

Application # 1150026432

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: JEFFREY K. LUCAS Address: 109 SPRENG LANE

City: LILLINGTON State: N.C. Zip: 27546 Daytime Phone: (910) 591-8078

Landowner Information (To be completed by landowner, if different than above)

Name: ^{WILLIAM TROYA LUCAS} JUDY BROWN LUCAS, JEFFREY K. LUCAS Address: 1825 S. HURNER BLVD

City: SANFORD State: N.C. Zip: 27330 Daytime Phone: (910) 591-8078

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: SEA ATTACHED

Phone: _____ Address: _____

City: _____ State: _____ Zip: _____

Setup Signature: _____ State Lic# _____

B. **Electrical Contractor** Company Name: OWNER

Phone: _____ Address: _____

City: _____ State: _____ Zip: _____

Electrician's Signature: Jeff Lucas State Lic# _____

C. **Mechanical Contractor** Company Name: OWNER

Phone: _____ Address: _____

City: _____ State: _____ Zip: _____

HVAC Signature: Jeff Lucas State Lic# _____

D. **Plumbing Contractor** Company Name: OWNER

Phone: _____ Address: _____

City: _____ State: _____ Zip: _____

Plumber's Signature: Jeff Lucas State Lic# _____

Part III - Manufactured Home Information

Model Year 1997 Size: 14x66 **Complete & follow zoning criteria sheet**

SUBDIVISION Lot Number: 2
Park Name: _____

I hereby certify that I have the authority to apply for this permit, that the application is correct including the contractor information and signatures, 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.

Jeff Lucas
Signature of Home Owner or Agent

4-27-11
Date

*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.

Application # _____

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
Telephone Number: 910-893-7526 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: _____ Address: _____

City: _____ State: _____ Zip: _____ Daytime Phone: () _____

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:** CHRISTIANS WITH MOVERS

Phone: 919 770-9460 Address: 544 GOLDEN HILLS Ln

City: SARASOTA State: FL Zip: 34232 Email: _____

Setup Signature: Greg Christian State Lic# 2367

B. **Electrical Contractor Company Name:** _____

Phone: _____ Address: _____

City: _____ State: _____ Zip: _____ Email: _____

Electrician's Signature: _____ State Lic# _____

C. **Mechanical Contractor Company Name:** _____

Phone: _____ Address: _____

City: _____ State: _____ Zip: _____ Email: _____

HVAC Signature: _____ State Lic# _____

D. **Plumbing Contractor Company Name:** _____

Phone: _____ Address: _____

City: _____ State: _____ Zip: _____ Email: _____

Plumber's Signature: _____ State Lic# _____

Part III - Manufactured Home Information

Model Year: _____ Size: X **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 signatures, 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

**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.*



MOBILE HOME

TAX PERMIT

COUNTY OF Bladen

STATE OF NORTH CAROLINA

Permission is granted to:

David Whitehead
Owner

Davis Mobile Home Movers
Carrier

to move the following mobile home:

Oakwood 1997
Make Model

2139 Norris Rd Coarland, NC
Address

Jim Curien Rd Lillington NC 27546
Address

PERMIT NUMBER 1174

Date 1-18-11

2139 Norris Rd Coarland NC
Address

3345 Wayne Ln Fayetteville, NC
Address

14 X 66
Size

Serial number

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

THIS PERMIT VALID FOR THIS MOVE ONLY.

Alicia Mitchell
County-City Tax Collector



CASH RECEIPT

PREPAYMENT

BLADEN COUNTY

User ID : XAM Collected By : XAM
Today's Date : 1/18/2011 Transaction Date 1/18/2011 Number 523525
Tax Year : 2011 Taxpayer ID : 4501787
Parcel ID : BISHOP DAVID K ET UX SONYA
Property Location:

PO BOX 262
PITTSFIELD IL 62363-0262

Total Transaction Amt 198.27
MOVING PERMIT FOR 1997 OAKWOOD 14X66 MH