

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
Telephone Number: 910-893-4759

Application for Manufactured Home Set-Up Permit
(Please fill out each Part completely)

entered
8.7.07
Mann

Part I - Owner Information:

Home Owner Information (To be completed by owner of the manufactured home)
Name: CHOO CHOO HOMES Address: 4209 BRAGG BLVD
City: FAYETTEVILLE State: NC Zip: 28303 Daytime Phone: (910) 860 8787

Landowner Information (To be completed by landowner, if different than above)
Name: _____ Address: _____
City: _____ State: _____ Zip: _____ Daytime Phone: () _____

Part II - Contractor Information (To be completed by Contractors or Homeowner, if applicable)

- A. Set-Up Contractor Company Name: CHOO CHOO HOMES State Lic# 3532
Phone: 910 860 8787 Address: 4209 BRAGG BLVD
City: FAYETTEVILLE State: N.C. Zip: 28303
Signature: [Signature]
- B. Electrical Contractor Company Name: TRIPLE A State Lic# 25128
Phone: 919 353 1982 Address: PO BOX 494
City: LEMON SPRINGS State: N.C. Zip: 28355
Signature: [Signature]
- C. Mechanical Contractor Company Name: PETE'S ELECTRIC State Lic# 22525
Phone: 910 848 3900 Address: 5177 ST PAULS RD
City: RAEFORD State: NC Zip: 28376
Signature: [Signature]
- D. Plumbing Contractor Company Name: AFFORDABLE PLUMBING State Lic# 17435 P1
Phone: 910 497 6331 Address: 109 5TH 4TH STARS
City: SPRING LAKE State: NC Zip: 28390
Signature: [Signature]

Part III - Manufactured Home Information

New Used
 Singlewide Doublewide Triplewide
Model Year: 2007 Size: 28 x 76
 Private Property Manufactured Home Park

Park Name: _____ Lot Number: _____

Directions to site or Manufactured Home Park from Lillington: TAKE HWY 27 WEST FOR 20 MILES
T/L ON 24 EAST FOR .8 MILE T/L INTO BROOKS MANGUM RD S/R 1155
FOR .8 MILE T/L IN FLORENCE DRIVE FOR 150 YARDS TO END OF PAVED
ROAD T/L ON GRAVEL ROAD THEN T/L INTO ABOVE LOT

I hereby certify that I have the authority to apply for this permit, that the application is correct including the contractor information and signatures, 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 Owner or Agent: [Signature] Date: _____

HARNETT COUNTY PUBLIC UTILITIES
CUSTOMER SERVICE APPLICATION

8/31/07, 8:48:32

USER ID JDAVIS

NAME MERCHANT, WILLIE & KERI
ADDRESS 125 FLORENCE DR
CAMERON NC 28326

CUSTOMER ID 125059
OLD ACCOUNT NUMBER

16561

EXEMPT TAX NO PENALTY NO
CASH ONLY NO

SERVICE ADDRESS 125 FLORENCE DR
CYCLE/ROUTE 99 00
LOCATION ID 86301
09

INITIATION DATE 8/31/07
JURISDICTION HARNETT COUNTY
INSIDE UNITS 1.00
CLASS RESIDENTIAL
SECTION UNKNOWN
SOCIAL SECURITY NUMBER *****0730
DRIVERS LIC NUMBER *****8926
DOING BUSINESS AS
ALT CUSTOMER ID 2

WATER METERED METERED RATE
UNITS 1.00

SERVICE ORDERS

163140 IT INSTALL TAP WA REQUEST DATE 8/31/07

MISC. INFORMATION

SS# *****0730
SPOUSESSN 088746936
DRV L # *****8926
EMPLOYER SELF-LANDSCAPING
EMPADDRESS 109 BRAINERD AVE FAYETTIVILL
WORK PHONE SPOUSE WORK 9102731590