

## **Elbert County Application**

## **Mobile Home Permit**

Korroom	Date:/	/			
Owner Information:					
Name:	Address:				
Email:	Phone N	Phone Number:			
Property Information:					
Address:					
Map: Parcel:	Subdivision:	Lot:	Acres:		
Mobile Home Information	<u>:</u>				
Mobile Home Owner:		(name must l	pe exactly the same as property owner)		
Year: Make:	Model:	Serial Nu	umber:		
Bedrooms: Bathroor	ns: Fireplaces:	Length ar	nd Width:		
Front Deck Square Footag	e: Is deck cove	red? Yes/No	*4X6 Minimum*		
Back Deck Square Footage	e: Is deck cove	ered? Yes/No	*4X6 Minimum*		

\*\*Please attach the bill of sale and copy of title (if applicable) with application. For used mobile homes, we need proof that taxes are current from county mobile home is located in.

Health Department Septic Permit Number: (Steven Wooten 706-283-2453)

Mobile Home Mover: \_\_\_\_\_ License Number: \_\_\_\_\_

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as their authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the code official shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

Signature of Applicant	Printed Name	