

## MOBILE HOME TAX PERMIT

COUNTY OF	ione		PERMIT NUMBER _	36 B			
STATE OF NORTH	CAROLINA		Date Kon St. 5-	22-17			
Permission is grant							
11 \ \ \ \	chael	87	Fsajah Ln	Linda NC 2835ce			
Owner		Address					
Chap Chap	Homes	5657	Brass Blid.	Fayetteville			
Carrier		Address					
to move the following	ng mobile home:			/ A -			
Hat	1997	26 Y)6_	H137644	GLR			
<b>Make</b>	Model	Size	다. Serial Numbe	P			
From: <u>2093</u>	Cran Creek	Rd. Comeron	100011				
. —	Address						
To: 87	fsaigh Ln.	Lindan M					
	Address	<del>-</del> ,	•				
This permit is issued in accordance with provisions of G.S. 105-316.1 through G.S. 105-316.8							

□ 10011 | 1101 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |

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of the General Statutes of North Carolina

during its transportation.

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

THIS PERMIT VALID FOR THIS MOVE ONLY.

## 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)

Home Own		ed by owner of the manufactured home)
Name: 🖊	lichael 3 Devin Au	try Address: 89 Isaiah Ln.
City:	inden State:	NC Zip: 28356 Daytime Phone: (119) 493-0365
		by landowner, if different than above)
Name: Ca	grolyn Adams Aci	try Address: 87 Isqiab La.
		NC Zip: 28356 Daytime Phone: (119 493-0365
	Nomo a	completed by Contractors or Homeowner, if applicable. ddress, & phone must match information on license)
A. Se	t-Up Contractor Company Na	me: Chao's Mobile Home Transit Inc
Ph	ione: (910) 850-6572	Address: 4209 Bragg Boulevard,
	,	State: <u>NC</u> Zip: <u>28303</u>
Sta	ate Lic#	Email:
		Name: Michael A. Antry
	none:	
Cit	ty:	State: Zip:
Sta	ate Lic#	Email:
C. Me	echanical Contractor Compar	ny Name: Michael A. Autry
Ph	none:	Address:
Cit	ty:	State: Zip:
Sta	ate Lic#	Email:
D. <b>Pi</b>	umbing Contractor Company	Name: Michael A. Autry
Ph	none:	Address:
Cir	ty:	State: Zip:
		Email:
Part III - N	Manufactured Home Informat	ion
Model Yea	ar: <u>/99 )</u> Size: <u>76</u> x <u>-26</u>	Complete & follow zoning criteria sheet
Park Name		Lot Number:
information installation Ordinance. revoked.	and have obtained their permiss	apply for this permit, that the application is correct including the contractor to purchase these permits on their behalf, and that the construction or nanufactured home set-up requirements, and the Harnett County Zoning incorrect or false information has been provided that this permit could be the sent of the part o

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

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<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 . . . . 17-50041209 Date 10/30/17 Application type description CP MANUFACTURED HOME RA20R/RA20M CRITERI Subdivision Name . . . . . Property Zoning . . . . . . PENDING Contractor Owner \_\_\_\_\_\_ AUTRY CHARLES A & CAROLYN A CHOO'S MOBILE HOME TRANSIT PO BOX 35595 87 ISAIAH LANE NC 28356 FAYETTEVILLE NC 28303 (910) 850-6572 LINDEN (910) 497-1545 Applicant AUTRY MICHAEL & DEVIN --- Structure Information 000 000 76X26 3BDR DWMH Flood Zone . . . . . . . . . FLOOD ZONE X
Other struct info . . . . # BEDROOMS 3000000.00 MOBILE HOME YEAR 1000000.00 PROPOSED USE DWMH SEPTIC - EXISTING? WATER SUPPLY EXT TANK COUNTY \_\_\_\_\_\_ Permit . . . . . MANUFACTURED HOME PERMIT Additional desc . . Phone Access Code . 1216605
Issue Date . . . 10/30/17 Valuation . . . .
Expiration Date . . 10/30/18 \_\_\_\_\_\_ Permit . . . . . LAND USE PERMIT Additional desc . .

Phone Access Code . 1216613

Issue Date . . . . 10/30/17 Valuation . . . .

Expiration Date . . . 4/28/18 0

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.								
Page 2 Application Number 17-50041209 Date 10/30/17 Property Address 87 ISAIAH LN PARCEL NUMBER 12-05440202 Application description CP MANUFACTURED HOME RA20R/RA20M CRITERI Subdivision Name Property Zoning PENDING								
Required Inspections								
Seq	Phone Insp#	_	Description	Initials	Date			
Permit type MANUFACTURED HOME PERMIT								
10 10 20 30 999	501 814 818 507 307	A814 Z818	ADDRESS CONFIRMATION PZ*ZONING INSPECTION R*MANUFACTURED HOME FINAL		/-/- /-/- /-/-			