

# APPLICATION FOR MOBILE HOME PERMIT GILMER COUNTY, GEORGIA

OWNER: \_\_\_\_\_ PHONE: ( ) \_\_\_\_\_

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

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

DIRECTIONS TO PROPERTY: \_\_\_\_\_

WILL THIS STRUCTURE BE IN A FLOOD PLAIN: NO \_\_\_\_\_ YES \_\_\_\_\_

DISTANCE HOUSE SITE FROM STREAM: \_\_\_\_\_ FEET

NAME OF SUBDIVISION: \_\_\_\_\_ PHASE \_\_\_\_\_ LOT #: \_\_\_\_\_

ACREAGE SIZE: \_\_\_\_\_ GATE CODE: \_\_\_\_\_

SETBACK REQUIREMENTS: FRONT \_\_\_\_\_, SIDE \_\_\_\_\_, REAR \_\_\_\_\_

ARE THERE OTHER STRUCTURES ON THIS PARCEL? **YES** or **NO**

IF YES, WHAT? \_\_\_\_\_

IS THIS A CORNER LOT? **YES** or **NO**

IS THIS PROPERTY ADJACENT TO A NATIONAL FOREST? **YES** or **NO**

WATER SUPPLY: WELL \_\_\_\_\_ COMMUNITY \_\_\_\_\_ PUBLIC \_\_\_\_\_ SPRING \_\_\_\_\_

SEWAGE SYSTEM: SEPTIC \_\_\_\_\_ COMMUNITY \_\_\_\_\_ PUBLIC \_\_\_\_\_

POWER SUPPLY: AEMC \_\_\_\_\_ GEORGIA POWER \_\_\_\_\_

MOBILE HOME: MAKE \_\_\_\_\_ ID # \_\_\_\_\_

YEAR: \_\_\_\_\_ SIZE: \_\_\_\_\_ COLOR: \_\_\_\_\_

NUMBER OF BEDROOMS: \_\_\_\_\_

PURCHASED FROM: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

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

INSTALLER LICENSE #: \_\_\_\_\_

TAX ASSESSORS MAP CODE # \_\_\_\_\_ ZONING \_\_\_\_\_

CURRENT YEAR DECAL #: \_\_\_\_\_

### NOTICE

APPROVAL OF MOBILE HOME APPLICATION DOES NOT CONSTITUTE ISSUANCE OR RECEIPT OF A MOBILE HOME PERMIT.

**\*\*\* NO OCCUPANCY ALLOWED UNTIL FINAL INSPECTION HAS BEEN APPROVED\*\*\***

**You have 6 months from the date of issuance to have your first inspection. After each inspection you are given another 6 months to have your next inspection. After 6 months of no inspections your job is considered abandoned and the permit is EXPIRED.**

**I HEREBY APPLY FOR A PERMIT TO DO THE WORK STATED ABOVE, AND ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND THE ATTACHED GILMER COUNTY MOBILE HOME GUIDELINES. I ALSO HEREBY CERTIFY THAT THE ABOVE INFORMATION IS COMPLETE AND CORRECT.**

\_\_\_\_\_  
Signature of Property Owner / Date

OR

\_\_\_\_\_  
Signature of Agent/Contractor / Date

6/22/09

\_\_\_\_\_  
Building Official Approval

\_\_\_\_\_  
Zoning Official Approval