



WAKE COUNTY COMMUNITY SERVICES
INSPECTIONS/DEVELOPMENT PLANS/PERMITS
 Suite 101 Waverly Akins Office Building
 PO Box 550, Raleigh, NC 27602
 Permits Staff (919) 856-6222 Fax (919) 856-6229

APPLICATION FOR MANUFACTURED HOME PERMIT

PERMIT # _____

ENVIRONMENTAL SERVICES PERMIT # *D* _____

| | | | |
|----------------------------------------------|---------------|---------------|--------------------------|
| Owners Name – Last: | | First: | Phone # |
| Street Address/City/State | | | Zip: |
| Dealers Name: | | | Phone: |
| Project Address: St # | Dir: | Name: | Dir: Typ: |
| City: | State: | Zip: | Utility Provider: |
| Mobile Home Park or Subdivision: | | | Project Cost: |
| Lot # | | | |
| List existing structures on property: | | | |

| | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|---------------------|
| Bedrooms: | Baths: | Other : |
| Value: | Serial # | UL/HUD # |
| Year: | Make: | Size: Color: |
| Existing Deck <input type="checkbox"/> New Deck <input type="checkbox"/> Is Home being moved from within Wake County? <input type="checkbox"/> | | |

| | |
|------------------------------------|--------------------|
| Set Up Contractor: | License # |
| Street Address: | Phone # |
| City: | State: Zip: |
| Contact Name: | Fax # |
| Electrical Contractor*: | Phone: |
| City: | License # |
| State: Zip: | Phone # |
| Plumbing Contractor: | License # |
| City: | Phone # |
| State: Zip: | |
| Directions to Project: | |
| Applicant/Owner/Agent Name: | Phone# |
| Signature: | Date: |

*Electrical work must be installed by contractor licensed in the State of North Carolina.
Exception: Any person may perform the work when both the mobile home and the land on which it is placed is are owned by that person and the home is for their own use (not for rental purposes). Approval must be granted to the applicant for wiring their home by scheduling an appointment with their electrical inspector before any work is performed.
 Applicant agrees to comply with all Building Regulations and other applicable laws to the use of the structure and facilities referred herein. The permit issued for work shall expire by limitations six months after the date of issuance if the work authorized has not commenced. If after commencement, the work is discontinued for a period of twelve months, the permit shall expire. No work, authorized by any expired permit, shall be performed until a new permit has been secured.

| | | | |
|----------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|-----------------------------------------------------|---------------------|
| FOR OFFICE USE ONLY – DO NOT COMPLETE | | Jurisdiction: | |
| PIN/Tax Map/Parcel: | Unique #: | BM | Page |
| Acres: | Census: | Zoning: | Approved By: |
| Water Supply: Public <input type="checkbox"/> Private <input type="checkbox"/> | Waste Water: Public <input type="checkbox"/> Private <input type="checkbox"/> | Lift Pump Required: <input type="checkbox"/> | |
| Flood Certification Required: <input type="checkbox"/> | Fee: | | |

Approved by: _____ Date: _____