



MANUFACTURED HOME APPLICATION



Permit no.	Receipt No.	Permit Fee	Date Permit Issued	Issued By
		\$		

LOCATION OF MOBILE HOME			
Address	City	State	Zip Code

TAX MAP		MOBILE HOME PARK		
Page	Block	Lot	Name	Lot

NAME	MAILING ADDRESS	CITY	ZIP CODE	TELEPHONE	License No
LAND OWNER					
MOBILE HOME OWNER					

SELECTED CHARACTERISTICS OF WORK

<p>NATURE OF WORK</p> <p><input type="checkbox"/> 1. New Mobile Home Set-Up</p> <p><input type="checkbox"/> 2. Moving/Relocation Decal No. _____</p> <p><input type="checkbox"/> 3. Date Moved _____</p> <p><input type="checkbox"/> 4. Manufactured Home Park</p> <p>Dimensions: _____ X _____</p>	<p>SOURCE OF WATER SUPPLY:</p> <p>_____</p> <p>SOURCE OF SEWAGE DISPOSAL (permit number):</p> <p>_____</p>	<p>Description of Mobile Home:</p> <p>Make/Model _____</p> <p>Year/Color _____</p> <p>Serial Number _____</p> <p>New Decal Number _____</p> <p>Electrical Company _____</p> <p>Moving Company _____</p>
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ZONING APPROVAL

<p>SETBACKS (feet):</p> <p>Front Yard _____ required _____ provided</p> <p>Side Yard _____ required (total)</p> <p>with no side less than _____ provided</p> <p>Secondary _____ required _____ provided</p> <p>Rear Yard _____ required _____ provided</p> <p>Any previous requests for variance/special exception?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No If "yes", Case No. _____</p>	<p>MOVING FROM LOCATION:</p> <p>_____</p> <p>OLD DECAL NUMBER: _____</p>
PREVIOUS COUNTY TREASURER'S SIGNATURE:	

FLOOD PLAIN DATA

Elevation of 100 year Flood _____	Panel _____ Community panel _____
First Floor Elevation Above Mean Sea Level _____ Feet	Date _____
Verified by: _____ Signature	Zone _____ SFHA _____

AFFIDAVIT OF APPLICANT

1. No work will be started before permit card is posted or continued if the permit card is destroyed, lost or stolen.
2. No work will be continued if permit card is destroyed, lost or stolen.
3. Contractor and subcontractors will secure (if required) a business license before beginning work.
4. This permit is void if job is not started within 6 months of application date.
5. I will be responsible and will pay for the business license of any contractor or subcontractor doing work on this project if found without a license.
6. The undersigned owner or agent understands that the approval of this application does not constitute a privilege to violate any applicable governmental ordinances codes or laws, and that any omission of or misrepresentation of fact without intention of the undersigned or any alteration of change from this application without the approval of the Building Official, shall constitute sufficient ground for the revocation of any permit issued which was based on the approval of this application. The permit does not authorize any encroachment upon public property.

Manufactured Home Checklist

Permits Division

Please obtain these approvals in order to complete the application process.
(If you are not the land property owner, documentation is required from the land property owner)

1. **Permits Division, 576-2140** 1st Floor County Building
 Zoning _____ Addressing _____ DHEC (septic tank approval letter)

Signature: _____ **Date:** _____

Approved Disapproved

Comments: _____

2. **Mobile Home Division, 576-2640** 2nd Floor County Building
(Proof of Ownership: Title or Bill of Sale)

Signature: _____ **Date:** _____

Approved Disapproved

Comments: _____

3. **Treasurer, 576-2250** 2nd Floor County Building
(\$5 Decal Fee)

Signature: _____ **Date:** _____

Approved Disapproved

Comments: _____

4. **Finance Department, 576-2100** 4th Floor County Building
(\$48 Roll Cart Fee)

Signature: _____ **Date:** _____

Paid Unpaid (provide comment)

Comments: _____

5. **Permits Division, 576-2140** 1st Floor County Building
(\$135 Permit Fee)

Signature: _____ **Date:** _____

Approved Disapproved

Comments: _____

**IT IS THE APPLICANT'S RESPONSIBILITY TO ENSURE ALL ABOVE ITEMS HAVE BEEN CHECKED OFF
(VERIFIED OR REQUIRED).**