

**Harnett County Central Permitting**

PO Box 65 Lillington, NC 27546

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: Meadow Wheeler Address: 1132 Pine Oak

City: Cameron State: NC Zip: 28326 Daytime Phone: 910-847-4641

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

Name: EJ Womack Ent Inc Address: 1947 S Horner Blvd

City: Sanford State: NC Zip: 27330 Daytime Phone: 919-775-3600

**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: Raven Rock MH Movers

Phone: 919-775-3600 Address: 1947 S Horner Blvd

City: Sanford State: NC Zip: 27330

State Lic# 3400 Email: N/A

B. **Electrical Contractor** Company Name: King Heating Air Conditioning

Phone: 919-890-4898 Address: 300 Wilson Rd

City: Sanford State: NC Zip: 27330

State Lic# 21207-U Email: N/A

C. **Mechanical Contractor** Company Name: Tin Shop

Phone: 919-708-8340 Address: 3489 Edward Rd

City: Sanford State: NC Zip: 27330

State Lic# 22513 Email: N/A

D. **Plumbing Contractor** Company Name: Thomas Plumbing & repairs

Phone: 919-499-8300 Address: 841 McArthur Rd

City: Broadway State: NC Zip: 27505

State Lic# 12286 Email: N/A

**Part III – Manufactured Home Information**

Model Year: 2025 Size: 32x56 **Complete & follow zoning criteria sheet**

Park Name: \_\_\_\_\_ Lot Number: \_\_\_\_\_

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]  
Signature of Home Owner or Agent

2/2/25  
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.

# Harnett County Department of Public Health

## Improvement Permit

A building permit cannot be issued with only an Improvement Permit

ISSUED TO: EJ Womack PROPERTY LOCATION: 1111 Pine Oak LOT # \_\_\_\_\_  
 SUBDIVISION \_\_\_\_\_  
 NEW  REPAIR  EXPANSION   
 Type of Structure: DWMH (32'x68')  
 Proposed Wastewater System Type: Conventional  
 Projected Daily Flow: 360 GPD  
 Number of bedrooms: 3 Number of Occupants: 360 max  
 Basement  Yes  No  
 Pump Required:  Yes  No  May be required based on final location and elevations of facilities  
 Type of Water Supply:  Community  Public  Well Distance from well \_\_\_\_\_ feet  
 Permit valid for:  Five years  No expiration  
 Permit conditions: \_\_\_\_\_  
 Authorized State Agent: ~~REY~~ Date: 8/25/23 SEE ATTACHED SITE SKETCH

The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This site is subject to revocation if the site plan, plat, or the intended use changes. The Improvement Permit shall not be affected by a change in ownership of the site. This permit is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.

## Construction Authorization

(Required for Building Permit)

The construction and installation requirements of Rules 1950, 1952, 1954, 1955, 1956, 1957, 1958 and 1959 are incorporated by references into this permit and shall be met. Systems shall be installed in accordance with the attached system layout.

ISSUED TO: EJ Womack PROPERTY LOCATION: 1111 Pine Oak LOT # \_\_\_\_\_  
 SUBDIVISION \_\_\_\_\_  
 Facility Type: DWMH (32'x68')  New  Expansion  Repair  
 Basement?  Yes  No Basement Fixtures?  Yes  No  
 Type of Wastewater System\*\* Conventional (Initial) Wastewater Flow: 360 GPD  
 (See note below, if applicable )  
Conventional (Repair)

**Installation Requirements/Conditions**

|  |   |   |   |
|--|---|---|---|
| Septic Tank Size <u>1000</u> gallons           | Number of trenches <u>1</u>                                   | Exact length of each trench <u>150</u> feet                       | Trench Spacing: <u>9</u> Feet on Center   |
| Pump Tank Size _____ gallons                   | Trenches shall be installed on contour at a                   | Maximum Trench Depth of: <u>18</u> inches                         | Soil Cover: <u>6</u> inches   |
|  | (Trench bottoms shall be level to +/- 1/4" in all directions) | (Maximum soil cover shall not exceed 36" above the trench bottom) |   |
| Pump Requirements: _____ ft. TDH vs. _____ GPM |   |   | Aggregate Depth: _____ inches below pipe<br>_____ inches above pipe<br>_____ inches total |

Conditions: \_\_\_\_\_

**WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM ANY PART OF SEPTIC SYSTEM OR REPAIR AREA.  
 NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA.**

*\*\*If applicable: I understand the system type specified is different from the type specified on the application. I accept the specifications of this permit.*

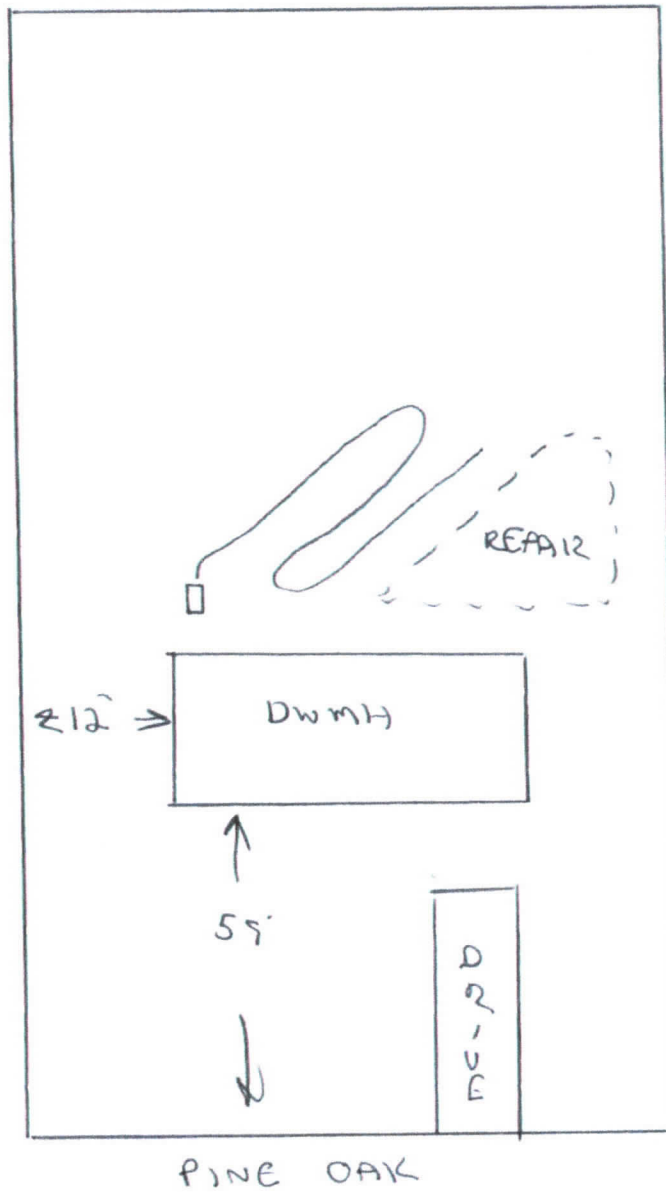
Owner/Legal Representative Signature: \_\_\_\_\_ Date: \_\_\_\_\_

This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Construction Authorization shall not be transferred when there is a change in ownership of the site. This Construction Authorization is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit. SEE ATTACHED SITE SKETCH

Authorized State Agent: ~~REY~~ Date: 8/25/23  
 Construction Authorization Expiration Date: 8/25/28

# Harnett County Department of Public Health Site Sketch

Property Location: 1111 Pine Oak  
Issued To: EJ Womack Subdivision \_\_\_\_\_ Lot # \_\_\_\_\_  
Authorized State Agent: REHS (OLIVER TOLKSOOF) Date: 8/25/23



This drawing is for illustrative purposes only. System installation must meet all pertinent laws, rules, and regulations.