Application # 17-5004

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:					
Name: Susana Lopez Santiago Address: 5355 Baileys Crosscoads Rd					
rianie.	2	EZ Sanna	Audiess.	all swings cre	251 atu 170
City: 🔟	Senson	State: / \C	Zip: <u># 15</u>	Daytime Phone: (4)	1615-3123
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 a ritione must match information on license) A. Set-Up Contractor Company Name: Cooper's Mobile Home Movers					
	Phone: 9/9-553-	OLE 000	1605. (22.7	Forest Oak	(s Or
	Phone: 9/9-553- City: Clayton	Stat	e: المركز	Zip: _ み75み7.	
	State Lic# 2499				
B.	Electrical Contractor C				
	Phone 919-397-4	362 Add	ress: <u>627 (</u>	naw ford Road	
	City: Coats	Stat	e: <u>NC</u>	zip: _ <i>Ə</i> 152.	
	State Lic# <u>20853</u>				
C.	Mechanical Contractor Company Name: Barry Joch Gadwin				
	Phone: 30-263-	2243 Add	ress: <u>625</u>	Honers Ln	Dunn
	City: Dun	State	e: <u>VC</u>	_ Zip: <u>フ&タアチ</u>	
	State Lic# 13 327				
D.	Plumbing Contractor C		/ L		
	Phone: 919464 5	,			• •
	City: Games P				
	State Lic# <u> </u>	Ema	ül:		
Part III – Manufactured Home Information					
Model Year: 1996 Size: 665 26 Complete & follow zoning criteria sheet					
Park Name: 5+B Subdivision Lot Number: 5					
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.					
Dayie	Y A lejandr O Sav Signature of Home Own	ohez La	pe Z	10/13/201	<u>'7</u>
	Signature of Home Own	er or Agent '	•	Date	

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

SETUP

^{*}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.



0587 27504 27527 2000182347 10/25/2017 Serial number 27504 B41922AB PERMIT # Date S 얼 CLAYTON ပ္ Š Johnston County Tax Collector P.O. Drawer 451 Smithfield, N.C. 27577 6169 OLD FAIRGROUND RD 227 FOREST OAKS DR BENSON BENSON Address Address 66.5X26 Size WILLIAM STEWART JR / DAVID LOPEZ Model **1551 JOHNSTON COUNTY RD** 6169 OLD FAIRGROUNDS RD COOPERS MOBILE HOME MOVERS 1996 to move the following mobile home: STATE OF NORTH CAROLINA Address COUNTY OF JOHNSTON Permission is granted to: BRIG Owner From: Make ٰڡ

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

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

Catherine D. Futch

County-City Tax Collector

THIS PERMIT VALID FOR THIS MOVE ONLY.