

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)

Part I - Owner Information:

Home Owner Information (To be completed by owner of the manufactured home)

Name: Charles Brandon Bullette Address: 207 Bultion Acres dr

City: Cameron State: N.C. Zip: 28326 Daytime Phone: (910) 723-5912

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: Owner

Phone: Address:

City: State: Zip:

State Lic# Email:

B. Electrical Contractor Company Name: Owner

Phone: Address:

City: State: Zip:

State Lic# Email:

C. Mechanical Contractor Company Name: Owner

Phone: Address:

City: State: Zip:

State Lic# Email:

D. Plumbing Contractor Company Name: Owner

Phone: Address:

City: State: Zip:

State Lic# Email:

Part III - Manufactured Home Information

Model Year: 1998 Size: 14 X 40

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.

Signature of Home Owner or Agent

Date 5-22-17

*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 Tax Assessor
 Individual Personal Property Listing
 Mailing Address:
 305 W Cornelius Harnett Blvd, Ste.
 101
 Lillington, NC 27546

**TO AVOID PENALTY, RETURN SIGNED
 COMPLETE LISTING BY JANUARY 31st
 TAX YEAR: 2017**



Office Location:
 305 W Cornelius Hamett Blvd, Ste. 101
 Lillington, NC 27546
 Phone - 910-893-7520 Fax - 910-814-4017
 Website: www.harnett.org/tax



FOR DEPARTMENT USE ONLY	ABSTRACT#	TAX JURISDICTION MUNICIPALITY	PENALTY %	PRICE
	0002256782-IND	CTY, FR16, RS60	10	

A	Ownership Information	Additional Information
BURNETTE, CHARLES BRANDON PO BOX 505 OLIVIA NC 28368		Tax Relief: NONE Parcel number: Owner ID: 119827 Phone number: NOTES:
B	Physical Location of personal property : 250 UNWINDING LN CAMERON NC 28326	

C Listed Property: Below is personal property listed in your name for which you will be billed in 2017.
 PLEASE SEE INSTRUCTIONS

Property Type	Description of Personal Property	Property ID(system)
Manufactured Home	1998 SENA 14X80	1741825

D Personal Property: Please list with complete descriptions, any properties in your possession, custody or control which are not listed above. Property Types include: Aircraft, Watercraft, pleasure craft, Manufactured Home, Motor Vehicle, Boat, Boat (licensed (caption) vehicles, leased vehicles, or vehicles for hire.

Property Type	Model Year	Make	Model	Length (width if applicable)	Description (Detail)	PROPERTY ID# (i.e. VIN#, Tail#, Registration #)

E AFFIRMATION -SEE INSTRUCTIONS

UNDER PENALTIES PRESCRIBED BY LAW, I HEREBY AFFIRM THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THIS LISTING, INCLUDING ANY ACCOMPANYING STATEMENT, SCHEDULE, AND OTHER INFORMATION IS TRUE AND COMPLETE.

Signature: Charles Burnett Date: 4-10-17 Printed Name: Charles Burnett
 Home Phone: 910723 5912 Business Phone: _____ Email Address: CBurnette74@yahoo.com

Date: 5-22-17

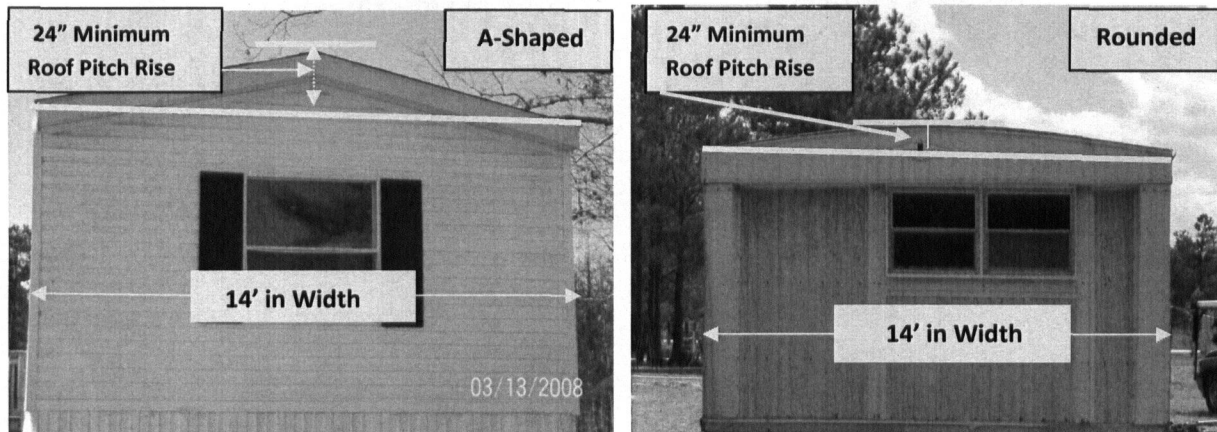
Application# _____

PROCEDURES AND GUIDELINES FOR MANUFACTURED HOME INSPECTIONS

RA-20R & RA- 20M Certification Criteria

I, Charles Bunette, understand that because I'm located in a **RA-20R** or **RA-20M** Zoning District and wish to place a manufactured home in this district I must meet the following criteria, verified by zoning inspection approval, before I will be issued a certificate of occupancy for this home.

1. The home must have a pitched roof, for a manufactured home, whether A-shaped or rounded, which has a minimum rise (measured at the center of the home) of twelve (12) inches for every seven (7) feet of total width of the home. (Example: A home measuring fourteen (14 ft.) in width must have a twenty four (24) inch rise as measured from the center of the roofline to the baseline of the roof.) (See Illustrations Below.)



Note: Most Rounded Roofs **Will Not** Meet The Roof Pitch Requirement As Illustrated. The Measurement From The Peak Of The Roof To The Base Line Of The Roof Must Be 12" For Every 7' Of Total Width Of The Home. (Ex: 14' Wide Home = 24" Roof Rise)

Continued.....

2. The home must be underpinned, consisting of a brick curtain wall or have galvanized metal sheeting, ABS or PBC plastic color skirting with interlocking edges, installed around the perimeter of the home. Skirting shall be consistent in appearance, in good condition, continuous, permanent, and unpierced except for ventilation and access.
3. The homes moving apparatus must be removed, underpinned, or landscaped. (See examples below.)



4. The home must have been constructed after July 1st 1976.

Chester Bunt

5-22-17

Signature of Property Owner / Agent

Date

- By signing this form the owner / agent is stating that they have read and understand the information on this form.

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.

Application Number	17-50041131	Page	2
Property Address	78425 *UNASSIGNED	Date	5/22/17
PARCEL NUMBER	09-9575- - -0148- -40-		
Application description . . .	CP MANUFACTURED HOME RA20R/RA20M CRITERI		
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	_____	___/___/___
999	820	Z820	PZ*ZONING/FINAL 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	_____	___/___/___
999		H824	ENVIR. OPERATIONS PERMIT	_____	___/___/___
999		H828	ENVIRO. WELL PERMIT	_____	___/___/___
999	307	P307	R*PLUMB WATER CONNECTION	_____	___/___/___