



CHEROKEE COUNTY

Building Safety

110 Railroad Ave.
Gaffney, SC 29340
Office 864-487-2561 Fax 864-902-1100

MANUFACTURED HOME DE-TITLE PERMIT APPLICATION
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Tax Year _____ Sticker # _____ Permit # _____

Single Wide _____ Double Wide _____ Multi-Sectional _____

Applicant Name: _____ Phone Number: _____

Email of Applicant: _____

Owner/Renter: _____

Address of Home: _____

Parcel Number: _____

Phone#: _____

Mailing Address for Tax Notices: _____

MANUFACTURED 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 _____

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 _____