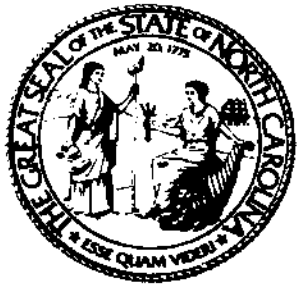


MOC



MOBILE HOME TAX PERMIT

COUNTY OF SAMPSON

PERMIT NUMBER 2724

STATE OF NORTH CAROLINA

Date 1/30/17

Permission is granted to:

Owner Dennis A Starling 9361 Toward Rd. Lenoir NC 28334
Address

Carrier Butts Mobile Home Movers 158 Forest Knolls Rd. Goldsboro NC 27534
Address

to move the following mobile home:

Make Champion Model 1996 Size 24x160 Serial Number 441023965439113AB

From: 2691 Camper Rd. Lenoir NC 28334
Address

To: Weeks Rd. Lenoir NC 28334
Address

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.

Amanda Beatts
Tax Collector (or Deputy Tax Collector)

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: DENNIS A + RACHEL L. STARLING Address: 836 Stewart Rd, DUNN, NC
City: DUNN State: NC Zip: 28334 Daytime Phone: 910 984-5272

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: Burt's Mobile Home Moves
Phone: 910-778-0690 Address: 158 Forest Knolls Rd
City: Goldensboro State: NC Zip: 27534
State Lic# 002293 Email: _____
- B. **Electrical Contractor** Company Name: Electrical Solutions of NC Inc
Phone: 910-892-2452 Address: 902 Friendly Rd, DUNN, NC
City: DUNN State: NC Zip: 28334
State Lic# 22659-L Email: electricalsolutionsnc@gmail.com
- C. **Mechanical Contractor** Company Name: Beasley's Heating & Air Inc
Phone: 919-894-4248 Address: 57 WC Beasley Ln, Coats
City: Coats State: NC Zip: 27521
State Lic# 9497 Email: _____
- D. **Plumbing Contractor** Company Name: Williford Plumbing
Phone: 919-915-0533 Address: 3084 Briggs Kids Rd
City: Roseboro State: NC Zip: 27504
State Lic# 30747 Email: x

Part III - Manufactured Home Information

Model Year: 1996 Size: 24X60 Complete & follow zoning criteria sheet

Park Name: Billy Glover Subdivision Lot Number: 11

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.

Dennis A Starling Rachel L. Starling
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.

HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

LILLINGTON, NC 27546

For Inspections Call: (910) 893-7525 Fax: (910) 893-2793

Bldg Insp scheduled before 2pm available next business day.

Application Number 16-50040257 Date 1/30/17
Property Address *UNASSIGNED
PARCEL NUMBER 02-1538- - -0011- -11-
Application type description CP MANUFACTURED HOME RA 30 CRITERIA
Subdivision Name
Property Zoning RES/AGRI DIST - RA-30

Owner Contractor

STARLING DENNIS A & RACHEL L BUTTS MOBILE HOME MOVERS
836 STEWART RD 154 FOREST KNOLLS RD
DUNN NC 28334 GOLDSBORO NC 27534
(919) 778-0690

Applicant

STARLING DENNIS & RACHEL
836 STEWART RD
DUNN NC 28334
(910) 984-5272

--- Structure Information 000 000 24X60 DWMH 3BDR
Flood Zone FLOOD ZONE X
Other struct info # BEDROOMS 3.00
MOBILE HOME YEAR 1998.00
PROPOSED USE SFD
SEPTIC - EXISTING? NEW
WATER SUPPLY COUNTY

Permit MANUFACTURED HOME PERMIT
Additional desc
Phone Access Code . 1176619
Issue Date 1/30/17 Valuation 0
Expiration Date . . 1/30/18

Permit LAND USE PERMIT
Additional desc
Phone Access Code . 1176627
Issue Date 1/30/17 Valuation 0
Expiration Date . . 7/29/17

Special Notes and Comments
T/S: 11/29/2016 12:09 PM LBENNETT --
GO TO 421 TOWARDS DUNN GO TO ELLIS AVE
AND TURN LEFT AT LIGHT STAY ON AS IT
RUNS INTO 301N CONTINUE APPROX 3 MI
(WILL SEE WATER TOWER ON THE RIGHT)
TURN RIGHT ONTO STEWART RD GO TO WEEKS

HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

LILLINGTON, NC 27546

For Inspections Call: (910) 893-7525 Fax: (910) 893-2793

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Application Number 16-50040257

Page 2
Date 1/30/17

Special Notes and Comments

RD - LOT AT CORNER OF WEEKS RD &
STEWART RD ON RIGHT

HARNETT COUNTY CENTRAL PERMITTING
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		Page	3
		Date	1/30/17
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Property Address	*UNASSIGNED		
PARCEL NUMBER	02-1538- - -0011- -11-		
Application description	CP MANUFACTURED HOME	RA 30	CRITERIA
Subdivision Name			
Property Zoning	RES/AGRI DIST - RA-30		

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
			Permit type MANUFACTURED HOME PERMIT		
10	501	T501	R*MOBILE HOME FOUND./ M. WALL	_____	__/__/__
20	818	Z818	PZ*ZONING INSPECTION	_____	__/__/__
20	814	A814	ADDRESS CONFIRMATION	_____	__/__/__
30	507	T507	R*MANUFACTURED HOME FINAL	_____	__/__/__
999		H824	ENVIR. OPERATIONS PERMIT	_____	__/__/__
999		H828	ENVIRO. WELL PERMIT	_____	__/__/__
999	307	P307	R*PLUMB WATER CONNECTION	_____	__/__/__
			Permit type LAND USE PERMIT		
999	818	Z818	PZ*ZONING INSPECTION	_____	__/__/__
999	820	Z820	PZ*ZONING/FINAL INSPECTION	_____	__/__/__