| 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) | ted by owner of the man | ufactured home)       |                       |  |
|---|---|-------------------------|-----------------------|-----------------------|--|
| Name: Angier State: 27502 Daytime Phone: 919 610-6494   |   |                         |                       |                       |  |
| City: _   | Angier State:   | MC Zip: 2750            | 2Daytime Phone: 9/19  | 618-6494              |  |
| 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: MILLER MOBILE HOMES   |   |                         |                       |                       |  |
|   | Phone: 910 308 125                                      | 4Address: 3600          | Belvidas              | An                    |  |
|   | City: Fayetville  | State: N C Zip: 25      | 2306 Email:           |                       |  |
| City: Fayetville State: MC Zip: 28306 Email: State Lic# 3674  |   |                         |                       |                       |  |
| B.  | 6.10 0 1  |                         |                       |                       |  |
|   | Phone:  |                         |                       |                       |  |
|   | City:   | State: Zip:             | Email:                |                       |  |
|   | Electrician's Signature:                                |                         | State I               | Lic#                  |  |
| C. Mechanical Contractor Company Name: Marty 40000 Self. Contracting  |   |                         |                       |                       |  |
|   | Phone:  |                         | 1                     |                       |  |
| /   | City:   | State: Zip:             | Email:                |                       |  |
|   | HVAC Signature:   |                         | State Lic#            |                       |  |
| Phone: 919 524 2061 Address: 12192 NiC 74W4 96 South  |   |                         |                       |                       |  |
|   |   |                         |                       |                       |  |
| -   | City: DUNN  | State: 1/C Zip: 2       | <b>9334</b> Email:    |                       |  |
|   | Plumber's Signature:                                    |                         | State I               | Lic# H3 Class 1-17801 |  |
| Part III – Manufactured Home Information  |   |                         |                       |                       |  |
| Model Year: 2025 Size 26.8 56 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 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. |   |                         |                       |                       |  |
|   | Harlor forda  |                         | /2-2-2                | 14                    |  |
|   | Signature of Home Owner or Age                          | ent                     | 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.