Home		Application # 10 500 24173 Harnett County Central Permitting PO Box 65 Lillington, NC 27546 Number: 910-893-7525 Fax 910-893-2793 www.harnett.org/permits Application for Manufactured Home Set-Up Permit						
Home		Number: 910-893-7525 Fax 910-893-2793 www.harnett.org/permits <u>Application for Manufactured Home Set-Up Permit</u>						
Home	- Ourser Informatio							
Home		(Please fill out each part completely)						
	I –Owner Information Owner Information	on: (To be completed by owner of the manufactured home)						
		ren Sharpe Address: PO BOX 1393						
City:		State: NCZip 28335 Daytime Phone: (710 985-1138						
		To be completed by landowner, if different than above)						
Name	9:	Address:						
City:		State: Zip: Daytime Phone: ()						
Dart I	ii – Contractor Info	rmation (To be completed by Contractors or Homeowner, if applicable.						
A.		Name, address, & phone must match information on license) or Company Name: <u>As</u> <u>When</u>						
	Phone:	Address:						
	City:							
	Setup Signature	R. La Shire State Lic#						
в.	Electrical Contractor Company Name: As Owner							
	Phone:	Address:						
	City:	State: Zip:						
	Electrician's Sign	ature: R. La State:Zip:State Lic#						
C.	Mechanical Con	tractor Company Name: AL Dunco						
	Phone:	Address:						
	City:	State: Zip:						
	HVAC Signature:	A Las Mul State Lic#						
D.	Plumbing Contr	actor Company Name: AS Owner						
	Phone:	Address:						
	City:	State: Zip:						
	Plumber's Signal	ture: R. Zan Mary State Lic#						
Part	III – Manufactured	Ũ						
	el Year:							
Park	Name:	Lot Number:						
inforn set-u	nation and signatures, p requirements, and t	the authority to apply for this permit, that the application is correct including the contractor, and that the construction or installation will conform to the applicable manufactured how the Harnett County Zoning Ordinance. I understand that if any item is incorrect or fals ted that this permit could be revoked.						

*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.

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	PERMIT # 00078 -2009/2010 Date 4/13/2010	2000140963 CLAYTON NC 27520	NN NC 28334	TANCKW60243GR101821A&B Serial number	27520	28334	5-316.8 of North Carolina.	Dennis C. Woodward	Man maker war 19
CAX PE	Johnston County Tax Collector P.O. Drawer 451 Smithfield, N.C. 27577	3522 JACK RD	2915 N. SPRING BRANCH RD. DUNN Address	24X60 I Size	CLAYTON	DUNN	This permit is issued in accordance with the provisions of G.S. 105-316.1 through G.S. 105-316.8 of North Carolina.	displayed near the home at all times	MOVE ONLY.
	COUNTY OF JOHNSTON STATE OF NORTH CAROLINA	Permission is granted to: CHARLES & MARIA HAWKINS	Certer Carrier to move the following mobile home:	TAYLOR 1980 Make Model	From: 3522 JACK RD. Address	To: BESIDE 2433 ASHE AVE. Address	This permit is issued in accordance with the	This permit shall be conspicuously displayed near the license tag on the rear of the mobile home at all times during its transportation.	THIS PERMIT VALID FOR THIS MOVE ON

	15 10 (p.1
J	in 15	10 0	8:42a	Tammy	Williams		910-892-4071		p.2
1.		/							
(-/						ication # 105002	34173	
7	T					ounty Central Perr 65 Lillington, NC 27			
Ŕ	<u>b</u>		Tele	phone Numb			793 www.harnett.org/pe	ermits	
ε				A	oplication for Ma	anufactured Home &	Set-Up Permit		
~	Λ	Part L	-Owner Info	- mation:	(Please fill	I out each part compl	etely)		
	J D		· · · ·		e completed by	owner of the manuf	factured home)		
\sim	J a	Name:	Laure	<u>n Sha</u>	rpe.	Address: PO	Bex 1393	<u>.</u>	
Ø	3	City: 🗋	Dunn		State: <u>NC</u>	_Zip 28335 1	Daytime Phone: 1999	85-1138	
Z	2	Lando	wner Informa	ation (To be d	completed by lar	ndowner, if differen	t than above)		
-2	_	Name:				_ Address:			_
2	Q	City: _	<u> </u>		_State:	Zip: I	Daytime Phone: ()		
	4	Part II	- Contracto	r Informatic			Homeowner, if applicable hinformation on license)	≥.	
L	14	Α.			mpany Name:	<u>61 mobile</u>	movers		
ر ک	Ы		~~~		CEC_ Addre	ess: <u>2915</u> N	iorth Sprin	g Branch	_Rel
ķ			City: <u>\</u>	inn	State:	NC -	Zip: <u>28334</u>		
う	· _		Setup Sign		m Bar	my for		c# <u>3070</u>	
1		8.	-			MARKE		LANE	2 S AVICE
ন্দ	à		111	- IN TOW	0857 Addre		Zio: 128328	sorre .	-
പ്	\sim			s Signature:	SALE		10 Blate Lic#	DDR/1	-
\sim	/	C.					e HROTING &		-
		•••					NOD FEE		-
~			City:		•		Zip: 21521		_
<u>S</u>		*	HVAC Sign	nature: 🧷	honlen I	2 gam	State Lic#	5537	_
-		D.			Company Name		·····		_
2			Phone:		Addre	ess:			-
1							Zip:		
~)		Plumber's	Signature:			State Li	c#	-
		Part III	- Manufact	ured Home	Information				
		Model	Year: 198	O Size:a	4 x 60	Complete & follo	w zoning criteria she	et	
		Park N	ame:	······································		Lot Numl	ber:		-
		informa set-up	tion and signative requirements,	atures, and th and the Hari	at the constructio	on or installation will on Ordinance. I un	application is correct in conform to the applicable derstand that if any item	a manufactured h	lome
		Zac	nel	ton &	the sector	_		-	
	Ċ	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Signature	Home Owr	ner or Agent		Date	-	
	*Effec	ctive July	1, 2004, a Co	unty <u>Tax Dep</u>	artment Moving Pl	Permit must be provide	ed before a Set Up Permi	will be issued. It	(is
				e of the county he serial numb		i moved trom. If the h	ome is from a dealer, we	need proof of yea	ir on ine

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

SETUP

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4/08

	9:45a Tammy Williams	910-892-4071	p.2
		Application # 105003411	13
	Harnett County (Central Permitting	
		logton NC 27546	
. 11	Telephone Number: 910-893-7525 Fa	x 910-893-2793 www.harnett.org/permits	
	-		
	Application for Manufact	tured Home Set-Up Permit	
	•	ach part completely)	
Part I -	Owner Information:	at the manufactured home)	
T Home	Owner Information: Owner Information (To be completed by owner		
ACCINE 1	Lauren Sharpe Ada	dress: <u>PO_Box_1395</u>	
Tyding:	DunnState: <u>NC</u> Zip:	WARDER BUTTER BARREN	124
City: T	Dunn State: <u>NC</u> Zip:	22005 Daytime Phone: (1) 120 1	
•,· <u> </u>		if different than above)	
Lando	wner Information (To be completed by landowr	Ter, il dillerent than above)	
Nomo	Ad	dress:	
name:			
Citv	State: Zip	: Daytime Phone: (_)	<u> </u>
Part II	- Contractor Information (To be completed by	Contractors or Homeowner, il applicable.	
	Name, address, & prosperiod Set-Up Contractor Company Name:		
Α.	Set-Up Contractor Company Name.	DRIE DIOVILLE SOCIONER	anch Rol
	Phone: <u>892 Pret</u> Address:	and North Springer	
	City: Dunn State: N	jcZip: <u></u> Zip:	
	Setup Signature: Jun B unfor	State Lic#_3	Die
	Setup Signature:		
В.	Electrical Contractor Company Name:		
	Address:		
	Phone:		
	City: State:		
	Electrician's Signature:	State Lic#	1
•	Mechanical Contractor Company Name:	TRIANSKE HEATING & AIR	<u>LNC</u>
С.	Phone: <u>919 669 -1764</u> Address:	PO PO INO DE DONE	St.
	Phone: 14 667 -1 2 69 Address.	70671	
	City: COA E State:		27
,	The law I have the	State LIC#	51
	Plumbing Contractor Company Name:	Mitch's Plumbing Service /	Mitchhave
D.	Plumbing Contractor Company Name	THINK PLICE PL	-
	Phone: 919-820-2378 Address:	654 Red Hill Church Rd	
	Ctate:	in C zip: _22334	
		Hargeline	14438
	Plumber's Signature:	No	
Part	III – Manufactured Home Information		
	1000 mild x100 C	omplete & follow zoning criteria sheet	
Mod	el Year: <u>1980</u> Size: <u>24 x 60</u> G	•	
_ (• La ve a v	Lot Number:	
Park	Name:		
Lhor	eby certify that I have the authority to apply for th	is permit, that the application is correct include	ng the contractor
1 1101	eby certify that I have the authority to apply for th mation and signatures, and that the construction o	or installation will conform to the applicable ma	incorrect or false
infor	mation has been provided that this permit could be	IGVURGU.	
	NT PI		
	revel for thege	Date	
A	Ellene Owner at Adont		
A	Signature of Home Owner or Agent July 1, 2004, a County <u>Tax Department Moving Perm</u>		the law and the In

Form 500 and if available, the serial number. List of inspections and Egress requirements available upon request. Progress Energy customers must provide Premise Number.

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