

Application # _____

Harnett County Central Permitting
420 McKinney Pkwy Lillington, NC 27546
PO Box 65 Lillington, NC 27546

Telephone Number: 910-893-7525 ext 1 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: Phoenix Properties Inc Address: 1000 N Main St, Ste 221

City: Figueroa State: NC Zip: 27526 Daytime Phone: (919) 818 3623

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: EASY STREET MOVERS LLC

Phone: 919 820-3865 Address: 805 EASY STREET

City: Dunn State: NC Zip: 28334 Email: _____

Setup Signature: [Signature] State Lic# 416302

B. **Electrical Contractor** Company Name: Harte Electric

Phone: 919 639 6851 Address: 7836 HWY 55 SOUTH

City: Willow Spring State: NC Zip: 27592 Email: hartelectricnc@gmail.com

Electrician's Signature: [Signature] State Lic# 233339

C. **Mechanical Contractor** Company Name: Joe Montague Heating & Cooling

Phone: 919 577-8059 Address: 207 N. MAIN ST

City: Figueroa State: NC Zip: 27526 Email: jmhcservices@aol.com

HVAC Signature: [Signature] State Lic# 22254

D. **Plumbing Contractor** Company Name: John Wells Plumber

Phone: 919-980-0068 Address: Chalybeate Springs Rd

City: Figueroa State: NC Zip: _____ Email: michaelsolome.com

Plumber's Signature: _____ State Lic# 23979

Part III - Manufactured Home Information

Model Year: 1984 Size: 28 x 64 Complete & follow zoning criteria sheet

Park Name: N/A Lot Number: N/A
Old Stage Rd Prager, NC 27501 Pin# 0692-12-7658.000

I hereby certify that I have the authority to apply for this permit, that the application is correct including the contractor information and signatures, 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]
Signature of Home Owner or Agent

3/16/22
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.

Application # _____

Harnett County Zoning Permitting
405 W. Commerce Street, Harnett, NC 27542
Phone: 919-286-4400 Fax: 919-286-4401

Telephone: 919-286-4400 Fax: 919-286-4401 www.harnett-nc.gov/permits

Application for Manufactured Home Set-Up Permit
(Please Print Name and Address Carefully)

Part I - Owner Information

Name: Prostate Properties Inc Address: 2111 S. 10th St. Raleigh, NC

City: Raleigh, NC State: NC Zip: 27608 Daytime Phone: 919-286-1111

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

Name: _____ Address: _____
City: _____ State: _____ Zip: _____ Daytime Phone: _____

Part B - Contractor Information (to be completed by contractor or manufacturer if applicable)

A. Set-Up Contractor Company Name: Prostate Movers LLC
Phone: 919-280-3865 Address: 205 Cash Street
City: Dunn State: NC Zip: 28331 Email: _____
Setup Signature: [Signature] State Lic#: 416302

B. Electrical Contractor Company Name: Hule Electric
Phone: 919-246-5151 Address: 7846 Hwy 55 South
City: Wilmington State: NC Zip: 28412 Email: huleelectric@gmail.com
Electrician's Signature: [Signature] State Lic#: 233539

C. Mechanical Contractor Company Name: De Montague Heating & Cooling
Phone: 919-577-8554 Address: 207 N. Main St
City: Troy, NC State: NC Zip: 27586 Email: dmhco@windynet.com
HVAC Signature: [Signature] State Lic#: 24254

D. Plumbing Contractor Company Name: John Wells Plumber
Phone: 919-286-9268 Address: Chalybeate Springs Rd
City: Fayetteville State: NC Zip: _____ Email: johnwellsplumber.com
Plumber's Signature: [Signature] State Lic#: 23979

Part III - Manufactured Home Information

Model Year: 1984 Size: 28 x 64 Complete & follow zoning criteria sheet

Park Name: N/A Lot Number: N/A

Old Stage Rd Fayetteville, NC 27501 Plot# 0492-12-2658 000

I hereby certify that I have the authority to apply for this permit, that the application is correct including the contractor information and signatures, 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]
Signature of Home Owner or Agent

3/10/22
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.