



NEW HANOVER COUNTY  
CODE ENFORCEMENT SERVICES

# NEW HANOVER COUNTY BUILDING PERMIT

revised 7/5/01

**APPLICATION TYPE: MOBILE HOME**  
(PLEASE PRINT CLEARLY & ANSWER ALL QUESTIONS)

APPLICATION # \_\_\_\_\_  
(For office use)

Project Responsibility

APPLICANT'S NAME \_\_\_\_\_ DATE \_\_\_\_\_

PROJECT ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_

MOBILE HOME PARK / SUBDIVISION \_\_\_\_\_  
BLOCK # \_\_\_\_\_ LOT # \_\_\_\_\_

CONTRACTOR \_\_\_\_\_ LICENSE # \_\_\_\_\_ ACCOUNT # \_\_\_\_\_  
ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_  
PHONE # \_\_\_\_\_

OWNER'S NAME \_\_\_\_\_ PHONE \_\_\_\_\_  
OWNER'S ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_

(If you are moving your existing mobile home from another location enter the address below)  
ADDRESS MOBILE HOME CURRENTLY LOCATED: \_\_\_\_\_ CITY \_\_\_\_\_ ST \_\_\_\_\_  
PROJECT CONTACT PERSON: \_\_\_\_\_ PHONE \_\_\_\_\_

CIRCLE: NEW INSTALLATION / REPLACEMENT / RELOCATING

DESCRIPTION OF WORK: \_\_\_\_\_

**DISCLAIMER:** I hereby certify that all information in this application 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 Dept. will be notified of any changes in the approved plans and specifications for the project permitted herein.  
(PRINT NAME)

OWNER / AGENT \_\_\_\_\_ SIGNATURE \_\_\_\_\_

IS THE PROPERTY LOCATED IN A FLOODPLAIN? Yes / No

TOTAL PROJECT COST:

HUD LABEL #: \_\_\_\_\_ MANUFACTURER \_\_\_\_\_ SERIAL # \_\_\_\_\_

YEAR MADE: \_\_\_\_\_ WIDTH: \_\_\_\_\_ LENGTH: \_\_\_\_\_ COLOR: \_\_\_\_\_

PROPERTY USE -OCCUPANCY: RESIDENCE / OTHER: \_\_\_\_\_ FIRE DISTRICT: YES / NO

GARAGE: YES / NO      DECK: YES / NO      PORCH: YES / NO

HURRICANE ZONE RATING: 1 / 2 / 3      SMOKE DETECTOR: YES / NO

WATER: CITY / COUNTY / COMMUNITY SYSTEM / PRIVATE WELL

SEWER: CITY / COUNTY / CENTRAL SEPTIC / PRIVATE SEPTIC / COMMUNITY SYSTEM

ACRES DISTURBED: \_\_\_\_\_ TOTAL SITE AREA: \_\_\_\_\_

\*\*\*SEPARATE PERMITS REQUIRED FOR ELECT, MECH, PLBG, GAS EQUIP, PREFABS, & INSERTS\*\*\*

PAYMENT METHOD: CASH / CHECK (PAYABLE TO NEW HANOVER COUNTY) / BILL ACCOUNT / MASTERCARD / VISA

(FOR OFFICE USE ONLY)

ZONE \_\_\_\_\_ OFFICER \_\_\_\_\_ SETBACKS: F \_\_\_\_\_ LH \_\_\_\_\_ RH \_\_\_\_\_ B \_\_\_\_\_  
Approval: City Date

FLD \_\_\_\_\_ BFE+2ft = \_\_\_\_\_  
A V N

COMMENTS: \_\_\_\_\_

PERMIT FEE \$ \_\_\_\_\_