

Sept Tank
Preclear Sept 919-639-8929

Application # 12 50028411

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 Christina Williams Address 184 Roden Lane Lillington
City Lillington State NC Zip 27546 Daytime Phone 910 893 5366

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

Name Dorothy Williams Address 55 Gary Williams Lane
City Lillington State NC Zip 27546 Daytime Phone 910 890 8027

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 Raven Rock Molding Movers
Phone 910-591-8642 Address 3335 NC 87 Hwy Sanford
City Sanford State NC Zip 27332
State Lic# 3400 Email _____

B **Electrical Contractor** Company Name PATRICK ELECT CO INC
Phone 910 232 1594 Address 1259 N MAIN ST LILLINGTON
City LILLINGTON State NC Zip 27546
State Lic# 49100 Email Patrick Patrick

C **Mechanical Contractor** Company Name _____
Phone _____ Address _____
City _____ State _____ Zip _____
State Lic# _____ Email _____

D **Plumbing Contractor** Company Name Struport Flush
Phone 910-893-2642 Address 973 Mitch Road Lillington
City Lillington State NC Zip 27546
State Lic# 23655 Email Jason M. Iis

919-777-4379
ES Womack

Part III - Manufactured Home Information

Model Year 1989 Size 28 x 44 **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

Christina Williams
Signature of Home Owner or Agent

3-1-2012
Date

Effective July 1 2004 a County Tax Department Moving Permit must be provided before a Set Up Permit will be issued. If 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

**E J WOMACK ENTERPRISES INC
DBA COUNTRY FAIR HOMES**
2516 Jefferson Davis Highway
SANFORD NORTH CAROLINA 27330
(919) 775 3600 1 800-509 3600 Fax (919) 775-7533

BUYER <i>Christine Williams</i>		DATE <i>3-7-12</i>	
DELIVERY ADDRESS <i>Madison Rd Sanford NC 27332</i>		SALESPERSON	
MAKE & MODEL <i>Champion</i>	YEAR <i>1989</i>	FLOOR SIZE <i>28 x 40</i>	HT H SIZE <i>28 x 44</i>
OPTIONAL EQUIPMENT	TYPE OF INSULATION	PROPOSED DELIVERY DATE	FLY NUMBER
<input type="checkbox"/> NEW <input checked="" type="checkbox"/> USED			
LOCATION	R-VALUE THICKNESS	TYPE OF INSULATION	BASE PRICE OF UNIT \$ <i>18,900</i> ⁰⁰
CEILING			OPTIONAL EQUIPMENT
EXTERIOR			
FLOORS			SUB TOTAL \$ <i>18,900</i> ⁰⁰
THIS INSULATION INFORMATION WAS FURNISHED BY THE MANUFACTURER AND IS DISCLOSED IN COMPLIANCE WITH THE FEDERAL TRADE COMMISSION RULE 16CFR SECTION 460.16			SALES TAX
OPTIONAL EQUIPMENT, LABOR AND ACCESSORIES			NON TAXABLE ITEMS <i>NA</i>
<i>Del & set to Co. Codes</i>	\$		VARIOUS FEES AND INSURANCE <i>NA</i>
<i>Electrical & Plumbing Back up</i>	\$		1 CASH PURCHASE PRICE \$ <i>18,900</i> ⁰⁰
			TRADE IN ALLOWANCE \$
			LESS BAL DUE on above \$
			NET ALLOWANCE \$
			CASH DOWN PAYMENT \$
			CASH AS AGREED SEE REMARKS \$
			2 LESS TOTAL CREDITS \$
			SUB TOTAL \$ <i>18,900</i> ⁰⁰
			SALES TAX (If Not Included Above)
			3 Unpaid Balance of Cash Sale Price \$ <i>18,500</i> ⁰⁰
REMARKS <i>Tires & Aides to be returned to dealer</i>			Dealer and Buyer certify that the additional terms and conditions printed on the other side of this contract are agreed to as a part of this agreement, the same as if printed above the signatures Buyer is purchasing the above described manufactured home, the optional equipment and accessories the insurance as described has been voluntary, that Buyer's trade-in is free from all claims whatsoever except as noted
BALANCE CAPPED TO OPTIONAL EQUIPMENT \$			ESTIMATED RATE OF FINANCING _____ %
NOTE: WARRANTY AND EXCLUSIONS AND LIMITATIONS OF DAMAGES ON THE REVERSE SIDE			NUMBER OF YEARS _____
DESCRIPTION OF TRADE-IN	YF-R	SIZE	ESTIMATED MONTHLY PAYMENTS \$ _____
MAKE	MODEL	BLDROOMS	THIS AGREEMENT CONTAINS THE ENTIRE UNDERSTANDING BETWEEN DEALER AND BUYER AND NO OTHER REPRESENTATION OR INDUCEMENT, VERBAL OR WRITTEN, HAS BEEN MADE WHICH IS NOT COVERED IN THIS CONTRACT
TITLE NO	SERIAL NO	COLJP	BUYER(S) ACKNOWLEDGE RECEIPT OF A COPY OF THIS ORDER AND THAT BUYER(S) HAVE READ AND UNDERSTAND THE BACK OF THIS AGREEMENT
AMOUNT OWING TO WHOM			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 OF 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.
ANY DEBT BUYER OWES ON TRADE IN IS TO BE PAID BY <input type="checkbox"/> DEALER <input checked="" type="checkbox"/> BUYER			
E J WOMACK ENTERPRISES INC DBA COUNTRY FAIR HOMES			SIGNED BY _____ BUYER
Not Valid Unless Signed and Accepted by an Officer of the Company or an Authorized Agent			SOCIAL SECURITY NO _____
By <i>Chris Packer</i>			SIGNED BY _____ BUYER
			SOCIAL SECURITY NO _____