

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: Carol J. Luther Address: 144 Tandm Ln
City: Dunn State: NC Zip: 28334 Daytime Phone: (852) 586-442

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 M H Movers
Phone: 919-422-8623 Address: 1080-Aguilla Road
City: Benson State: NC Zip: 27504
State Lic# 2859 Email: _____
- B. **Electrical Contractor** Company Name: Jonathan Beasley
Phone: 910-892-5687 Address: 191 Fred McLean Lane
City: Coats State: NC Zip: 27521
State Lic# 26739 Email: _____
- C. **Mechanical Contractor** Company Name: Mark Shockley
Phone: 919-624-2174 Address: 544 October Drive
City: Willow Springs State: NC Zip: _____
State Lic# 12730143 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# 18550P-1 Email: _____

Part III - Manufactured Home Information

Model Year: 2015 Size: 32 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.

Carol J. Luther
Signature of Home Owner or Agent

5/5/15
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.

SALES AGREEMENT

DATE: 4/4/15
BUYER(S): CAROL LUTHER

ADDRESS: 144 T & M LANE DUNN, NC. 28334

DELIVERY ADDRESS:

TELEPHONE: 352-586-1642

SALES PERSON FULL NAME: Cathy Long

BASE PRICE: \$ 94,500.⁰⁰

State Tax

Local Tax

2,239.⁶⁵
N/A

1. CASH PRICE

\$ 96,739.⁶⁵

Land Purchase

Land Payoff

Title Fees

Filing Fees

HPP/HBPP

HPP tax

40.⁰⁰

2. TOTAL PACKAGE PRICE

\$ 96,779.⁶⁵

Trade Allowance

Less Amount Owed

Trade Equity

Cash Down Payment

5,000.⁰⁰

3. LESS ALL CREDITS

\$ 35,436.⁰⁰

4. REMAINING BALANCE

\$ 56,343.⁶⁵

Make: CMH Model: Vintage
Year 2015 Length 56' Width 32' Stock#
Serial No. TBD ☒ New ☐ Used

TRADE: Make: _____ Model: _____
Year _____ Length _____ Width _____ Title # _____
Serial No. _____

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

OPTIONS:

13 SEER HEAT PUMP, 3 SETS OF WOOD STEPS, WIRE HOME FOR POWER BOX, PLUMB WATER 75' PUMPSAWER 20' PIER + 10' FROM. FOOTERS, BRICK SKIRTING.

SELLER RESPONSIBILITIES:

DELIVERY AND SET-UP AND TRIM OUT OF HOME TO COUNTY CODE.

BUYER RESPONSIBILITIES:

Customer responsible for ALL permits.
NOTE: BANK TO ADD CLOSING FEES TO REMAINING BALANCE.

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 _____ % NUMBER OF YEARS _____
ESTIMATED MONTHLY PAYMENTS \$ _____

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) they received and acknowledge receiving a completed copy of this agreement; (4) that all promises and representations made are listed on this agreement; and (5) 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:

x Carol Luther
Signature of:

x
Signature of:

x
Signature of:

x
Signature of:

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

Location	Type of Insulation	Thickness	R-Value
Floors			
Exterior	ENERGY STAR RATED		
Ceilings			

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 14-50035205 Date 5/05/15
Property Address 96 T & M LN
PARCEL NUMBER 07-0598- - -0246- - -
Application type description CP MANUFACTURED HOME RA 30 CRITERIA
Subdivision Name
Property Zoning RES/AGRI DIST - RA-30

Owner

Contractor

MOORE JANICE M
144 T & M LANE
DUNN NC 28334
(910) 897-3533

OWNER

Applicant

LUTHER CAROL
144 T AND M LN
DUNN NC 28334
(352) 586-1642

--- Structure Information 000 000 28X56 3 BR FUTURE DECK AND GARAGE
Flood Zone FLOOD ZONE X
Other struct info # BEDROOMS 3.00
MOBILE HOME YEAR 2014.00
PROPOSED USE DWMH
SEPTIC - EXISTING? NEW
WATER SUPPLY COUNTY

Permit MANUFACTURED HOME PERMIT
Additional desc . .
Phone Access Code . 1079755
Issue Date 5/05/15
Expiration Date . . 5/04/16

Valuation 0

Permit LAND USE PERMIT
Additional desc . .
Phone Access Code . 1079763
Issue Date 5/05/15
Expiration Date . . 11/01/15

Valuation 0

Special Notes and Comments

T/S: 01/14/2015 10:30 AM DJOHNSON --
TAKE 27 E TO LEFT ONTO 55W/N13TH ST
THEN RIGHT ONTO T & M LN
144 T & M LN

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Application description . . .	CP MANUFACTURED HOME	RA 30	CRITERIA
Subdivision Name			
Property Zoning	RES/AGRI DIST - RA-30		

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

Permit type LAND USE PERMIT					
999	818	Z818	PZ*ZONING INSPECTION	_____	___/___/___
999	820	Z820	PZ*ZONING/FINAL INSPECTION	_____	___/___/___