

MANUFACTURED HOME SET-UP APPLICATION

MANUFACTURED HOME INFORMATION

Site Address: 559 winding Rd Sanford NC PIN: _____
Model Year: 1996 Size: 28 X 48
Park Name: _____ Lot Number: 133 Carolina hills

OWNER INFORMATION

Manufactured Homeowner: Elisa and Gildardo Mailing Address: 30 wood craft Sanford
City: _____ State: _____ Zip: _____
Phone: 919 8951473 Email: _____

*Please complete landowner if different than above.

Landowner: _____ Mailing Address: JBmaroney1980@gmail.com
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

Choo's Mobile home
Set Up Contractor's Company Name _____ Phone _____
P.O. BOX 35595 Fayetteville
Address _____ Email _____
3532 NC 28305

ELECTRICAL CONTRACTOR INFORMATION

License # _____
Elisa Gildardo owner
Electrical Contractor's Company Name _____ Phone _____
Address _____ Email _____

MECHANICAL/HVAC CONTRACTOR INFORMATION

License # _____
Elisa Gildardo owner
Mechanical Contractor's Company Name _____ Phone _____
Address _____ Email _____

PLUMBING CONTRACTOR INFORMATION

License # _____
Elisa Gildardo owner
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.

Elisa Gildardo
Signature of Homeowner or Agent

10-29-25
Date