Application # 17-50041 409

Harnett County Central Permitting
PO Box 65 Lillington NO 67-

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)

Name: EdGar Garcia			Address: 13	Address: 13802 Mcdougald 10		
City:	Sanford	State: <u>// </u>	zip:27332	_ Daytime Phone: 19 9 34	13 8537	
Land	owner Information (To	be completed by la	andowner, if differ	ent than above)		
City:		State:	Zip:	_ Daytime Phone: ()		
Part I	II – Contractor Inform			or Homeowner, if applicable.		
Α.	Set-Un Contractor	Name, addres	s, & phone must m	atch information on license)		
۸.				Lack Rd Cameron		
	() ()	The state of the s				
				_ Zip: 287.26		
_						
B.	Phone: Address:					
				_ Zip:		
C.	Mechanical Contractor Company Name: Ouner.					
	Phone:	Add	ress:	No. 1		
	City:	State	e:	_ Zip:		
	State Lic#	Ema	il:			
D.	Plumbing Contractor Company Name: Phone: Mc Sonald Address: 5321 Swarms Station Ro					
	Phone: Mc Son	ald Addi	ress: 5321	Swanns Station	Ro	
				Zip: 27332		
	State Lic# // 87	2 U Ema	il:			
	Julio 2.011					
Part I	II – Manufactured Ho	me Information				
Mode	Year: 97 Siz	e: <u>14 x 60</u>	Complete & fo	llow zoning criteria sheet		
Park I	Name:		Lot Nu	ımber:		
inform installa	ation and have obtained ation will conform to the ance. I understand that	their permission to applicable manufa	purchase these pe ctured home set-u	the application is correct including mits on their behalf, and that the prequirements, and the Harnet tition has been provided that this	e construction of tt County Zonin	

*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.

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

SETUP

LE COUNTY

Committed Today for a Better Tomorrow

MOBILE HOME

TAX PERMIT

STATE OF NORTH CAROLINA COUNTY OF LEE

PERMIT NUMBER:

DATE:

5288

MARISABEL BELTRAN OWNER

Acct.#

56 BAYBERRY LANE ADDRESS

DALE MARKS TRAILS CARRIER

1258 BLACK RD, CAMERON NC ADDRESS

CARRIER PHONE # 919-499-2768

919-770-4879

DAKWOOD MAKE

MODEL 1997

14X60

SERIAL NUMBER

HONC05526928

56 BAYBERRY LANE FROM Address

SANFORD

State

28326 HARNETT

COUNTY

CALBIN RD TO Address

CAMERON

State

COUNTY

This permit is issued in accordance with the provisions of G.S. 105-316.1 through 105-316.8 the General Statues of North Carolina.

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

D. FITZPATRICK Tax Collection Manager

Lee County

THIS PERMIT VALID FOR THIS MOVE ONLY.