

**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: TOM LASATER Address: 62 FOUR CORNERS LN  
 City: BROADWAY State: NC Zip: 27505 Daytime Phone: (910) 890 5113

Landowner Information (To be completed by landowner, if different than above)

Name: SAME Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Daytime Phone: ( ) \_\_\_\_\_

**Part II - Contractor Information** (To be completed by Contractors or Homeowner, if applicable. Name, address, & phone must match information on license)

A. **Set-Up Contractor Company Name:** CHRISTIAN M.H. MOVERS  
 Phone: 919 4996720 Address: 263 Little River Ln  
 City: SANFORD State: NC Zip: 27330  
 Setup Signature: [Signature] State Lic# 2367

B. **Electrical Contractor Company Name:** T&E Electric of Sanford  
 Phone: 499-2828 Address: \_\_\_\_\_  
 City: Sanford State: N.C. Zip: 27332  
 Electrician's Signature: [Signature] State Lic# 15697-E

C. **Mechanical Contractor Company Name:** \_\_\_\_\_  
 Phone: \_\_\_\_\_ Address: \_\_\_\_\_  
 City: N/A State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 HVAC Signature: \_\_\_\_\_ State Lic# \_\_\_\_\_

D. **Plumbing Contractor Company Name:** Larry Matthews Plumbing  
 Phone: 893 4756 Address: 3294 Matthews Rd., OR 421 N.  
 City: Lillington State: N.C. Zip: 27546  
 Plumber's Signature: [Signature] State Lic# 10072

**Part III - Manufactured Home Information**

Model Year: 98 Size: 14 x 26 Complete & follow zoning criteria sheet

Park Name: N/A Lot Number: 2

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 Home Owner or Agent

8-07-09  
 Date

\*Effective July 1, 2004, a County Tax Department Moving Permit 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.



09.50022612

# MOBILE HOME MOVING PERMIT

COUNTY OF HARNETT  
STATE OF NORTH CAROLINA

PERMIT NUMBER NO 0845  
Date 7-2-2009

Permission is granted to:

Owner Thomas Foster Address Box Four Coopers Dr. Bradleyville  
Carrier Christians MH Movers Address 544 Golden Hill Dr. Shafer NC 27332  
to move the following mobile home:

Make 1998 Fleetwood Model 14x80 Size NCFLV41438465013 Serial Number

From: 520 Fire Ave RD Bunklevel NC 28333 Address

To: 28 Johnston Rd Pillington, NC 27544 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.

P. Bradford  
County-City Tax Collector

THIS PERMIT VALID FOR THIS MOVE ONLY.