Application # 095002/

Harnett County Central Permitting

PO Box 65 Lillington, NC 27546

Telephone Number: 910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Application for Manufactured Home Set-Up Permit

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`	\	·	(Please fill	out each part completely	· <u>)</u>	
2		-Owner Information: Owner Information (To	be completed by o	wner of the manufacti	ured home)	
<u> </u>	-3	Kenneth + Anneth			_	_
₹₹	Z	0				· ^ · ·
	2 : -				time Phone:4 <u>9</u> (9) <u>79 (</u>	0-0618
-		wner Information (To be				
+	Name	: Kenneth Johns	w	Address: 142 L	ake Ohine Dr	
_	City: _	Benson	State: <u>~LC</u>	Zip: <u>2750Y</u> Dayl	time Phone: <i>9/9<u>/</u>79<u>/</u></i>	0-0612
	Part I	I – Contractor Informat	ion (To be complete	ed by Contractors or Hon	neowner, if applicable.	•
	A.	Set-Up Contractor C	.Name, address ompany Name	& phone must match inf	ormation on license)	
		Phone: 919-894-	8038 Addre	ss: Havilla A	C.L.	
		City: De 1501	State:	Zip:	27504	
		Setup Signature:	ell Hm		State Lic#_	<u> 2859</u>
	B.	Electrical Contracto	company Name:	Hush Smith	Flechic Go	-
		Phone: <u> </u>	<u> P </u>	ss: 8/7 Men	1) Street	
		City: Dunn	-11/		28334	
		Electrician's Signature	- 4		State Lic#	1 1
	Ç.	Mechanical Contract	or Company Nam	e:		·
$\mathcal{A}($	\mathcal{V}	Phone:	Addre	ss:	$\overline{}$	
$\langle h_c \rangle$		/eily:	State	Zip:		
11/	5/	HVAC Signature:		0-2 1/4	State Lic#	aulto
<i></i>	D.	Plumbing Contracto	11. C(1)	- D A 1	Pay 204	MARIE
• •		Phone: Du A A	TJII Addre	N/ P	199775	<u>,,,, , , , , , , , , , , , , , , , , ,</u>
		City: Du /) /\ Plumber's Signature:	State:	1 Ostano Ca	State Lic#_	10266
		Flumber's Signature.	Ep Olivica.	7 7 11 1	Otate Lion	77200
	Part I	II – Manufactured Hom	e Information			
		Year: <u>76</u> Size:	•	Complete & follow z	zoning criteria sheet	
	Park N	Name: Old Mail	lane	Lot Number:	1	<u>. </u>
	intorma	by certify that I have the a ation and signatures, and requirements, and the H	that the construction	n or installation will conf	form to the applicable ma	anufactured home
	inform	ation has been provided th	at this permit could b	e revoked.		
		Canalla At	usor	_	4-17-0-9 Date	
		Signature of Home O			Date	

*Effective July 1, 2004, a County <u>Tax Department Moving Permit</u> must be provided before a Set Up Permit will be issued. It is purchased from the tax office of the county that the home is moved from. If the home is from a dealer, we need proof of year on the **Form 500** and if available, the serial number.

List of inspections and Egress requirements available upon request. Progress Energy customers must provide Premise Number.



mber	Serial number		Size	Model	Make
V13	NCFLT46AB03997CN13	NCFL	28X56	1996	CLAYTON
				le home:	to move the following mobile home:
			Address		Carrier
27504	NC	BENSON	1085 A AQUILLA RD		STATE MH MOVERS
4 304			Address		Owner
2000116080	200				Permission is granted to:
7/2009	Date 3/27/2009		Smithfield, N.C. 27577	LINA	STATE OF NORTH CAROLINA
PERMIT NUMBER 185 -2008	PERMIT NU		Johnston County Tax Collector		COUNTY OF JOHNSTON

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.

27504

BENSON

27521

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COATS

OLD MAIL LANE/FESTUS RD

<u>;;</u>

Address

172 TARHEEL RD Address

From:

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

Demnis C. Woodward
County-City Tax Collector

THIS PERMIT VALID FOR THIS MOVE ONLY.