Permit #:

Parcel (AKPAR) #:

RESIDENTIAL MOBILE HOME PERMIT APPLICATION

Building Inspections, PO Box 548, Pittsboro NC 27312

Chatham County, North Carolina

Applicant Information: Landowner Information (as appears on deed):

Name Address Address

Email Email Contact # Contact #

Additional Project Contact Name/Number/Email

Property Address (911 issued)

MH Park Name Lot Number

Are there any other houses, mobile homes, or other dwellings on your lot now? Yes No

If yes, how many?

If yes, is dwelling to be removed? Yes No **OR** Dwelling has recently been removed/date:

Mobile Home Information:

Mobile Home Owner (if different from applicant or landowner):

Single Wide Double Wide Other:

Year: Total Cost of Construction: \$\text{VIN/Serial Number:}

Size: Number bedrooms: Number bathrooms:

Skirting: Masonry Vinyl Other:

Are there any decks/landings larger than 36 sq ft that are used to access the home? Yes No

If yes, how many?

Intended Use: Permanent Residence Rental Other

Tax moving permit **required from the tax collector of the county the home is currently located unless a new home from a manufacturer or retailer. Reference NCGS 105-316.1.

Water Source: Sewer Source:

CONTRACTOR INFORMATION

Set Up Contractor: Business Name: License #

Phone: Email:

Set Up Contractor/Authorized Signature:

Electrical Contractor: Business Name: License #

Phone: Email:

Electrical Contractor/Authorized Signature:

Mechanical Contractor: Business Name: License #

Phone: Email:

Mechanical Contractor/Authorized Signature:

Plumbing Contractor: Business Name: License #

Phone: Email:

Plumbing Contractor/Authorized Signature:

I hereby certify that I am making this application for the landowner or myself, and that the information given is correct and all work will comply with the State Building Code and all other applicable State and local laws and ordinances and regulations. The Inspections Department will be notified of any changes in the approved plans and specifications for the project permitted herein.