

**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: Gary Young Address: 5045 Nursery Rd  
City: Spring Lakes State: NC Zip: 28390 Daytime Phone: (910) 890-0958  
" 497-6612

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: Titan Design SM Michael McNeill  
Phone: 919 820 3865 Address: 175 McNeill lane  
City: Dunn State: N.C. Zip: 28334  
State Lic# 32290 Email: \_\_\_\_\_
- B. **Electrical Contractor** Company Name: Houge Electric Co. Inc  
Phone: 910-890-2556 Address: 2931 McDougal Rd.  
City: Lillington State: N.C. Zip: 27546  
State Lic# \_\_\_\_\_ Email: \_\_\_\_\_
- C. **Mechanical Contractor** Company Name: Tony Johnson  
Phone: 910-984-6321 Address: 517 Rollins Mill Rd  
City: Holly Springs State: N.C. Zip: 27540  
State Lic# 33754 Email: \_\_\_\_\_
- D. **Plumbing Contractor** Company Name: Plumbing / Double J  
Phone: 910 814 7705 Address: 1614 Byrd Rd  
City: Bunnlevale State: N.C. Zip: 28323  
State Lic# 26549 Email: \_\_\_\_\_

**Part III - Manufactured Home Information**

Model Year: 2018 Size: 24 x 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 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.

Gary Young  
Signature of Home Owner or Agent

Oct 24 2017  
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.

Page 2  
Date 10/24/17

Application Number . . . . . 17-50042260  
Property Address . . . . . 5045 NURSERY RD  
PARCEL NUMBER . . . . . 01-0505- - -0019- -01-  
Application description . . . . . CP MANUFACTURED HOME RA 30 CRITERIA  
Subdivision Name . . . . .  
Property Zoning . . . . . PENDING

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
Permit type . . . . . MANUFACTURED HOME PERMIT					
10	501	T501	R*MOBILE HOME FOUND./ M. WALL	_____	___/___/___
10	814	A814	ADDRESS CONFIRMATION	_____	___/___/___
20	818	Z818	PZ*ZONING INSPECTION	_____	___/___/___
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	_____	___/___/___

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Application Number . . . . . 17-50042260 Date 10/24/17  
 Property Address . . . . . 5045 NURSERY RD  
 PARCEL NUMBER . . . . . 01-0505- - -0019- -01-  
 Application type description CP MANUFACTURED HOME RA 30 CRITERIA  
 Subdivision Name . . . . .  
 Property Zoning . . . . . PENDING

Owner

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YOUNG GARY LEE & JUDY KONEN  
 5045 NURSERY ROAD  
 SPRING LAKE NC 28390  
 (910) 497-6612

Contractor

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TITAN DESIGNS MANAGEMENT  
 175 MC NEILL LANE  
 DUNN NC 28334  
 (910) 258-1348

Applicant

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YOUNG GARY  
 5045 NURSERY ROAD  
 SPRING LAKE NC 28390  
 (910) 497-6612

--- Structure Information 000 000 24X58 2BD 2BA DWMH WITH DECK  
 Flood Zone . . . . . FLOOD ZONE X  
 Other struct info . . . . . # BEDROOMS 2.00  
 MOBILE HOME YEAR 2017.00  
 PROPOSED USE DWMH  
 SEPTIC - EXISTING? NEW TANK  
 WATER SUPPLY COUNTY

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Permit . . . . . MANUFACTURED HOME PERMIT  
 Additional desc . . . . .  
 Phone Access Code . . . . . 1215474  
 Issue Date . . . . . 10/24/17 Valuation . . . . . 0  
 Expiration Date . . . . . 10/24/18

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Permit . . . . . LAND USE PERMIT  
 Additional desc . . . . .  
 Phone Access Code . . . . . 1215482  
 Issue Date . . . . . 10/24/17 Valuation . . . . . 0  
 Expiration Date . . . . . 4/22/18

Special Notes and Comments

T/S: 09/14/2017 01:24 PM BPETRICH --  
 HWY 27W TO NURSERY ROAD - GO APPROX 6MI  
 AND IT WILL BE THE LAST HOUSE ON THE  
 LEFT BEFORE FORT BRAGG RESV.  
 ADDRESS ON SAME PROPERTY IS 5045  
 NURSERY ROAD

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\_\_\_\_\_

\_\_\_\_\_

## HARNETT COUNTY CASH RECEIPTS

\*\*\* CUSTOMER RECEIPT \*\*\*

Oper: LLUCAS                    Type: CP    Drawer: 1  
Date: 10/24/17 53            Receipt no: 120021

Year	Number	Amount
2017	50042260	
5045 NURSEKY RD		
SPRING LAKE, NC 28390		
B1	BP - PERMIT FEES	\$225.00

GARY YOUNG

Tender detail		
CK CHECK PAYMEN	7569	\$225.00
Total tendered		\$225.00
Total payment		\$225.00

Trans date: 10/24/17            Time: 10:12:26

\*\* THANK YOU FOR YOUR PAYMENT \*\*

HARNETT COUNTY CASH RECEIPTS

\*\*\* CUSTOMER RECEIPT \*\*\*

Oper: BPETRICH      Type: CP    Drawer: 1

Date: 9/14/17 51    Receipt no: 85600

Year	Number	Amount
2017	50042260	
5045 NURSERY RD		
SPRING LAKE, NC 28390		
B4	BP - ENV HEALTH FEES	\$750.00
NEW TANK		
37631	94792 YOUNG, GARY L	
U0	UT-WATER TAP FEES	\$800.00
37631	94792 YOUNG, GARY L	
U9	UT-WATER CAPACITY FEES	\$1200.00
37631	94792 YOUNG, GARY L	
UD	WA UTILITY DEPOSIT	\$25.00

JOAN & GARY YOUNG

Tender detail

CK CHECK PAYMEN	1103	\$2775.00
Total tendered		\$2775.00
Total payment		\$2775.00

Trans date: 9/14/17      Time: 13:50:44

\*\* THANK YOU FOR YOUR PAYMENT \*\*