Application # BRESIG 05-0008

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fox 910-893-7526

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: |
|-------------------------|--|
| Name | Owner Information (To be completed by owner of the manufactured home) Crystal medical Address: 35 Greenoak Trail |
| City | Lillington State: NC Zip: 27546 Daytime Phone: (910) 703 - 4902 |
| | |
| | wner 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. |
| A. | Name, address, & phone must match information on license) Set-Up Contractor Company Name: Dowiz Mobile Home Movers - Sherman Do |
| | Phone: (910) 978-5371 Address: 3345 Wayne La. |
| | City: Fagetteville, State: NC Zip: 2 |
| | State Lic#_02888 |
| B. | Electrical Contractor Company Name: Service Solutions - Tony Smith |
| | Phone: (910)635-9363 Address: 5798 McDonald Rd. |
| | City: Parkton State: NC Zip: 28371 |
| | State Lic# 20934 Email: Service Solutions 1997 @ yahoo com |
| C. | Mechanical Contractor Company Name: Soul's Mechanical |
| | Phone: (910) 525-5976 Address: 123 W. Vinson Ave. |
| | City: Autryville State: NC Zip: 28319 |
| | State Lic# 10574 Email: Spellsha & gal. com |
| D. | Plumbing Contractor Company Name: Ariority Plumbing - Stephen Jeffries |
| | Phone: (919) 422-4935 Address: Po Box 264 |
| | City: Willaw Spring State: 1C Zip: 27592 |
| | State Lic#Email: |
| Part III | - Manufactured Home Information |
| | 2-10 |
| | (ear: 2019 Size:X Complete & follow zoning criteria sheet |
| Park Na | ame:Lot Number: |
| informati installati | certify that I have the authority to apply for this permit, that the application is correct including the contractor ion and have obtained their permission to purchase these permits on their behalf, and that the construction or on will conform to the applicable manufactured home set-up requirements, and the Harnett County Zoning ce. I understand that if any item is incorrect or false information has been provided that this permit could be |
| Ki | 7-16-19 |
| | Signature of Home Owner or Agent Date |

*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.

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

SETUP