| | Ar | plication | # | |
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September 1988

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 comple | ted by o | wner of th | ne manufactui | red home |) | |
|---------------------|---|------------------------|--------------------------|------------------------------------|------------|---------------------------------|---|
| Name: Tammy Snavely | | | | | | | |
| | | | | | | =: (910 986 - 4552 | |
| Landov | wner Information (To be complete | d by land | downer, if | different than | above) | | |
| | Same | | | | | | |
| | State: | | | | | | |
| | | | | | | | |
| Part II | | address, | & phone m | rust match info | | | |
| A. | Set-Up Contractor Company Na | 1, 5 | | | L D.I | | |
| | Phone: 910-690-9222 | | | | | | |
| | City: Cameron | State: | NC Z | _{ip: 28326} | Email: | aplusconstruction5369@yahoo.con | n |
| | Setup Signature: | | | | | _State Lic#_45570 | |
| B. | Electrical Contractor Company | Name: | Triple A | Electric | | | |
| | Phone: 919-353-1982 | Addres | _{ss:} 654 S | Sellars Rd | | | |
| | City: Cameron | State: | NC Z | _{ip:} 28326 | Email: | johnson.ronnie95@gmail.com | |
| | Electrician's Signature: | | | | | State Lic# 25128 | |
| C. | Mechanical Contractor Compa | ny Name | _{e:} D&D H | IVAC LLC | | | |
| | Phone: 919-628-2183 | Addres | ss: 605 (| Chatham St | t | | |
| | City: Sanford | State: | NC Z | _{ip:} 27330 | | contact@ddhvacllc.com | |
| | HVAC Signature: | | | | | ic#23371 | |
| D. | Plumbing Contractor Company | Name: | Priority F | Plumbing | | | |
| | Phone: 919-422-4935 | Addres | s PO B | ox 264 | | | |
| | City: Willow Springs | | | | Email: | sjeffr8081@aol.com | |
| | Plumber's Signature: | | | | ==5 | State Lic#18550 | |
| Dart III | - Manufactured Home Informat | ion | | | | | |
| | | | | | | | |
| Model ` | Year: <u>2025</u> Size: <u>28</u> x <u>50</u> | _ | Complete | e & follow zo | oning crit | eria sheet | |
| Park N | ame: | | ا | _ot Number: | | | |
| informati set-up | r certify that I have the authority to a tion and signatures, and that the cor requirements, and the Harnett Coun tion has been provided that this permi | struction ty Zoning | or installa g Ordinan | ation will confo ce. I understa | rm to the | applicable manufactured home | |
| 1 | Johan | | 9 | 8 | 292 | 5 | |
| | Signature of Home Owner or Age | ent | | | 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.