

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

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: 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: WILLIE DON BONE Address: 3039 OLD STAGE RD
City: COATS State: NC Zip: 27521 Daytime Phone: (919) 753 6519

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

- A. Set-Up Contractor Company Name: CHOO'S MH. TRANSIT State Lic# 3532
Phone: 910 860 8787 Address: 4209 BRAGG BLVD
City: FAYETTEVILLE State: NC 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: NC Zip: 28355
Signature: [Signature]
- C. Mechanical Contractor Company Name: TRIANGLE HTA State Lic# 25537
Phone: 919 669 Address: PO BOX 1400
City: COATS State: NC Zip: 27521
Signature: [Signature]
- D. Plumbing Contractor Company Name: AFFORDABLE PLUMBING State Lic# 17435 P
Phone: 910 497 6331 Address: 109 5TH 4TH ST
City: SPRING LAKE State: NC Zip: 28390
Signature: [Signature]

Part III - Manufactured Home Information

New Used

Singlewide Doublewide Triplewide

Model Year: 2008 Size: 16 X 76

Private Property Manufactured Home Park

Park Name: WALKER RD Lot Number: _____

Directions to site or Manufactured Home Park from Lillington: 401 5TH TR McNEILL-HOBBS RD
FOR .2 MILE T/L WALKER RD FOR 2.8 MILES TR ON WALKER RD SR 2039
FOR 1.5 MILE TO LOT ON LEFT

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]
Signature of Owner or Agent

7/7/08
Date

CHANGE OF PLUMBING
CONTRACTOR 9/18/08

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: 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: WILLIE DION BLUE Address: 3039 OLD STAGE RD

City: COATS State: NC Zip: 27521 Daytime Phone: (919) 753 6519

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

A. Set-Up Contractor Company Name: CHOO'S MH. TRANSIT State Lic# 3532

Phone: 910 860 8787 Address: 4209 BRAGG BLVD

City: FAYETTEVILLE State: NC 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: NC Zip: 28355

Signature: [Signature]

C. Mechanical Contractor Company Name: TRIANGLE HTA State Lic# 25537

Phone: 919 669 Address: PO BOX 1400

City: COATS State: NC Zip: 27521

Signature: [Signature]

D. Plumbing Contractor Company Name: JACKIE'S PLUMBING State Lic# 06739

Phone: 910 521 9052 Address: 1619 PHILADELPHUS RD PEMBROKE

City: PEMBROKE State: NC Zip: 28372

Signature: [Signature]

Part III - Manufactured Home Information

New Used

Singlewide Doublewide Triplewide

Model Year: 2008

Size: 16 x 76

Private Property Manufactured Home Park

Park Name: WALKER RD Lot Number: _____

Directions to site or Manufactured Home Park from Lillington: 401 5TH T/R McNEILL-HOBBS RD
FOR .2 MILE T/L WALKER RD FOR 2.8 MILES T/R ON WALKER RD 9/2039
FOR 1.5 MILE TO LOT ON LEFT

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]
Signature of Owner or Agent

9-18-08
Date

ENTRAGED 9/19/08

CHANGE OF PLUMBING
CONTRACTOR 9/18/08

COLIN WATSON

CHOO CHOO HOMES

RE PERMIT APPLICATION # 08-50020455
FOR MANUFACTURED HOME

2468 WALKER RD, LINDEN, NC 28356

I AM CHANGING THE PLUMBING CONTRACTOR
ON THIS APPLICATION FROM
AFFORDABLE PLUMBING OF SPRING LAKE

TO
JACKIE'S ^{PLUMBING} OF PEMBROKE NC.

THANKS! 

9-18-08.

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

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: 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: WILLIE DON BURE Address: 3039 OLD STAGE RD
City: COATS State: NC Zip: 27521 Daytime Phone: (919) 753 6519

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

- A. Set-Up Contractor Company Name: CHOO'S MH. TRANSIT State Lic# 3532
Phone: 910 860 8787 Address: 4209 BRAGG BLVD
City: FAYETTEVILLE State: NC 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: NC Zip: 28355
Signature: [Signature]
- C. Mechanical Contractor Company Name: TRIANGLE HTA State Lic# 25537
Phone: 919 669 Address: PO BOX 1400
City: COATS State: NC Zip: 27521
Signature: [Signature]
- D. Plumbing Contractor Company Name: AFFORDABLE PLUMBING State Lic# 17435 P1
Phone: 910 497 6331 Address: 109 5TH 4TH ST
City: SPRING LAKE State: NC Zip: 28390
Signature: [Signature]

Part III - Manufactured Home Information

New Used

Singlewide Doublewide Triplewide

Model Year: 2008 Size: 16 X 76

Private Property Manufactured Home Park

Park Name: WALKER RD Lot Number: _____

Directions to site or Manufactured Home Park from Lillington: 401 5TH T/R MCNEILL-HOBBS RD
FOR .2 MILE T/L WALKER RD FOR 2.8 MILES T/R ON WALKER RD 9/R 2039
FOR 1.5 MILE TO LOT ON LEFT

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]
Signature of Owner or Agent

7/7/08
Date

*Effective July 1, 2004, a Harnett County Tax Department Moving Permit must be purchased before a Set Up Permit will be issued.