

**CITY OF POOLER
INSPECTIONS DEPARTMENT
(912)748-6652**

MOBILE HOME PERMIT APPLICATION

For Office Use Only:

Approved for Issuance by: _____
 Date of Application _____ Date Issued _____
 Permit Number _____ Permit Fee _____

1. Name of Applicant _____
2. Mailing Address _____
3. Telephone Number _____
4. Proposed Address of Mobile Home _____
5. Lot Number _____
6. Name of Mobile Home Park _____
7. Make of Mobile Home _____
8. Size of Mobile Home _____ 9. Value of Mobile Home \$ _____
10. Serial Number _____ 11. Year Model _____
12. HUD Number _____
13. Is There A Mobile Home On This Lot Now? Yes _____ No _____
14. Name of Mobile Home Installer _____
15. Name of Electrical Contractor _____
16. Source of Water: Public/Community _____
17. Source of Sewer: Public/Community _____

Applicant Signature

Setback Requirements

	Min. Lot	Front	Rear	Side
MH-1	10,500	30	20	10
MH-2A	6,000	35	20	10
MH-2B	44,000	50	30	30

****Note:** There must be at least 20 feet between each manufactured home.

FOR OFFICE USE ONLY:

Health Dept. Approval _____
 Date _____
 Zoning Approval _____
 Date _____