

MANUFACTURED HOME PERMIT PACKAGE



It's All Right Here!

INSPECTION DEPARTMENT	910-230-3505
CODE ENFORCEMENT DEPARTMENT	910-230-3504
PLANNING & ZONING DEPARTMENT	910-230-3503

CITY OF DUNN

Building Inspections Department

POST OFFICE BOX 1065 ~ DUNN ~ NORTH CAROLINA 28335
(910) 230-3505 Chief Inspector ~ (910) 230-3504 Building Code Enforcement

APPLICATION FOR MANUFACTURED HOME PERMIT

Inside City Limits Outside City Limits Zone: _____

LOCATION OF SITE: (Street Address) _____

VALUATION OF HOME _____ SIZE OF HOME _____ x _____

OWNER _____ TELEPHONE# _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

Moving/Set-Up Contractor:

Name: _____ Telephone: _____

Address: _____ City: _____ State: _____ Zip: _____

N.C. State License #: _____ Dunn Privilege License #: _____

Set-Up Contractor Signature: _____

E-mail Address: _____

Contact Person: _____ Phone Number: _____ Fax: _____

Electrical Contractor:

Name: _____ Telephone: _____

Address: _____ City: _____ State: _____ Zip: _____

N.C. State License #: _____ Dunn Privilege License #: _____

Expiration of Workers Compensation Insurance: _____/_____/_____

Electrical Contractor Signature: _____

Plumbing Contractor:

Name: _____ Telephone: _____

Address: _____ City: _____ State: _____ Zip: _____

N.C. State License #: _____ Dunn Privilege License #: _____

Expiration of Workers Compensation Insurance: _____/_____/_____

Plumbing Contractor Signature: _____

Mechanical Contractor:

Name: _____ Telephone: _____

Address: _____ City: _____ State: _____ Zip: _____

N.C. State License #: _____ Dunn Privilege License #: _____

Expiration of Workers Compensation Insurance: _____/_____/_____

Mechanical Contractor Signature: _____

I hereby agree to follow the City of Dunn's Zoning Ordinance as provided by the Code Enforcement Officer.

Signature

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Section 22-1 Definitions

Class A Manufactured Home means a manufactured home constructed after July 1, 1976, that meet or exceeds the construction standards promulgated by the U.S. Department of Housing and Urban Development that were in effect at the time of construction and that satisfies the following additional criteria:

- (1) The manufactured home has a length not exceeding four (4) times its width, with length measured along the longest axis and width measured at the narrowest part of the other axis;
- (2) The manufactured home has a minimum of one thousand two hundred (1,200) square feet of enclosed and heated living area;
- (3) The pitch of the roof of the manufactured home has a minimum vertical rise of three and two-tenths (3.2) feet for each twelve (12) feet of horizontal run and the roof is finished with a type of composition shingle that is commonly used in standard residential construction;
- (4) The roof eaves and gable overhangs shall be twelve-inch minimum (rain gutters may be included in the minimum dimensions);
- (5) The exterior siding consists predominantly of vinyl or aluminum horizontal lap siding (whose reflectivity does not exceed that of gloss white paint), wood, or hardboard, comparable in composition, appearance, and durability to the exterior siding commonly used in standard residential construction;
- (6) The manufactured home is set up in accordance with the standards set by the North Carolina Department of Insurance and a continuous, permanent masonry foundation or masonry curtain wall, unpierced except for required ventilation and access, is installed under the perimeter of the manufactured home;
- (7) The front entrance to the manufactured home has stairs and a porch, the porch being at least four (4) feet by six (6) feet in size. Stairs, porches, and entrance platforms, ramps and other means of entrance and exit to and from the home shall be installed or constructed in accordance with the North Carolina State Building Code;
- (8) The moving hitch, wheels and axles, and transporting lights have been removed;
- (9) Each manufactured home shall be only for single-family occupancy;
- (10) A manufactured home shall comply with the Federal Housing Administration requirements relative to tie downs;
- (11) The electrical meters servicing the manufactured home shall be mounted (attached) directly to the manufactured home;
- (12) A multi-sectional manufactured home is required. A singular sectional manufactured home is prohibited; and
- (13) All manufactured homes shall otherwise meet all applicable zoning regulations for the zoning districts in which the home is to be located.

I have read and understand the above requirements for the placement of a Class A Manufactured Home as it pertains to the City of Dunn Zoning Ordinance.

Owner Signature

Date

Manufactured Home Dealer Signature

Date

CITY OF DUNN
Development Permit

Please attach a plot plan showing lot lines and dimensions, the location and size of all existing and proposed buildings, the distance from each building to property lines, all driveway entrances, parking and loading areas, all existing landscaping (generally).

OWNER TO COMPLETE

Property Identification Information:

Property Address: _____ County PIN: _____ - _____ - _____
 Subdivision _____ Phase _____ Lot # _____
 Property Owner Name: _____ Owner Daytime Telephone: _(_____)_____-_____
 Property Owner Address: _____ Owner Fax Number: _(_____)_____-_____
 City/State/Zip Code: _____ Owner Cell Telephone:_(_____)_____-_____

Dimensions of Property:

Width: _____
 Depth: _____
 Square Feet: _____
 Acreage: _____

Current Use of the Property:

Proposed Use of the Property

____ Residential
 ____ Single Family Residence (Site built or modular)
 ____ Single Family Residence (Manufactured)
 ____ Duplex Residence
 ____ Multiple Family Dwelling (Apartments)

____ Commercial Business
 Type: _____
 Name of Business: _____
 # of Square Feet _____

____ Office
 Type: _____
 Name of Business: _____
 # of Square Feet _____

____ Manufacturing
 Type: _____
 Name of Business: _____
 # of Square Feet _____

____ Other
 Type: _____
 Name of Business: _____

____ Residential
 ____ Single Family Residence (Site built or modular)
 ____ Single Family Residence (Manufactured)
 ____ Duplex Residence
 ____ Multiple Family Dwelling (Apartments)

____ Commercial Business
 Type: _____
 Name of Business: _____
 # of Square Feet _____

____ Office
 Type: _____
 Name of Business: _____
 # of Square Feet _____

____ Manufacturing
 Type: _____
 Name of Business: _____
 # of Square Feet _____

____ Other
 Type: _____
 Name of Business: _____

CITY OF DUNN
Development Permit

Existing Building(s):

___ Vacant Land

___ Building One
Width: _____
Depth: _____
Current Use: _____

___ Building Two
Width: _____
Depth: _____
Current Use: _____

___ Building Three
Width: _____
Depth: _____
Current Use: _____

PARKING SPACES

___ *Number spaces provided*

Proposed Project:

___ New Construction

___ Use of Existing Structure

___ Modification of Existing Structure

___ Addition to Existing Structure

___ Additional Building

Dimensions of new construction _____ Square feet of new construction

Owner Certification:

I hereby certify that I am the owner of the above identified property, that the information shown above and shown on the attached plot plan is correct and complete to the best of my knowledge. I understand that all decisions rendered will be based on and enforced according to this information. I understand that this permit, if granted, is issued on the basis of the information supplied by the owner and that this permit may be revoked in the event of any breach of representation or conditions.

Property Owner Signature: _____

Connection to Utilities

___ Electricity

___ Public Water ___ Private Well

___ Public Sewer ___ Private Septic System

___ Storm Water System

___ Natural Gas

ZONING OFFICIAL TO COMPLETE

Zoning Classification

___ Required Lot Size

___ Required Front Yard Set Back

___ Required Rear Yard Set Back

___ ***REQUIRED SIDE YARD SET BACK***

Floodplain Determination:

___ Property is not located in a floodplain

___ Property is located in floodplain, but development is not.

___ Development is located in a designated flood hazard area.

Panel Number _____ Date of Panel _____

Parking Spaces

___ Required

___ Provided

Special Conditions:

___ Approved ___ Denied - Reason: _____

Signature: _____ Date: _____ Receipt Number: _____
Zoning Administrator Amount: _____

CITY OF DUNN
Development Permit

**EXAMPLE OF SITE PLAN FOR
DEVELOPMENT PERMIT**

