



**JACKSON COUNTY PERMITTING & CODE ENFORCEMENT**  
**Manufactured Home Placement Application**

Sylva Office: 401 Grindstaff Cove Rd, Suite 145, Phone: 828-586-7560 / Fax: 828-586-7563  
Cashiers Office: 357 Frank Allen Road, Phone: 828-745-6850 / Fax: 828-745-6867

LIEN AGENT REQUIRED? NO YES LIEN ENTRY NUMBER: \_\_\_\_\_

PROPERTY PIN: \_\_\_\_\_ IN AN EXISTING M/H PARK?\* NO YES

**Permits will not be issued without Property PIN and proof of an approved method of sewage disposal.**

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

HOME TYPE: Singlewide Doublewide Triplewide Camper/RV Number of Bedrooms: \_\_\_\_\_

LAND USE: Residential Commercial (Must have NC Licensed Subcontractors)

CONTRACTORS	NC LIC #	PHONE
MH SETUP:		
ELECTRIC:		
PLUMBING:		
MECHANICAL:		

\*If you are installing more than one manufactured home you must discuss your plans with us prior to submittal of this application. You may be required to submit a site plan and fill out an Application for Construction of a Manufactured Home Park.

**DETAILED DIRECTIONS TO SITE (IF POSSIBLE, PLEASE INCLUDE A 911 ADDRESS)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

POWER PROVIDER: \_\_\_\_\_ JOB # (if Duke Energy): \_\_\_\_\_

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other applicable State and local laws and ordinances and regulations. The inspection Department will be notified of any changes in the approved plans and specifications for the project permitted herein.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**JACKSON COUNTY 9-1-1 OFFICE**  
401 Grindstaff Cove Rd., (Mail)  
Sylva, NC 28779  
(828)586-7537  
(828)586-7573 fax

**JACKSON COUNTY, NORTH CAROLINA**  
**ADDRESS REQUEST FORM**

Date of Application: \_\_\_\_\_

The following information is required in order to assign you a permanent house number and road name. This address is necessary for Jackson County to provide you, the homeowner, with adequate emergency service when a 9-1-1 call is made. Your address will be assigned as soon as possible after your request is made. (The driveway must be cut in on the property before the address can be generated.) This address must be posted on your home or at your driveway before a certificate of occupancy can be issued. This form must be filled out if you are building a new home or placing a mobile home on your property. Leave this form at the building permit office. The assigned address must be posted on your home or at your driveway before a certificate of occupancy can be issued.

Homeowner's Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Contractor's Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Road Name: \_\_\_\_\_ PIN # \_\_\_\_\_  
(Parcel Identification Number)

Building Permit #: \_\_\_\_\_ Lot # (if applicable): \_\_\_\_\_

Directions to building site: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of nearest neighbor: \_\_\_\_\_

Description of new home: (example: 2-story gray house)  
\_\_\_\_\_  
\_\_\_\_\_

If this home is not to be your permanent full-time residence, please list an out of town mailing address and telephone number where you can be reached.

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

**FOR OFFICE USE ONLY**

NEW HOME ADDRESS: \_\_\_\_\_