Move On Permit Application
Pierce County Community Development
312 Nichols Street, Suite 3, Blackshear, GA 31516
912.449.2037 912.449.2224 fax

Subdivision:		Parcel:	Lot:	
Job Address:		City: _		
Property Owner:		_		
Owner Address		City:		
Contact Number:		<u>-</u>		
Applicant:				
Applicant Address.		City:		
Contact Numbers		, <u>-</u>		
Location Address:		City:		
	MANUFACTURED HON			
Make and Model:			Year:	
Serial Number:			Value:	
	Size:	Fireplace:		
Bedroo	oms:	Central H/A:		
Bathroo	oms:	Roofing: _		
External V	Vall:	Foundation:		
	LAND INFOR	RMATION		
Existing Home/Manufacture	ed House on Property:	Yes	No	
l '	g Culvert on Property:	Yes	No	
,	tem/Well on Property:	Yes	No	
	ptic Tank on Property: otic Tank a \$40 Existing	Yes	No will need	l to be done
II TES TOT EXISTING SEP	LIC TALIK A \$40 EXISTING	J System Evalua	LIOIT WIII TIEEC	i to be done.
Zoning:		Acres:		
MH Installer:		Contact Numb	per:	
Power Compa	any: Satilla REA	GA Po	wer	
All inst	allers and contractors mu	st have a valid sta	ate license.	
	pection will be performed			
All move on requireme Manufactured homes older than	ents must be meet before			
	10 years will require arre	additional 10 year		or to move on permit.
Printed Name:			Date:	
Signature:				
ACCEPTED DV:	For Office U			
ACCEPTED BY: APPROVED BY:	DATE: DATE:	PERMIT: _ FEE:		
ISSUED BY:	DATE:	' <u>-</u>		