

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

**Part I - Owner Information:**

Home Owner Information (To be completed by owner of the manufactured home)

Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Daytime Phone: ( ) \_\_\_\_\_

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: NC Zip: 28303  
Signature: [Signature]
- B. Electrical Contractor Company Name: TERESA CLEGG State Lic# \_\_\_\_\_  
Phone: 892 8731 Address: 204 MASON DR. [Signature]  
City: EWING State: NC Zip: 28339  
Signature: Teresa Clegg
- C. Mechanical Contractor Company Name: TERESA CLEGG State Lic# \_\_\_\_\_  
Phone: 892 8731 Address: 204 MASON DR.  
City: EWING State: NC Zip: 28339  
Signature: Teresa Clegg
- D. Plumbing Contractor Company Name: TERESA CLEGG State Lic# \_\_\_\_\_  
Phone: 892 8731 Address: 204 MASON DR.  
City: EWING State: NC Zip: 28339  
Signature: Teresa Clegg

**Part III - Manufactured Home Information**

New  Used

Singlewide  Doublewide  Triplewide

Model Year: \_\_\_\_\_ Size:  X

Private Property  Manufactured Home Park

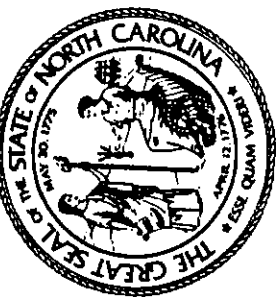
Park Name: \_\_\_\_\_ Lot Number: \_\_\_\_\_

Directions to site or Manufactured Home Park from Lillington: \_\_\_\_\_

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.

Teresa Clegg  
Signature of Owner or Agent

\_\_\_\_\_  
Date



New owner Teresa Cross 19924 A

# MOBILE HOME MOVING PERMIT

COUNTY OF Harrick  
STATE OF NORTH CAROLINA  
Permission is granted to:

PERMIT NUMBER N<sup>o</sup> 1475  
Date 6-2-08

Owner Roy Godfrey PO Box 159 Olivia NC 28368  
Address

Carrier Choo's MH Movers PO Box 35595 Fayetteville NC  
Address

to move the following mobile home:  
Champion 1984 24 x 52 3532  
Make Model Size Serial Number

From: 80 Twin Ln Oliva NC 28368  
Address

To: 2260 Bird Mill Rd Linden NC  
Address

This permit is issued in accordance with the provisions of G. S. 105-316.1 through G.S. 105-316.8 of the general Statutes of North Carolina.

This permit shall be conspicuously displayed near the license tag on the rear of the mobile home at all times during its transportation.

THIS PERMIT VALID FOR THIS MOVE ONLY.

W. Reynolds  
County-City Tax Collector