

ALEXANDER COUNTY ZONING 6125 NC Highway 16

South

		(Attach to an	Official Zoning Permit
-	7	· 11 - 170 - 070 -	•

APPLICANT:	TELEPHONE #:					
ADDRESS:						
PROPERTY OWNER (if different):						
ADDRESS:						
PROPOSED HOME LOCATION:	Individual Lot	Subdivision	Manufactured Home Park			
PROPOSED MANUFACTURED HOMI	E:	NEW	USED			
IF THE HOME IS USED, PLEA	SE PROVIDE THE FO	LLOWING INFORM	IATION:			
NAME OF PREVIOUS	OWNER:					
ADDRESS:						
TYPE OF MANUFACTURED HOME (circle one): SINGL	EWIDE DOUBI	LEWIDE MU	JLTI-SECTION		
MODEL YEAR: MANUF	FACTURER:		SIZE:			
ROOF CONSTRUCTION (please circle):	SHINGLE MET	TAL TYPE (please	circle): FLAT	PITCHED		
EXTERIOR FINISH (please circle):	VINYL SIDING	WOOD/HARDBO	ARD SIDING	METAL		
TYPE OF UNDERSKIRTING (UNDER						
SIZE OF DECK OR PORCH ON FROM	T OF HOME:		REAR:	AR:		
PLEASE NOTE THAT A 48 S	QUARE FOOT DECK O	N THE FRONT OF TH	E HOME IS REQUI	RED		
By signing below, I certify that all of the complete to the best of my knowledge an grounds for rejection of this application. make evaluations or inspections and to rethat the approval of this permit does not sole responsibility of the applicant to ensure the work authorized by it begin within suspended or abandoned for a period of	d belief and are made in Authorized represental elease information upon t indicate compliance we sure compliance with sun SIX (6) MONTHS of ONE (1) YEAR.	good faith. I underst ives of Alexander Co public request. By s ith deed restrictions ch restrictions. A zoo f its date of issue, or	tand that false information that false information are granted right in grant and in grant false or restrictive coverning permit shall if the work authors.	rmation may be ight-of-entry to so acknowledge nants. It is the be void unless corized by it is		
(Applicant's Name-please print)	(Applican	t's Signature)	(Date)			
STAFF USE ONL	Y - APPLICANT: DO	NOT WRITE BELOW	THIS LINE			
HUD SERIAL #:		ZONING PERMIT #:				
Comments:						

APPROVED DENIED Staff Initials: _____ Date: _____ Permit No. _____