



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: 159 SANATRA CAMERON N-C PIN: NC FLY 41AB523 75B F13
Model Year: 2000 Size: 20 x 50
Park Name: private Lot Lot Number: 159 SANATRA DRIVE

OWNER INFORMATION

Manufactured Homeowner: EDIN RAUL CASTELLANOS Mailing Address: 481 MCDUFFIE RD
City: CAMERON State: N-C Zip: 28326
Phone: 910-808-5083 Email: CASTELLANOS EDIN551@gmail.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

Cromartie Enterprise LLC (Chns) (910) 874-6262
Set Up Contractor's Company Name Phone
5480 Barking Ridge Dr Apt # 307 28314 Christopher@cromartiebuilders.com
Address Email
3327

ELECTRICAL CONTRACTOR INFORMATION

EDIN RAUL CASTELLANOS OWNER 910-808-5083
Electrical Contractor's Company Name Phone
481 MCDUFFIE RD CASTELLANOS EDIN551@gmail.com
Address Email

License # .com

MECHANICAL/HVAC CONTRACTOR INFORMATION

EDIN RAUL CASTELLANOS OWNER 910-808-5083
Mechanical Contractor's Company Name Phone

Address Email

PLUMBING CONTRACTOR INFORMATION

EDIN RAUL CASTELLANOS OWNER 910-808-5083
Plumbing Contractor's Company Name Phone

Address Email

License # _____

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

Date

9-4-2025