

MANUFACTURED HOME SET-UP APPLICATION

MANUFACTURED HOME INFORMATION

Site Address: 104 Club Rd Lillington NC 27546 PIN: _____
Model Year: 2025 Size: 14 X 66
Park Name: _____ Lot Number: _____

OWNER INFORMATION

Manufactured Homeowner: Della Massey Mailing Address: 88 Club Rd
City: Lillington State: NC Zip: 27546
Phone: 910-658-1395 Email: della.massey97@yahoo.com

*Please complete landowner if different than above.

Landowner: Della Massey Mailing Address: 88 Club Rd
City: Lillington State: NC Zip: 27546
Phone: 910-658-1395 Email: dellamassey97@yahoo.com

CONTRACTOR INFORMATION

* Must be owner or licensed contractor. Address, company name & phone must match information on license.

General Contractor

SET UP CONTRACTOR INFORMATION

~~Bruce M Hall Miller Home Service~~ 919-622-3768
Set Up Contractor's Company Name _____ Phone _____
~~PO Box 1044 Garner NC 27529~~ Halls Properties LLC gmail
Address _____ Email _____
~~3674~~ 3600 Behridge Dr. Fayetteville NC 28306
License # _____

ELECTRICAL CONTRACTOR INFORMATION

Owner Dennis Massey
Electrical Contractor's Company Name _____ Phone _____
Address _____ Email _____

License # _____

MECHANICAL/HVAC CONTRACTOR INFORMATION

Owner Dennis Massey
Mechanical Contractor's Company Name _____ Phone _____
Address _____ Email _____

License # _____

PLUMBING CONTRACTOR INFORMATION

Owner Dennis Massey
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]
Signature of Homeowner or Agent

10-20-25
Date