| Application | # | |
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| Application | 77 | |

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)

| | -Dwner Information: Owner Information (To be comple | ted by ov | vner | of the n | nanufa | actured home | 2) | |
|-----------|------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|--------|-------------|----------|----------------------------------|----------------------------------|----------------|
| Name: | Romela Maria Geddie | | Add | ress: 1 | 409 | Galmore | e Street | |
| | ayetherille state: | | | | | | | |
| Landov | ner Information (To be completed | d by land | owne | er, if diff | erent | than above) | | |
| Name: | | | Add | ress: | | | | |
| City: _ | State: _ | | Zip: | | D | aytime Phon | e: () | |
| Part II | Contractor Information (To be | completed | by C | Contracto | ors or l | Homeowner, if | applicable. | |
| Α. | Set-Up Contractor Company Na | ame: T | 1'5 | A B | agh | information or | Develop | nest |
| | Phone: (910)506-9285 | | | | | | | |
| | City: Red Springs | | | | | | | |
| В. | Setup Signature: Electrical Contractor Company | Name: | | 1112 | 01 | | _State Lic# | 19019 |
| | Phone: | | | | | | | |
| | City: | | | | | | | |
| | Electrician's Signature: | | | | | | | |
| C. | Mechanical Contractor Compa | | | | | | | |
| | Phone: | | | | | | | |
| | City: | | | | | | | |
| | HVAC Signature: | | | | | State L | ic# | |
| D. | Plumbing Contractor Company | Name:_ | 0 | who | 5 | | | |
| | Phone: | Address | S: | | | | | |
| | City: | State: _ | | _ Zip: _ | | Email: | | |
| | Plumber's Signature: | | | | | | _State Lic# | |
| Part III | - Manufactured Home Informat | ia m | | | | | | |
| | | | | | | | | |
| Model | /ear: <u>2023_</u> Size: <u>14_x</u> 32 | _ | Comp | olete & | follov | v zoning crit | eria sheet | |
| Park Na | ame: | | | Lot N | Numb | er: | | |
| set-up re | certify that I have the authority to a ion and signatures, and that the conequirements, and the Harnett Count ion has been provided that this permit | struction of | or ins | tallation | will co | onform to the erstand that if | applicable man any item is in | ufactured home |
| 701 | Signature of Home Owner or Age | ent | | | _ | S/13/2 | <i>د</i> اً | |

*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 inspedtions and Egress requirements available upon request. Progress Energy customers must provide Premise Number.