7-27-11

Application # 1150026980

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)

	Owner Information: Owner Information (To be completed by owner of the manufactured home)
Name	Jeanne D Ellis Address: 226 Thomas Dickens Ro
City: <u>\</u>	State: NC Zip: 27546 Daytime Phone: 919
Landov	vner Information (To be completed by landowner, if different than above)
Name:	Same 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: Roven Kock MH Hover S
	Phone: 019-775-3600 Address: 3335 NC 87 Hwy 27332
	City: Sancord State: NC Zip: 27540
	Setup Signature: Bobles Juggo State Lic# 3400
B.	Electrical Contractor Company Name: 130 bby 50cr pe
	Phone. 919-499-333 & Address: 535 Shorpe Rd
	City: SanGer Ol State: NC Zip: 27332
	Electrician's Signature: Barbayahange State Lic# 232 (2)-C
C.	Mechanical Contractor Company Name: Tim Shap
	Phone: 919-499-1757 Address: 3489 Edwards Rd
	City: Scheer d State: NC Zip: 27330
_	HVAC Signature: State Lic# 22513
D.	Plumbing Contractor Company Name: Jeonne D. Ellis
	Phone: Address: 22 4 Thomas Dickens Rd
	City: Sencord State: NC Zip: 27544 Plumber's Signature: Very Ville State Lic# Self
	Plumber's Signature: State Lic# Self
Part III	- Manufactured Home Information
Model '	Year: 2011 Size: 32 X Complete & follow zoning criteria sheet
Park N	ame: Private tot Lot Number:
informati set-up	certify that I have the authority to apply for this permit, that the application is correct including the contractor ion and signatures, and that the construction or installation will conform to the applicable manufactured home equirements, and the Harnett County Zoning Ordinance. I understand that if any item is incorrect or false ion has been provided that this permit could be revoked.
-	Signature of Home Owner or Agent Date

List of inspections and Egress requirements available upon request. Progress Energy customers must provide Premise Number.

^{*}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.

COUNTRY FAIR HOMES

P. O. Box 1328 LILLINGTON, NORTH CAROLINA 27546 910/893-5222

DELIVERY ADDRESS MAKE & MODEL OFFICIAL COMPANY SERIAL NUMBER OFFICIAL COMPANY NEW	cxens f	YEAR BD. ROOMS FLOOR S	SALESPERSON E	L MOU	100
DELIVERY ADDRESS MAKE & MODEL SERIAL NUMBER PECIAL COMPANY TANEW	53 2	20	E_	T Won	1al
DELIVERY ADDRESS MAKE & MODEL OFFICIAL ORDER SERIAL NUMBER PECIAL ORDER TIMEW	53 2	YEAR BD. ROOMS FLOORS	DIZE HITCH SIZ		
SERIAL BUMBER SPECIAL COOLEY TONEW	53 2	YEAR BD. ROOMS FLOORS	DITCH SIZ		
SERIAL BUMBER SPECIAL COOLEY TONEW	53 2	11 2 11	DIZE THIOTISIZ	E STOCK NUMBE	R
Special crolly WNEW	1 00108		37 3 DW	60	
Special crolly WNEW	CULUR	PROP	OSED DELIVERY DATE	KEY NUMBERS	
LOCATION R-VALUE THICKNESS TYPE	□ USED				
	LOCATION R-VALUE THICKNESS TYPE OF INSULATION			511400	00
CEILING	OPTIONAL EQUIPMENT				
EXTERIOR					
FLOORS			SUB-TOTAL	\$	
THIS INSULATION INFORMATION WAS FURNISHED BY THE MAI	NUFACTURER AND				
IS DISCLOSED IN COMPLIANCE WITH THE FEDERAL TRADE CO		SALES TAX		600	8
16CRF, SECTION 460.16.					-
OPTIONAL EQUIPMENT, LABOR AND ACCE	SSORIES /////////	NON-TAXABLE ITEMS			
	\$	VARIOUS FEES AND INSURANCE		00001-	60
- House to be deliver +		1. CASH PURCHASE PRICE	Te 1	\$72000	111111
set-00		TRADE-IN ALLOWANCE LESS BAL, DUE on above	\$		
11-1		NETALLOWANCE	\$	-{/////////////////////////////////////	
- Heatpump Install		CASH DOWN PAYMENT	\$		
Clarkin I IV V 10		CASH AS AGREED SEE REMARK		~/////////////////////////////////////	
- Electrical Hook up		2. LESS TOTAL CREDITS		\$72000	(3)
3/005			SUB-TOTAL	\$	
- 3-643		SALES TAX (If Not Included Ab	SALES TAX (If Not Included Above) 3. Unpaid Balance of Cash Sale Price \$		T
- OKWINA		3. Unpaid Balance of Cas			
91311119		BUYER UNDERSTAND			Asset Street,
		THIRD BUSINESS DAY AFTER THE DATE THAT BUYER HAS SIGNED THIS AGREEMENT. BUYER UNDERSTANDS THAT THIS CANCELLATION MUST BE IN WRITING. IF BUYER CANCELS THE PURCHASE AFTER THE THREE DAY PERIOD, BUYER UNDERSTANDS THAT THE DEALER MAY NOT HAVE ANY OBLIGATION TO GIVE BUYER BACK ALL OF THE MONEY THAT BUYER PAID THE DEALER.			
		ESTIMATED RATE O	F FINANCING _		%
		NUMBER OF YEARS			
				0.015 (13)	
		ESTIMATED MONTH	LY PAYMENTS:)	
BALANCE CARRIED TO OPTIONAL EQUIPMENT NOTE: WARRANTY AND EXCLUSIONS AND LIMITATIONS OF DAMAGE DESCRIPTION OF TRADE-IN MAKE MODEL BEDROOMS	\$ S ON THE REVERSE SIDE	agreed to as a part of above the signature	n the other side this agreement, es. Buyer is pu	of this contra- the same as if p rchasing the a	ct are printed above
TITLE NO. SERIAL NO. COLOR	described trailer, manufactured home or vehicle; the optional equipment and accessories, the insurance as described has				
AMOUNT OWING TO WHOM		been voluntary; that E	Buyer's trade-in i	s free from all o	laims
ANY DEBT BUYER OWES ON TRADE-IN IS TO BE PAID BY	DEALER BUYER				65
THIS AGREEMENT CONTAINS THE ENTIRE UNDERSTANDING BETWEEN DEALER AND BUYER ABUYER(S) ACKNOWLEDGES RECEIPT OF A COPY OF THIS C	AND NO OTHER REPRESENTATION (DRIDER AND THAT BUYER	OR INDUCEMENT, VERBAL OR WRITTEN, HIS HAS READ AND UNDERST	HAS BEEN MADE WHICH IS FAND THE BACK OF	NOT CONTAINED IN THIS CO THIS AGREEMENT.	INTRACT.
COUNTRY FAIR HOMES	DEALER SIG	ENED X Panni	THIN		_ BUYER
Not Valid Unless Signed and Accepted by an Officer of the Company or an Authorize	CIAL SECURITY NO.	10	1		
5010	SNED X	and a second second like a second		BUYER	
By Approved	so	GIAL SECURITY NO.		1	37 4 H
FORM SOONC IS	ORIG	A DI AIN I ANG	GUAGE PURCHASE	AGREEMENT Rev 11	/99