

EVERY COUNTY INSPECTIONS DEPARTMENT

P.O. BOX 596

NEWLAND, NC 28657

TELEPHONE: 828 733-8204

Fax: 828 733-7003

7003

MOBILE HOME PERMIT APPLICATION

DATE: _____

TELEPHONE: _____

OWNER'S NAME: _____

ADDRESS: _____

TOWNSHIP: _____ PARCEL I.D. NO: _____

PROPERTY OWNER: _____

PHYSICAL LOCATION OF UNIT: _____

SELLER: _____ LICENSE NO: _____

SET-UP CONTRACTOR: _____ LICENSE NO: _____

ELECTRICIAN: _____ LICENSE NO: _____

MAKE: (YR) _____ MODEL: _____ SIZE: ___ X ___ AMPS: _____

TYPE OF HEAT: _____

COST OF UNIT: _____

SEWER APPROVAL DATE: _____

FEE: \$ _____ DATE PAID: _____

OWNER/CONTRACTOR

DATE

