SALUDA COUNTY MOBILE/MANUFACTURED HOME PERMIT APPLICATION

Permit Applications can be sent to bsanders@safebuilt.com

DATE OF APPLIC	CATION		DECAL # DRIVERS LICENSE #			
Owner Name:		DI				
Project Location (9)	11 address):					
Гах Мар Number:_						
Address						
	Street	City		State	Zip	
	ome Contractor/Installe		NE#:			
	REQUIRED TO HAVE	BEFORE DECAL CAN	I BE ISSUED)		
[] NEV Make	W (FORM 400 & BILL O	F SALE)	[] USED	(TITLE)	•••••	
Serial Number _			Size		_	
Color	Туре	e of Skirting				
	Jnit [] Window Air U		(Underpinni			
Unlaga nya avistina:	Septic Tank Approval		/			
Omess pre-existing:	(Copy to be provided)	(Number)	/	(Date)		
	Well Approval(Copy to be provided)	(Number)	/_	(Date)		
Previous owner:			Previous	decal #		
			Moving	Permit #		
Mobile/manufactured	d home purchased:		to county: _			
(Date ELECTRICAL COMPANY			, L	(Date)	
(SCE&G MCEC		Dicerreur und		Name)		
Permit/Decal. Chang A <i>Moving Permit</i> Mu <i>The Decal Must be Pl</i> It is the Permit Holdi	Comes invalid when owner fies in ownership or locatio st be purchased <u>before</u> the laced on a window facing a er's responsibility to sched ion call (864) 445-0000 ext22 fridays.	IN REQUIRES A NEW PERM ABOVE MOBILE/MANUFA A ROAD TO BE CLEARLY AI ULE THE INSPECTION AT I	MIT/DECAL WIT ACTURED HOM ND READILY VIS LEAST 2 BUSIN OF 8:30 AM A	THIN 15 DAYS OI IE CAN BE RE-LC SIBLE FROM THE ESS DAYS IN AD	OCATED. F <i>OUTSIDE</i> VANCE. TO	
(SIGNATURE OF OWN	NER OR AUTHORIZED AGENT)					
(A	APPROVED BY)	DATE/_	/			
				DELWARE 3		

SALUDA COUNTY BUILDING CODE OFFICE

REVISED 04/10/2019

400 W. HIGHLAND AVE SALUDA, SC 29138 E-MAIL bsanders@safebuilt.com

TELEPHONE: 864-445-0000 ext.2272 FAX: 864-445-9405