

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: BRENDAN BARRETT Address: 501 WEST HATCHER ST.

City: FOUR OAKS State: NC Zip: 27524 Daytime Phone: (919) 669-7370

Landowner 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: TITAN MOBILE HOME MOVERS

Phone: 910-580-0340 Address: 175 MENEIL LN

City: DUNN State: NC Zip: 28334

State Lic# 32290 Email: _____

B. **Electrical Contractor** Company Name: RICHARD BARNER

Phone: 919-395-4785 Address: 171 RICHARDSON BRIDGE RD

City: PRINLETON State: NC Zip: 27569

State Lic# 31851 VOLTO. Email: _____

C. **Mechanical Contractor** Company Name: TRAVIS BYRD

Phone: 919-398-4281 Address: 2040 NC-96

City: FOUR OAKS State: NC Zip: 27524

State Lic# 28699 Email: _____

D. **Plumbing Contractor** Company Name: BRENT ADAMS

Phone: 919-669-7979 Address: 507 S. MELANES ST

City: BENSON State: NC Zip: 27507

State Lic# 17359 Email: _____

Part III – Manufactured Home Information

Model Year: 1984 Size: 14 X 72 **Complete & follow zoning criteria sheet**

Park Name: COLES COUNTRY ESTATES Lot Number: 42

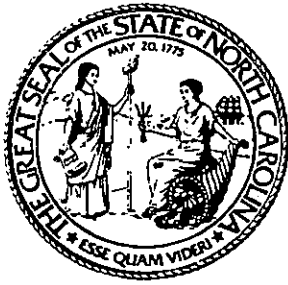
I hereby certify that I have the authority to apply for this permit, that the application is correct including the contractor information and have obtained their permission to purchase these permits on their behalf, and that the construction or installation will conform to the applicable manufactured 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.


Signature of Home Owner or Agent

11/02/14
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.



MOBILE HOME TAX PERMIT

COUNTY OF Rocky Mount

PERMIT NUMBER 400

STATE OF NORTH CAROLINA

Date 5/1/18 2018

Permission is granted to:

William Louis Ferguson

Owner _____ Address _____

Town Mobile Home Museum

Carrier _____ Address _____

to move the following mobile home:

85 14472

Make _____ Model _____ Size _____ Serial number _____

From: Sub 120000 Rock Hill S. Johnston N.C. 27855

Address

To: 85 Rock Hill St, Town NC 27855

Address

This permit is issued in accordance with the provisions of G.S. 105-316.1 through G.S. 105-316.8 of the general Statutes of North Carolina.

This permit shall be conspicuously displayed near the license tag on the rear of the mobile home at all times during its transportation.

City of Rocky Mount
County-City Tax Collector

THIS PERMIT VALID FOR THIS MOVE ONLY.