

## AMY B. KINLAW Chief of Assessment and Collections

TAMI K. BOTELLO Chief of Real Estate and Mapping

## OFFICE OF THE TAX ADMINISTRATOR

Courthouse • 5th Floor - Suite 530 • P.O. Box 449 • Fayetteville, North Carolina 28302-0449 (910) 678-7507 • Fax: (910) 678-7588

MOBILE	H O M E M	OVING	PERMIT				
Date: February 8, 2017	Current Listing	Owner: <u>CROS</u>	BY, EVERETTE LEE				
County of Cumberland State of North Carolina	Permit No.: <u>C-6</u> Agent: <u>Mary Carter</u>						
Permission is granted to the following person(s) to move the mobile home identified below.							
	Name: CROSBY, EVERETTE LEE Phone: (910) 309-8790						
Address: PO BOX 280, BUNNL		П на П	Durchasa Data: 11/18/16				
Are you the current owner of the mobile home? Yes ☑ No ☐ Purchase Date: 11/18/16							
Mobile Home Carrier							
Name/Company: WILLIE KING Address: PO BOX 353, FAYETTEVILLE, NC 28302 (PH 910-988-0302 / 822-5201)							
Property Description							
Manufacturer	Year	Size	VIN				
CORO	1997	14X76	NCFLT41A462695CO12				
Current Location: 2920 LEWIS	CIRCLE, SPRING L	AKE, NC 2839	0				
Location Moving To: 2026 NUT County: HARNETT	GRASS RD., BUNN	LEVEL, NC 28	323				
This permit is issued in accordar through §105-316.8.	nce with the provisio	ns of North Car	olina General Statute §105-316.1				
This permit shall be conspicuous all times during transportation.	sly displayed near th	e license plate	on the rear of the mobile home at				
PERMIT VALID FOR THIS MOVE	ONLY!						
a cross							
Joseph. Com							

Joseph R. Utley, Jr.

**Cumberland County Tax Administrator** 

## Application #\_ 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

(Please fill out each part completely)

	- <b>Owner Informa</b> Owner Informati	<b>ation:</b> ion (To be completed by o	wner of the man	ufactured home)
Name:	Everette	Crosby	Address: PO	BOX 280
City: 🞉	Bunnlevel	State: <i>N.C.</i>	Zip: <u>28323</u>	_ Daytime Phone: (9/0 <u>309-8790</u>
Landov	vner Informatior	n (To be completed by land	downer, if differe	nt than above)
Name:			Address:	
City:		State:	Zip:	_ Daytime Phone: ( )
Part II	- Contractor In	nformation (To be complete		
Α.		actor Company Name:	$\mathcal{O}$	tch information on license)
	City:	State:		_ Zip:
В.	Electrical Cor	ntractor Company Name:	00	Nev
	Phone:	Addres	ss:	
	City:	State:		_ Zip:
	State Lic#	Email:		ner
C.				
	Phone:	Addre	ss:	
				_ Zip:
	State Lic#	Email:		
D.	Plumbing Co	ntractor Company Name:	$ \circ \circ \circ$	
	Phone:	Addre	ss:	
	City:	State:	_	_ Zip:
	State Lic#	Email:		
Part III	I – Manufacture	ed Home Information		
Model	Year: 1997	Size: 14 x 7 4	Complete & fo	llow zoning criteria sheet
Park N	lame:		Lot Nu	mber:
informa	ation and have ob tion will conform nce. I understan	otained their permission to p	urchase these per tured home set-u	the application is correct including the contractor rmits on their behalf, and that the construction or p requirements, and the Harnett County Zoning tion has been provided that this permit could be
6.,	arratte 14	as some		2-4-17
200	Signature of F	Home Øwner or Agent	-	Date

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

**SETUP** 

<sup>\*</sup>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.

P.O. BOX 65 LILLINGTON, NC 27546 For Inspections Call: (910) 893-7525 Fax: (910) 893-2793 Bldg Insp scheduled before 2pm available next business day. Application Number . . . . . 17-50040595 Date 2/09/17 Property Address . . . . . . 94432 \*UNASSIGNED Subdivision Name . . . . . Property Zoning . . . . . . PENDING Contractor Owner -----\_\_\_\_\_\_ OWNER CROSBY EVERETTE L PO BOX 280 NC 28356 LINDEN Applicant -----CROSBY EVERETTE LEE PO BOX 280 BUNNLEVEL NC 28323 (910) 309-8790 Structure Information 000 000 14X80 3BDR SWMH - 15X20 DECK Flood Zone . . . . . . . FLOOD ZONE X . # BEDROOMS 300000.00
MOBILE HOME YEAR 1000000.00
PROPOSED USE SWMH
SEPTIC - EXISTING? NEW TANK
WATER SUPPLY COUNTY Other struct info . . . . # BEDROOMS \_\_\_\_\_\_ Permit . . . . . LAND USE PERMIT Additional desc . .

Phone Access Code . 1178227

Issue Date . . . 2/09/17 Valuation . . .

Expiration Date . . 8/08/17 Permit . . . . . MANFACTURED HOME PERMIT 0 Special Notes and Comments T/S: 01/20/2017 11:27 AM JBROCK ----NUTGRASS RD LOT DOWN DIRT DRIVE NEXT TO 874

HARNETT COUNTY CENTRAL PERMITTING

HARNETT COUNTY CENTRAL PERMITTING P.O. BOX 65

LILLINGTON, NC 27546
For Inspections Call: (910) 893-7525 Fax: (910) 893-2793
Bldg Insp scheduled before 2pm available next business day.

7		17 E0040595	Page Date 2	2 /09/17
Proper PARCEI Applic Subdiv	rty Addres L NUMBER Cation des Vision Nam	cription CP MANUFACTUR	GNED -009901-	
		Required Inspections		
Seq	Phone In Insp# Co	sp de Description	Initials	Date
Permit	type	LAND USE PERMIT		
999 999	818 Z8 820 Z8	18 PZ*ZONING INSPECTION 20 PZ*ZONING/FINAL INSPECTION	N	_/_/_
Permit	type	MANFACTURED HOME PERMIT		
10 20 20 30 999 999	501 T5 818 Z8 814 A8 507 T5 H8 H8 307 P3	18 PZ*ZONING INSPECTION 14 ADDRESS CONFIRMATION 07 R*MANUFACTURED HOME FINAL 24 ENVIR. OPERATIONS PERMIT 28 ENVIRO. WELL PERMIT	WALL	