



CHEROKEE COUNTY

Building Safety

110 Railroad Ave.
Gaffney, SC 29340

Office 864-487-2561

Fax 864-902-1100



MANUFACTURED HOME MOVING PERMIT APPLICATION

A copy of the SC Title in the Customers name and a Manufactured Home Tax Clearance Form will be needed.

Tax Year _____ Sticker # _____ Permit # _____

Single Wide _____ Double Wide _____ Multi-Sectional _____

Applicant Name: _____ Phone Number: _____

Email of Applicant: _____

Owner: _____

Phone#: _____

Present Location of Home:

Address: _____

City, State, Zip: _____

County: _____ Parcel Number: _____

Future Location of Home:

Address: _____

City, State, Zip: _____

County: _____ Parcel Number: _____

Manufactured Home Mover: _____

MANUFACTURED HOME SPECIFICATIONS

Manufacturer _____ Model _____ Year _____ Size ____ X ____

Vin # _____

Permit Cost _____ Check# _____ Cash _____ CC Type _____

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

Signature _____

Date _____