



# CHEROKEE COUNTY

## Building Safety

110 Railroad Ave.  
Gaffney, SC 29340

Office 864-487-2561 Fax 864-902-1100



### MOBILE HOME PERMIT APPLICATION

Complete Set-up  
 License Only  
 De-Title

Single Wide  
 Double Wide  
 Multi-Sectional

Tax Year \_\_\_\_\_ Sticker # \_\_\_\_\_ Permit # \_\_\_\_\_

Owner/Renter \_\_\_\_\_  
Address of Home \_\_\_\_\_

Phone# \_\_\_\_\_

Is this address in a designated flood zone? YES \_\_\_\_\_ NO \_\_\_\_\_

*\*If home is in a designated flood zone, a design professional must be involved.\**

Mailing Address for Tax Notices \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Land Owner of Mobile home Site \_\_\_\_\_

Power Company \_\_\_\_\_ Septic: New \_\_\_\_\_ Existing \_\_\_\_\_ Sewer \_\_\_\_\_

### MOBILE HOME SPECIFICATIONS

Manufacturer \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ Size \_\_\_\_\_ X \_\_\_\_\_

Color \_\_\_\_\_ Trim \_\_\_\_\_ Vin # \_\_\_\_\_

Deck Size: Front \_\_\_\_\_ X \_\_\_\_\_ Back \_\_\_\_\_ X \_\_\_\_\_ Underpinning Type \_\_\_\_\_

Fireplace: Wood \_\_\_\_\_, Gas \_\_\_\_\_ Central Air \_\_\_\_\_

Purchase Price \_\_\_\_\_ Home Purchased From \_\_\_\_\_

Location of home prior to this set up \_\_\_\_\_

Total Project Cost \_\_\_\_\_

**CONTRACTOR:**

**TYPE: (Manufactured Housing Contractor, Installer, Mover, Home Owner, Residential Builder)**  
*(circle one please)*

Name: \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Phone \_\_\_\_\_

License# \_\_\_\_\_ License Expiration Date: \_\_\_\_\_

*For information purposes only*

**Mechanical Contractor** \_\_\_\_\_

**Electrical Contractor** \_\_\_\_\_

**Plumbing Contractor** \_\_\_\_\_

**Permit Cost** \_\_\_\_\_ **Check#** \_\_\_\_\_ **Cash** \_\_\_\_\_ **CC Type** \_\_\_\_\_

**The undersigned hereby certifies that the above information is true and correct. Permit holder is to comply with all County, State, and Federal laws and ordinances.**

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_