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 Owner Information: Home Owner Information (To be completed by owner of the manufactured home)
Name: Hrdrew Burgess Address: 4247 Spring Hill church rd
City: Lillington State: Nc Zip: 17546 Daytime Phone: 419 709-2343
Landowner Information (To be completed by landowner, if different than above)
Name: Jimmy F O'Quin Address: 4247 spring Hill church rd
City: Lilling ton State: NC Zip: 17546 Daytime Phone: (96) 890-5783
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: MPYZICS MOBILE NONE
Phone: 19-776-487 Address: 12 58 Block AD
City: CAMENON State: N.C. Zip: 8324
B. Electrical Contractor Company Name: Hose Electric Co Puc
B. Electrical Contractor Company Name: Hose Redro Co Tuc
Phone: 70-893-5302 Address: 2951 h Pougald Maa J
City: Lelleritury State: All Zip: 27546
Electrician's Signature: Light Hogge State Lic# 4424-4
C. Mechanical Contractor Company Name: 11cm 5/07
Phone: (9/9) 499-1757 Address: 3789 edwards rd.
City: Sanford State: No Zip: 27332
HVAC Signature: See attached State Lic# 225/3
D. Plumbing Contractor Company Name:
Phone: Address:
City: State: Zip:
Plumber's Signature: State Lic#
Part III – Manufactured Home Information
Model Year: 1996 Size: 76x 56 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.
26 July 11
Signature of Home Owner or Agent Date

*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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		wner of the manufactured home)				
Name:			_ Address:			
City: _	S	tate:	_ Zip:	Dayti	me Phone: ()
Landov	wner Information (To be com	pleted by land	downer, if diff	erent than	above)	
Name:			Address:			
City: _	s	tate:	Zip:	Dayti	me Phone: ()
Part II	- Contractor Information (To be complete	d by Contracto	ors or Hom	eowner, if appl	icable.
A.	Name, address, & phone must match information on license) Set-Up Contractor Company Name:					
	Phone:	Addres	se.			
	City:					
	Setup Signature:					
B.	Electrical Contractor Con					
	Phone:					
	City:					
	Electrician's Signature:				_State Lic#_	
X	Mechanical Contractor Company Name: Tim					
	Phone: 919-499-17					
	City: Sonecrol	State:	NC	Zip: _	2733	2
	HVAC Signature:	i	Win	lin	_State Lic#_	22513
D.	Plumbing Contractor Con	npany Name:_	<u> </u>			
	Phone:	Addres	s:			
	City:	State:		Zip: _		
	Plumber's Signature:				Sta	te Lic#
Down III	Manufactured Howe Info					
Part III	- Manufactured Home Info	rmation				
Model \	Year:Size:	X	Complete &	follow zo	ning criteria	sheet
Park Na	ame:		Lot N	Number:		
nformat set-up r	certify that I have the authori ion and signatures, and that the equirements, and the Harnett ion has been provided that this	e construction County Zoning	this permit, that or installation or Ordinance.	at the appl will confo	ication is corre	cable manufactured home
	Signature of Home Owner	or Agent			Date	

^{*}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.

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LEE COUNTY

Committed Today for a Better Tomorrow

MOBILE HOME

PAX PERMIT

STATE OF NORTH CAROLINA COUNTY OF LEE

PERMIT NUMBER:

5077B

DATE

7/26/2011

OWNER ANDREW BURGESS

125462 Acct.#

ADDRESS 4247 SPRING HILL CH.RD LILLINGTON,NC

CARRIER MARKS MH MOVERS

ADDRESS 1258 BLACK RD. CAMERON, NC

CARRIER PHONE # 7704879

MAKE BRIGADIER

MODEL 1996

26×56

SIZE

SERIAL NUMBER B42759A/B

FROM Address 474 ALLEN FARMS RD. City

SANFORD

State NC

- N County

TO Address **4247 SPRING HILL CH.RD**

LILLINGTON

NO

State

County HARNETT

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

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

THIS PERMIT VALID FOR THIS MOVE ONLY.

D.FITZPATRICK

Lee County **Tax Collection Manager**

LEE COUNTY

Committed Today for a Better Tomorrow

MOBILE HOME

TAX PERMIT

STATE OF NORTH CAROLINA COUNTY OF LEE

PERMIT NUMBER:

DATE

7/26/2011

OWNER ANDREW BURGESS

Acct.# 125462

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ADDRESS 1258 BLACK RD. CAMERON, NC

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