



Tazewell County Building Safety Department
Manufactured/Mobile Home Application

Tax Map # _____ or Account # _____

Property Owners Name _____

Owners Name (on title) _____

Address _____

Location of Home _____

Phone _____ Town Permit # _____ Town of _____

Replacing existing mobile home ____yes ____no VDOT entrance permit _____

County Entrance permit _____ Erosion & Sediment permit _____

Water and Sewer ____public ____private Town of _____ TC PSA _____

Health Department permit _____ Issued by _____ on _____

Model Year _____ Make _____ WD _____ LG _____ COLOR _____

Purchased from _____

Installer Name _____ License # _____

Electrical Contractor _____ License# _____

Plumbing Contractor _____ License # _____

HVAC Contractor _____ License # _____

Cost of Home (before tax) _____

I AFFIRM THAT ANY INFORMATION GIVEN ON THIS APPLICATION IS ACCURATE AND TRUE. ANY CHANGES WILL BE REPORTED TO THE BUILDING OFFICIAL. ONLY WORK DESCRIBED ON THIS APPLICATION WILL BE COVERED UNDER THIS PERMIT, ANY MISREPRESENTATION, FALSIFICATION OR MISLEADING INFORMATION VOIDS THIS PERMIT.

APPLICANT SIGNATURE _____ DATE _____

COUNTY USE ONLY

PERMIT _____

FEE _____