| Application # | |
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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)

| | Owner Information: Owner Information (To be completed by owner of the manufactured home) | | |
|------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| | Keith A. Chapman Address 50 B CN | | |
| 1.7 | 210 | | |
| City: | Cats State: NC Zip: 2754 Daytime Phone: (419 203 - 6425 | | |
| Lando | wher Information (To be completed by landowner, if different than above) | | |
| Name | Address | | |
| City: | State Zip Daytime Phone () | | |
| Part I | - Contractor Information (To be completed by Contractors or Homeowner, if applicable. | | |
| A | Set-Up Contractor Company Name. State Mobile Home Movers | | |
| | Phone 919-576-5192 Address: 1085 Aquilla Rd | | |
| | City Benson State Nezip 27504 Email Bobby BWT@Gmc. 1. Com | | |
| | Setup Signature. State Lic# | | |
| В | Electrical Contractor Company Name K. + Chapman | | |
| | Phone Address | | |
| | City: State: Zip Email: | | |
| | Electrician's Signature / State Lic# | | |
| С | Mechanical Contractor Company Name 160, the Chapman | | |
| | Phone Address | | |
| | City State Zip Email. | | |
| | HVAC Signature Keeling State Zip Email. HVAC Signature State Lic# State Lic# Company Name Let Lic# Grant Willis Planks | | |
| D: | Plumbing Contractor Company Namer 16 16 Chopses (2014 to the Chopses) | | |
| | Phone Address: 2858 Bailry Rd Coats | | |
| | City State @ UCZip 275 1 Email: | | |
| | Plumber's Signature: Kur Cl. qu State Lic# 18659 | | |
| Part II | - Manufactured Home Information | | |
| Mode | Year 1994 Size: 14 x 80 Complete & follow zoning criteria sheet | | |
| Park N | ame:Lot Number: | | |
| inform set-up | y certify that I have the authority to apply for this permit, that the application is correct including the contractor tion and signatures, and that the construction or installation will conform to the applicable manufactured home requirements, and the Harnett County Zoning Ordinance. I understand that if any item is incorrect or false tion has been provided that this permit could be revoked. | | |
| 16 | Signature of Home Owner or Agent Date | | |
| | Signature of Home Owner or Agent 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 it available, the senal number
List of inspections and Egress requirements available upon request. Progress Energy customers must provide Premise Number.