



strong roots · new growth

CentralPermitting@Harnett.org
(910) 893-7525 ext:1
420 McKinney Pkwy (physical)
PO Box 65 (mailing)
Lillington, NC 27546

MANUFACTURED HOME SET-UP APPLICATION

MANUFACTURED HOME INFORMATION

Site Address: 65 Sanatra Drive Cameron NC PIN: 099564 0105 22
Model Year: 2026 32X56 Size: X
Park Name: Lot Number:

OWNER INFORMATION

Manufactured Homeowner: Vets Buy Homes NC LLC Mailing Address: 156954 Johns Loop
City: Raf, d State: NC Zip: 28376
Phone: 715 703 9030 Email: Ryan@Vetsbuyhouses.com

*Please complete landowner if different than above.

Landowner: Mailing Address:
City: State: Zip:
Phone: Email:

CONTRACTOR INFORMATION * Must be owner or licensed contractor. Address, company name & phone must match information on license.

SET UP CONTRACTOR INFORMATION

Dominic Mobile Home Service 910 374 240 3902
Set Up Contractor's Company Name Phone
1220 Hwy 211 - W Red Springs NC 28377
Address Email
35546

ELECTRICAL CONTRACTOR INFORMATION

McElectric Co 910 973 2110
Electrical Contractor's Company Name Phone
21429 Crawford Lake Rd Lark Hill
Address Email
261430 NC 28351

MECHANICAL/HVAC CONTRACTOR INFORMATION

Uprise Heating and Air 910 824 0640
Mechanical Contractor's Company Name Phone
1660 Cedar Creek Rd Fayetteville NC
Address Email
37166 28312

PLUMBING CONTRACTOR INFORMATION

J and S Plumbing Services 910 258 5898
Plumbing Contractor's Company Name Phone
129 Roscos Rd Bembroke NC 28372
Address Email
5366

I hereby certify that I have the authority to apply for this permit, that the application is correct including the contractor information, 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 Homeowner or Agent

2 Mar 26
Date



I hereby certify that I have the authority to complete this application, that the application is correct and that the construction will conform to the regulations in the Building, Electrical, Plumbing and Mechanical codes and in the Harnett County Zoning Ordinance. I state the information on the aforementioned contractors is correct as it is known to me and that **by signing below I have obtained all subcontractors permission to obtain these permits** and if **any** changes occur including listed contractors, site plan, number of bedrooms, building and trade plans, Environmental Health permit changes or proposed use changes, I certify it is my responsibility to notify the Harnett County Central Permitting Department of all changes.

EXPIRED PERMIT FEES - 6 months to 2 years re-issue fee is \$150.00. After 2 years re-issue fee is as per current fee schedule.

[Signature]
Signature of Owner/Contractor/Officer of Corporation

2 MAR 26
Date

Affidavit for Worker's Compensation N.C.G.S. 87-14

The undersigned applicant being the:

General Contractor Owner Officer/Agent of the Contractor or Owner

Does hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:

Has 3 or more employees and has obtained workers' compensation insurance to cover them,

Has 1 or more subcontractors and has obtained workers' compensation insurance to cover them,

Has 1 or more subcontractors who has their own policy of workers' compensation insurance covering themselves,

Has no more than 2 employees and no subcontractors,

While working on the project for which this permit is sought and it is understood that the Central Permitting Department issuing the permit may require certificates of workers' compensation insurance coverage from any person, firm, or corporation carrying out the work prior to issuance of the permit or at any time during the permitted work.

[Signature]
Signature of Owner/Contractor/Officer of Corporation

2 MAR 26
Date