Application #\_

**Harnett County Central Permitting** 

PO Box 65 Lillington, NC 27546

BRESIBI2.0011

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: JESUS ANTONIO RAMASTORPEAGORESS: 221 CIMARRON DRIVE State: N.C. Zip: 28390-Daytime Phone: (36) 789-1455 Landowner Information (To be completed by landowner, if different than above) Address: 404 HIPN DOF Name: MONTY PECTO State: N.C. Zip: 2747 Daytime Phone: 989 Part II - Contractor Information (To be completed by Contractors or Homeowner, if applicable, Name, address, & phone must match information on license)
Set-Up Contractor Company Name: CHOUS MOBILE HOME TRANSIT A. Phone: 910 -850 -6572 Address: P. O BOX 355 State: State Lic# Email: Electrical Contractor Company Name: LUNNIE B. Address: City: PARKTON State: Email: C. Mechanical Contractor Company Name: \_\_\_\_\_ Address: Zip: City: State: State Lic# Email: Plumbing Contractor Company Name: D. Address: 5411 KI State: N State Lic# Email: Part III - Manufactured Home Information Model Year: Complete & follow zoning criteria sheet Lot Number: Park Name: 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

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

SETUP

<sup>\*</sup>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.



## AMY B. KINLAW Chief of Assessment and Collections

TAMI K. BOTELLO Chief of Real Estate and Mapping

## OFFICE OF THE TAX ADMINISTRATOR

Courthouse • 5th Floor - Suite 530 • P.O. Box 449 • Fayetteville, North Carolina 28302-0449 (910) 678-7507 • Fax: (910) 678-7588

MOBILE	HOMEN	OVING	PERMIT
Date: December 12, 2018	Current Listing Owner: CABEZAS, JUAN PABLO CRUZ		
County of Cumberland		LR No.:	9825594
State of North Carolina		Permit N	No.: <u>C-102</u>
State of North Carolina			Taquela Slaton
Permission is granted to the follo	wing person(s) to	move the mob	ile home identified below.
Name: TORRES, JESUS ANTON	NO RAMOS	Phone:	(361) 739-1655
Address: 1640 KRAUSE LANE, S	PRING LAKE, N	•	
Are you the current owner of the	mobile home? Ye	s 🛮 No 🗆 🛭 F	Purchase Date: 11/26/18
Mobile Home Carrier			
Name/Company: CHOO CHOO I			
Address: 5657 BRAGG BLVD, FA	YETTEVILLE, N	C 28303	
Property Description			
Manufacturer	Year	Size	VIN
OAK	1991	14X64	HONC56414CK3512453
Current Location: 1640 KRAUSE	LANE SPRING!	AKE NC 28390	1
County: Cumberland	LANE, OF KINO	Parcel ID: 9592-52-3523-	
county		raicerib.	002 02 0020
Location Moving To: 221 CIMMA	RON DRIVE, SPF	RING LAKE, NC	28390
County: HARNETT		Parcel ID: _	
This permit is issued in accordance	e with the provision	ons of North Car	olina General Statute §105-316.1
through §105-316.8.			
This permit shall be conspicuously	displayed near th	ne license plate o	on the rear of the mobile home at
all times during transportation.			
PERMIT VALID FOR THIS MOVE ON	ILY!		
0 00,00			

Joseph R. Utley, Jr.

**Cumberland County Tax Administrator**