

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: Ronald L. Cockman Address: 9515 NC 210 S.  
City: Bunnlevel State: NC Zip: 28323 Daytime Phone: (910) 751-0791

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

Name: \_\_\_\_\_ 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: Ronald L. Cockman Sr.  
Phone: \_\_\_\_\_ Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
State Lic# \_\_\_\_\_ Email: \_\_\_\_\_
- B. **Electrical Contractor** Company Name: Ronald L. Cockman Sr.  
Phone: \_\_\_\_\_ Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
State Lic# \_\_\_\_\_ Email: \_\_\_\_\_
- C. **Mechanical Contractor** Company Name: Ronald L. Cockman Sr.  
Phone: \_\_\_\_\_ Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
State Lic# \_\_\_\_\_ Email: \_\_\_\_\_
- D. **Plumbing Contractor** Company Name: Ronald L. Cockman Sr.  
Phone: \_\_\_\_\_ Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
State Lic# \_\_\_\_\_ Email: \_\_\_\_\_

**Part III – Manufactured Home Information**

Model Year: 1978 Size: 14 x 67 **Complete & follow zoning criteria sheet**

Park Name: \_\_\_\_\_ Lot Number: \_\_\_\_\_

I hereby certify that I have the authority to apply for this permit, that the application is correct including the contractor information and have obtained their permission to purchase these permits on their behalf, 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.

Ronald L. Cockman Sr.  
Signature of Home Owner or Agent

April 18, 2017  
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.*

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.

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Application Number . . . . . 17-50040942 Date 4/18/17  
Property Address . . . . . 1187 LASATER RD  
PARCEL NUMBER . . . . . 01-0525- - -0075- - -  
Application type description CP MANUFACTURED HOME RA20R/RA20M CRITERI  
Subdivision Name . . . . .  
Property Zoning . . . . . PENDING

Owner

Contractor

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COCKMAN RONALD L & G

-----  
OWNER

9515 NC 210 SOUTH  
BUNNLEVEL NC 28323  
(910) 893-5224

Applicant

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COCKMAN RONALD  
9515 NC 210 S  
BUNNLEVEL NC 28323  
(910) 751-0791

--- Structure Information 000 000 14X70 2 BR NO DECKS OR PORCHES  
Flood Zone . . . . . FLOOD ZONE X  
Other struct info . . . . . # BEDROOMS 2.00  
MOBILE HOME YEAR 1978.00  
PROPOSED USE SWMH  
SEPTIC - EXISTING? EXISTING  
WATER SUPPLY COUNTY

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Permit . . . . . LAND USE PERMIT

Additional desc . . . . .  
Phone Access Code . . . . . 1187467  
Issue Date . . . . . 4/18/17 Valuation . . . . . 0  
Expiration Date . . . . . 10/15/17

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Permit . . . . . MANUFACTURED HOME PERMIT

Additional desc . . . . .  
Phone Access Code . . . . . 1187442  
Issue Date . . . . . 4/18/17 Valuation . . . . . 0  
Expiration Date . . . . . 4/18/18

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Subdivision Name . . . . .			
Property Zoning . . . . .	PENDING		

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
			Permit type . . . . . LAND USE PERMIT		
999	818	Z818	PZ*ZONING INSPECTION	_____	__/__/__
			Permit type . . . . . MANUFACTURED HOME PERMIT		
10	501	T501	R*MOBILE HOME FOUND./ M. WALL	_____	__/__/__
10	814	A814	ADDRESS CONFIRMATION	_____	__/__/__
20	818	Z818	PZ*ZONING INSPECTION	_____	__/__/__
30	507	T507	R*MANUFACTURED HOME FINAL	_____	__/__/__