



TOWN OF MOREHEAD CITY MANUFACTURED HOME PERMIT APPLICATION

Date: _____ Tax PIN: _____ Zoning District: _____

Property Located in a Flood Zone*? _____ Zone: _____ Elevation: _____

** If yes, a flood elevation certificate is required before electricity will be authorized.*

Owner: _____ Phone: _____

Mailing Address: _____ Email: _____

Construction Site Address: _____

Dealer: _____ Phone: _____

Mailing Address: _____ License: _____

Salesperson: _____ Email: _____

Set-up Contractor: _____ Phone: _____

Mailing Address: _____ License: _____

Electrical Contractor: _____ Phone: _____

Mailing Address: _____ License: _____

Manufacturer: _____ Size: _____ x _____ Serial #: _____

Bathrooms: _____ # Bedrooms: _____ Color: _____ Year: _____

Location of Wind Zone Certification: _____ Wind Zone: _____ Carteret County Septic Permit: _____

Note: Address numbers shall be attached to the front of the structure in a readily visible location. The numbers shall be at least three (3) inches tall and shall be painted, tinted or colored so that the numbers contrast with the background color and shall be readily, clearly and reasonably visible from the street.

I hereby certify that all information in this application is correct and all work will comply with 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.

Applicant Signature: _____

** Check box in lieu of signature to indicate agreement with the above statement if submitting electronically.

Typed Name _____

Zoning Approval: _____ Date: _____