

**County of Lee  
Department of Building Inspection**

**Application for a Manufactured Home Permit**

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Owner's Name (as on title) \_\_\_\_\_

Will owner live in the home? Yes ( ) No ( )

If "no", who will live in the home? \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**Manufactured Home Specifications**

Brand \_\_\_\_\_ Model Year \_\_\_\_\_

Size \_\_\_\_\_ Color \_\_\_\_\_

Serial Number \_\_\_\_\_ New ( ) Used ( )

Switchbox Size (Amps) \_\_\_\_\_

Purchase Date \_\_\_\_\_ Purchase Price \_\_\_\_\_

Purchased From \_\_\_\_\_

Moved From \_\_\_\_\_

**Location Specifications**

Name of Park \_\_\_\_\_ Lot Number \_\_\_\_\_

Location \_\_\_\_\_

Is Home on Private Lot? Yes ( ) No ( )

If "yes" property owners name \_\_\_\_\_

Was lot sold from larger tract? Yes ( ) No ( )

If "yes", whom was it purchased from? \_\_\_\_\_

Is the applicant developing a subdivision? Yes ( ) No ( )

Is the applicant located in a subdivision? Yes ( ) No ( )

Is the home located in a flood hazard area? Yes ( ) No ( )

Do you have an approved septic system? Yes ( ) No ( )

Health Department Identification Number \_\_\_\_\_

Tax Map Identification Number \_\_\_\_\_

**Additional Information**

Type of heat \_\_\_\_\_ Factory installed Fire Place? Yes ( ) No ( )

Number of Full Baths \_\_\_\_\_ Number of ½ Baths \_\_\_\_\_

Condition of Home \_\_\_\_\_

Application is hereby made for a manufactured home permit in accordance with the description and/or the purpose herein set forth. This application is made subject to all County and/or Town, State Laws, Ordinances, Rules and Regulations now in force, affecting or relating thereto and which shall be agreed to by the undersigned applicant and which shall be deemed a condition entering into the exercise of the permit.

Applicant's Signature \_\_\_\_\_

Date: \_\_\_\_\_