ft., install septic tank up to 3800 allowance, white vinyl skirting installed.

SELLER RESPONSIBILITIES: Delivery and set per county code, contractor permits.

3. LESS ALL CREDITS \$10,000.00
4. REMAINING BALANCE \$94,922.54

BUYER RESPONSIBILITIES: Health and Zoning permit

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

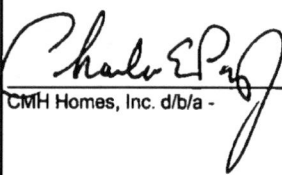
I UNDERSTAND THAT I HAVE THE RIGHT TO CANCEL THIS PURCHASE BEFORE MIDNIGHT OF THE THIRD BUSINESS DAY AFTER THE DATE THAT I HAVE SIGNED THIS AGREEMENT. I UNDERSTAND THAT THIS CANCELLATION MUST BE IN WRITING. IF I CANCEL THE PURCHASE AFTER THE THREE-DAY PERIOD, I UNDERSTAND THAT THE DEALER MAY NOT HAVE 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 9.99% NUMBER OF YEARS 23 ESTIMATED MONTHLY PAYMENTS \$929.34

Location	Type of Insulation	Thickness	R-Value
Floors	Fibergalss	7.00	R22
Exterior	Fiberglass	3.50	R11
Ceilings	Blown Cellulose	8.00	R30

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.

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 -

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

BUYER:


Signature of: Joshua David Barrus


Signature of: Stacy Lynn Marsh-barrus

Signature of: _____

Signature of: _____



Application Number 18-50043690
Property Address 52741 *UNASSIGNED
PARCEL NUMBER 10-0558- - -0129- - -
Application description CP MANUFACTURED HOME RA20R/RA20M CRITERI
Subdivision Name MCKINLEY BAILEY
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	_____	__/__/__

HARNETT COUNTY CENTRAL PERMITTING
P.O. BOX 65
LILLINGTON, NC 27546
For Inspections Call: (910) 893-7525 Fax: (910) 893-2793

Application Number 18-50043690 Date 6/18/18
Property Address 52741 *UNASSIGNED
PARCEL NUMBER 10-0558- - -0129- - -
Application type description CP MANUFACTURED HOME RA20R/RA20M CRITERI
Subdivision Name MCKINLEY BAILEY
Property Zoning RES/AGRI DIST - RA-20R

Owner	Contractor
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CONAWAY JAMES	STATE MOBILE HOME MOVERS
PO BOX 248	1085 A AQUILLA RD
NEW BERN NC 28563	BENSON NC 27504
	(910) 894-8038

Applicant

BARRUS STACY
6600 LANETTE CT
HOLLY SPRINGS NC 27540
(919) 868-0052

--- Structure Information 000 000 28X56 DWMH 3BDR 2BTH FUTURE DECK
Flood Zone FLOOD ZONE X
Other struct info # BATHS 2
BEDROOMS 3.00
MOBILE HOME YEAR 2017.00
PROPOSED USE SFD
SEPTIC - EXISTING? NEW SEPTIC
WATER SUPPLY COUNTY

Permit	MANUFACTURED HOME PERMIT		
Additional desc . .			
Phone Access Code .	1247808		
Issue Date	6/18/18	Valuation	0
Expiration Date . .	6/18/19		

Permit	LAND USE PERMIT		
Additional desc . .			
Phone Access Code .	1247790		
Issue Date	6/18/18	Valuation	0
Expiration Date . .	12/15/18		

Special Notes and Comments
T/S: 03/29/2018 03:47 PM LLUCAS ----
TAKE 401 S - STAY RIGHT ON 210 SOUTH -
GO 1.5 MILES - TURN LEFT ON JOEL
JOHNSON RD - GO 1 MILE AND PROPERTY IS
ON THE RIGHT - NEXT TO 978 JOEL JOHNSON

HARNETT COUNTY CASH RECEIPTS

*** CUSTOMER RECEIPT ***

Oper: LLUCAS Type: CP Drawer: 1
Date: 6/18/18 53 Receipt no: 396693

Year	Number	Amount
2018	50043690	
52741	*UNASSIGNED	
	LILLINGTON, NC 27546	
B1	BP - PERMIT FEES	\$225.00
	DOUBLEWIDE PERMIT	

CHARLES PAGE, JR.

Tender detail		
CK CHECK PAYMEN	7493	\$225.00
Total tendered		\$225.00
Total payment		\$225.00

Trans date: 6/18/18 Time: 14:57:44

** THANK YOU FOR YOUR PAYMENT **