Harnett County Central Permitting PO Box 65 Lillington, NC 27546 Telephone Number

910-893-4759 Application for Manufactured Home Set-Up Permit Please fill in each part completely: Part I - Home Owner Information (To be completed by owner of the manufactured home) Address: Zip: <u>27330</u> Daytime Phone: () 9,19 Landowner Information (To be completed by landowner, if different than above) Name: City: (Ameron Zip: 2832(Daytime Phone; () 9 19 498 220 4 Part II - Contractor Information (To be completed by Contractors or Homeowner, if applicable) Set-Up Contractor Company Name: MARKS Mobile Home Set-up State Licit 3441 Phone # 499-27.68 Address: 1258 City: CAMEADA Signature: B, Blectrical Contractor Commany Name Phone # 4/99-100 1 Address Signature: Mechanical Commeter Company Name: C. Phone # Address: City: 5AN Signature: Kebecca Murph D. Plumbing Contractor Company Name Phone #910 .P43-5400 Address: City: Limbas Signature: Part III - Manufactured Home Information X New Used Model Year 07 Size: 76 Singlewide <u> Doublwide</u> Private Property Manufactured Home Park Directions to sile or Manufactured Home Park from Lillington: left on to 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

02/01

Signature of Owner or Agent

* Each section below to be filled out,by · whomever performing work. Must be owner or licensed contractor. Address, company name & phone must match information on license.

Application # 07 5001 6984

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546

Telephone Number 910-893-7525 www.harnett.org

Application for Building and Trade Permit

Owner's Name: Pine C-Paile Dell.	Date	3-14-07
		ne: 498-2204
Address: 622 BuffA/6 LAKE		ic
Directions to job site from Lillington:		
		19 PH
Subdivision: NAtures Cross ROA	dsLot:	<u> 19 P</u> F-
Construction Type: (Please Check)	Building Use: (Please Check)	
New Moved House	<u></u>	ommercial
Renovation Addition Other		lulti-Family
Total Project Cost: 8 00 Description of P	roposed Work: 8×12'	BRICK Stoop
General C	Contractor Information	. i0.
Heated SF Crawl Space ()	Building Construction Cost \$	30
Unheated SF 9 6 Slab (4	Acres Disturbed	Stories/
Stouaux Son's Constr.	498-2204	<u> </u>
Building Contractor's Company Name	Telephone	
101 Wimble day Dave.		29/86
Address		License #
Jan N. Stand		
Signature of Owner/Contractor/Officer(s) of Corp	poration - Must sign back of form &	workers comp
<u>Electric</u>	al Permit Information	
TS Pole: Yes () No () Underground () A. (
Permanent Service: Underground () Overhe	ad () Service Size:	Amps
remaining out too. Stratig. Same (7	4	
Electrical Contractor's Company Name	Telephone	
Electrical Contractor o Company Hame	·	
Address		License #
71001000		
Signature of Officer(s) of Corporation	-	
Mechani	cal Permit Information	
Description of Work	Mechanical	Cost \$
Number of Units Type System _	Mechanical	C03t Ψ
- None	Telephone	
Mechanical Contractor's Company Name	relephone	
		License #
Address		LICETISE #
	_	
Signature of Officer(s) of Corporation	ng Permit Information	
Description of Work		
Number of Baths	Plumbipp Cost \$	
	$/\sim$ $^{\prime\prime}$	
Plumbing Contractor's Company Name	Telephone	
. Idinonia contractor o company manne	·	
Address		License #
Audi 699		
Signature of Officer(s) of Corneration	Λ ΛΔ.	, no.
Signature of Officer(s) of Corporation Insulation Permit Informatio	n Residential () Other ()	Not Required ()
	<u> </u>	
Insulation Contractor's Company Name & Addre	ess	Telephone
and an experience of the control of		

Application # 07500 16984

Affidavit for Worker's Compensation N.C.G.S. 87-14

The undersigne	d applicant for Building Permit # <u>6750016984</u> being the:	
	General Contractor Owner	
	Officer/Agent of the Contractor or Owner	
Do hereby confi the work set fort	irm under penalties of perjury that the person(s), firm(s) or corporation(s) performing h in the permit:	
	Has/have three (3) or more employees and has/have obtained workers' compensation insurance to cover them.	
	Has/have one (1) or more subcontractors(s) and has/have obtained workers' compensation insurance to cover them.	
	Has/have one (1) or more subcontractors(s) who has/have their own policy of workers' compensation insurance covering themselves.	
	Has/have not more than two (2) employees and no subcontractors.	
While working on the project for which this permit is sought it is understood that the Central Permitting Department issuing the permit may require certificates of coverage of worker's compensation insurance prior to issuance of the permit and at any time during the permitted work from any person, firm or corporation carrying out the work.		
Firm Name:	Pine Grae Dev.	
Sign/Title:	Jan Slovel - Consta Man	
Date:3-\	44-07	



Date:

March 14, 2007

Memo to:

Harnett County Central Permitting

From:

Pine Grove Development Corp.

RE:

Lot #19, Nature's Crossroads, Phase II - Harnett County, NC

Application # _07-50016984_____

We certify that the manufactured home to be place on the above noted lot is a 2007 model Champion home.

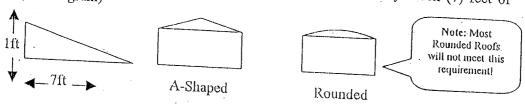
James D. Stovall Construction Manager - PGDC

RA-20R Criteria Certification

	contesta Cermication
I, JAMES Stoupy	understand the state
(Print Name)	, understand that because I'm located in a RA-20R
Zoning District and wish to place	2. Dianufa di

Zoning District and wish to place a manufactured home in this district I must meet the following criteria before I will be issued a certificate of occupancy for this home.

The home must have a pitched roof, for a manufactured home, whether A-shaped or rounded, which has a minimum rise of twelve (12) inches for every seven (7) feet of



- 2. The home must be underpinned, the underpinning must be installed in good workmanship-like manner along the entire base of a manufactured home, except for ventilation and crawl space requirements, and consisting of the following: metal with a baked -on finish of uniform color; a uniform design and color vinyl; or brick, cinder block, and stone masonry as well as artificial stone masonry.
- 3. The homes moving apparatus removed, underpinned or landscaped.

Procedures and Guidelines for Manufactured Home Inspections

- 1. All pertinent applications and information must be filled out completely at central permitting in order to start the process, this includes the following:
 - > County of Harnett Land Use & Environmental Health Application
 - > Site Plan (must be to scale)
- 2. Then you must call Environmental Health (910-893-7547) to receive a confirmation number in order to set up environmental inspection. (This is a 7-10 day process)
- After the environmental inspection takes place then you must call central permitting (910-893-4759) to ensure that the environmental health permit has been issued.
- 4. Then you must return to central permitting to purchase manufactured home set-up permit and land use permit. (See Harnett County fee schedule for all applicable fees.)
- 5. After the Manufactured Home is installed in accordance with the State of North Carolina Regulations for Manufactured/Mobile Homes, 1995 Edition, the applicant must call the Harnett County Inspections Department (910-893-7527) for set-up inspection. This will be the first of two separate inspections. Note: Do not install underpinning until this inspection is complete!
- 6. Complete all zoning requirements listed above and call the Harnett County Planning Department for final inspection (910-893-7525). Once this inspection is completed and all zoning requirements have been met, a final Certificate of Occupancy will be issued for the home and the power may be turned on.

All reinspections may subject you to reinspection fees!