

County of Greenville

"... At Your Service"

Property Owner's Name:_____

Greenville County Square 301 University Ridge, Suite 4100 Greenville SC 29601-3660 Phone (864) 467-7060 Fax (864) 467-7407

Phone No:___

MOBILE HOME PERMIT APPLICATION

APPLICATION MUST BE COMPLETED PRIOR TO REQUESTING PERMIT

Exact A	ddres	ss of Property:		City:	State/Zip:	State/Zip:	
Name o	f Mol	bile Home Park or Sub	odivision:	Space No:	Tax Map No:		
Is This A Corner Lot Name of Power Company Name Mobile Home is registered in:					Name of Gas Company		
Name I	TODIIC	Home is registered i	n: oad	County Road	Phone No.: State Road		
Roau I	nior	mation: Private R	oad Public Road	County Road	State Road		
all zonir 1300 for respon	ng red For de Isibil	quirements will have t eed restrictions/co lity.	to be met (including setbacks, fl venants and subdivision reg	oodplain, road frontage, ulations, which may p	o permit being issued, the zoning will be ver , etc.) <i>Please check in the RMC Office</i> , . orohibit mobile homes - these are the o	Suite	
1.	EXA	ACT DIRECTIONS:					
2.	Type of Sewer Facility on the property:						
		Public Sewer:			and a job acknowledgement form will be requise is the first time a mobile home will be on		
		Septic Tank:	Application for septic tank wil weeks for approval from the I		Permit Application Center and will take at lea	ast four	
3.	Mol	Mobile Home purchased from a Mobile Home Dealer – a Copy of the Bill of Sale and Form 400 or Title will be required.					
4.	Mol	Mobile Home purchased from Private Owner:					
	a.	a. If purchased from someone in Greenville County, we will require the name the mobile home was registered under with Greenville County along with a Form 400 or Title.					
	 b. If purchased from someone in another County in South Carolina, a moving permit from the other County and a Form 40 or Title will be required. c. If mobile home is purchased from out-of-state, the city and state from previous location is needed and a Form 400 or Title will be required. 						
Applications must be faxed to the Permit Application Center 48 hours in advance of permit pick up. For information regarding culverts, driveways, or encroachment permits, contact 467-7016 if the property is on a county road or 241-1221 if the property is on a state road.							
true and use of lar grants th	corre nd and ne righ	ct; 3) That he/she will co d structures and the cons at of entry to the property	mply with all County of Greenville or truction of structures; 4) That he/she	dinances, laws and regulati e will perform only the work s of the County of Greenville	ation; 2) That he/she has read the above informations, all State and Federal Laws and regulations recould outlined above at the property indicated above; 5) of the purpose of inspections, and posting of not ed.	gulating the That he/she	
				piration Date:	te and Zip Code are required		
Name o	n ca	ru:	Zı <u>j</u>	o Code:			
					SUE IF: WORK HAS NOT COMMENCE FOR A PERIOD OF 6 MONTHS.	D, IF AN	
and any	other	applicable laws or ordir		s permit prevent the Buildi	e, alter or set aside any of the provisions of the Bu ng Official from requiring correction of errors in c		
DATE:_			BY OWNER OR AUTHO	ORIZED AGENT:	Cost of Permit: \$	· · · · · · · · · · · · · · · · · · ·	
☐ Furt	her I	nformation Needed	□ Ready for Pick	up Permit No:	Cost of Permit: \$		