

## Edgecombe County

Planning: 252-641-7803  
Inspections: 252-641-7802



PLANNING & INSPECTIONS  
Email address:  
[permit@edgecombeco.com](mailto:permit@edgecombeco.com)

### Information Needed for Mobile Home Permits

- ✓ **Zoning Certificate:** The Edgecombe County Planning Department (Room 205) will provide a zoning for all property not located in any Town Limits or ETJ, with the exception of Leggett and Speed. If you are moving to a town or will be in a town's ETJ, please obtain the zoning from that jurisdiction prior to applying for permits.
- ✓ **Septic Report or Improvements Permit:** The Environmental Health Department (Room 443) must give approval of all septic systems prior to any permits being issued. A copy of the septic system report is required before a mobile home permit is issued. If public sewer is used, this document will not be needed.
- ✓ **Bill of Sale or Title:** This document verified ownership of the mobile home.
- ✓ **Tax Assessor's Certification:** This document must be signed off on by the Edgecombe County Tax Assessor's (Room 312) and Tax Collector's (Room 154) offices. Tax Departments may request title of home.
- ✓ **Moving Permit:** If the home is being moved, a moving permit must be obtained before a mobile home permit is issued.
- ✓ **Set up Contractor Form:** This document must be filled out and signed by the setup contractor or the dealership.

Please present all of the applicable documents with your permit application to the Edgecombe County Planning & Inspections Department. Permits are issued between 8:00 a.m. and 4:00 p.m., Monday – Friday in Room 205. Payment is accepted by cash, check, credit card or debit card. No over the phone credit card or debit card payments will be accepted.

**EDGECOMBE COUNTY PLANNING & INSPECTIONS**

P.O. BOX 10, 201 St. Andrew Street  
Tarboro, NC 27886

Phone: 252-641-7802 Email: [permit@edgecombeco.com](mailto:permit@edgecombeco.com)

**Manufactured Home Building Permit Application**

Application Date: _____	Tax Parcel ID#: _____
Applicant: _____	Phone #: _____
Homeowner (as shown on title/bill of sale): _____	Phone #: _____
Address: _____	City: _____ State: _____ Zip: _____
Person to live in Home: _____	Phone #: _____
Land Owner's Name: _____	Phone #: _____
Value of Home: _____	Size of Home: _____ Year of Home: _____
Power Company: _____	Premise or Account #: _____
Dealer/Sales Co. & License #: _____	Phone #: _____
Address: _____	
Set-up Contractor & License #: _____	Phone #: _____
Address: _____	
Electrician & License #: _____	Phone #: _____
Address: _____	
A/C Installer & License #: _____	Phone #: _____
Address: _____	
Plumber & License #: _____	Phone #: _____
Address: _____	

Underpinning? Brick <input type="checkbox"/> Vinyl <input type="checkbox"/> Well <input type="checkbox"/> County Water <input type="checkbox"/> Has driveway been installed on property? Yes <input type="checkbox"/> No <input type="checkbox"/>	Permit Fees: Singlewide \$110.00 Doublewide \$150.00 Triplewide \$175.00
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*I hereby certify that all information in this application is correct and will comply with the State Building Code and all other applicable State and local laws, ordinances and regulations. **Work may only begin after approval and issuance of the permit.** Failure to obtain a manufactured home permit will result in a Stop work Order and a \$100 contractor fine/ \$50 homeowner fine will be assessed. Zoning Certificate may need to be purchased from the Town if the home is Inside of a Town's Jurisdiction. Re-inspection fees are charged at \$40 per trip.*

\_\_\_\_\_  
**Printed Name of Applicant/ Agent**

\_\_\_\_\_  
**Signature of Applicant/Agent**

\_\_\_\_\_  
**Date**

**EDGECOMBE COUNTY ASSESSOR'S OFFICE**  
 201 SAINT ANDREW ST., SUITE 312, TARBORO, NC 27886  
**MANUFACTURED HOME TAX CERTIFICATION APPLICATION**

New owner name: \_\_\_\_\_  
 New owner mailing address: \_\_\_\_\_  
 New location address: \_\_\_\_\_ Lot Number \_\_\_\_\_  
 Is the home located in a Mobile Home Park?  Yes  No If YES, list the name of the mobile home park:  
 \_\_\_\_\_  
 Parcel ID: \_\_\_\_\_  
 Land owner's name if different than homeowner: \_\_\_\_\_

Listing for Tax year(s): \_\_\_\_\_ Purchase date: \_\_\_\_\_ Cost: \_\_\_\_\_ Year: \_\_\_\_\_  
 Make: \_\_\_\_\_ Model: \_\_\_\_\_ Width: \_\_\_\_\_ Length: \_\_\_\_\_ VIN# \_\_\_\_\_  
 Home purchased from a dealer? Yes  No   
 Home purchased from a Financial Institution as: Repossessed  Used home   
 Home purchased from individual? Yes  No  If YES, give name and address of prior owner:  
 \_\_\_\_\_ address: \_\_\_\_\_  
 Home will be: Rental  Occupied by Owner  Held for Inventory   
**If home purchased from individual or financial institution (excluding homes from dealer lot), please answer the following:**  
 Address of the home at time of purchase if different from address above. Street \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ County: \_\_\_\_\_  
 Was the home moved to the current location before or after purchase? \_\_\_\_\_ Before  After   
 Was a MOBILE HOME MOVING PERMIT obtained by you to move the home? \_\_\_\_\_ Yes  No   
 If NO, please list the name of person to whom the MOVING PERMIT was issued: \_\_\_\_\_  
 MOBILE HOME MOVERS Name and Address: \_\_\_\_\_  
 Have ALL taxes for the current year and prior years been paid? Yes  No   
**If NO, all prior years taxes must be paid before certification will be issued.**  
 Years owed \_\_\_\_\_ Amount owed \_\_\_\_\_ Acct # \_\_\_\_\_  
 Has the title been updated with DMV? Yes  No   
 Name shown on title: \_\_\_\_\_

This form must be completed, signed, dated, and returned to the Edgecombe County Tax Assessor's Office. Information not completed or any discrepancies in the information provided will delay the processing time for completing the Manufactured Home Certification form. **If you are relocating the home you must provide the Edgecombe County Planning Office with a Mobile Home Moving permit.**

**Affirmation of homeowner:** GS 105-310-.311. Under penalties prescribed by law, I hereby affirm that to the best of my knowledge and belief this listing, including any accompanying statements, is true and complete. **Social Security Number:** The disclosure of this number is voluntary. This is needed to establish the identification of individuals. The authority to require this number for the Administration of a tax is given by United States Code Title 42, Section 405©(2)©(i).

Taxpayer Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Employer: \_\_\_\_\_ Phone: Work: \_\_\_\_\_ Home: \_\_\_\_\_  
 Social Security No. \_\_\_\_\_

**FAILURE TO SUBMIT THIS FORM WILL DELAY PERMITS**

**EDGECOMBE COUNTY ASSESSOR'S OFFICE**  
201 SAINT ANDREW ST., SUITE 312, TARBORO, NC 27886  
**MANUFACTURED HOME TAX CERTIFICATION**

TAX ACCESSOR'S OFFICE RM 312

**EDGECOMBE COUNTY ASSESSOR'S OFFICE CERTIFIES THAT THE  
MANUFACTURED HOME LISTED ABOVE IS PROPERLY LISTED/REGISTERED  
WITH OUR OFFICE.**

Certified by: \_\_\_\_\_ Date: \_\_\_\_\_

TAX COLLECTOR'S OFFICE RM 154

**EDGECOMBE COUNTY TAX COLLECTIONS OFFICE CERTIFIES ON THE  
MANUFACTURED HOME LISTED ABOVE:**

**THERE ARE NO TAXES DUE TO EDGECOMBE COUNTY.**

**ALL EDGECOMBE COUNTY PROPERTY TAXES HAVE BEEN PAID.**

Certified by: \_\_\_\_\_ Date: \_\_\_\_\_

**Information for Set-up Contractor or Dealership**

**Requirement for Edgecombe County  
Manufactured Home Building Permit Application**

Contractor's Name & License #: \_\_\_\_\_ Phone #: \_\_\_\_\_

Contractor's Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

I propose to set-up a properly labeled manufactured home at the following address:

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

I am a North Carolina licensed manufactured home set-up contractor.

License #: \_\_\_\_\_ Name of Business: \_\_\_\_\_

\_\_\_\_\_  
**Printed Name of Set-up Contractor**

\_\_\_\_\_  
**Signature of Set-up Contractor**

\_\_\_\_\_  
**Date**

I am the owner of the proposed manufactured home. It is my intention to personally set-up the proposed manufactured home, and I understand that problems which may arise due to set-up of the home will be solely my responsibility, and I will be left with no recourse through the State or local jurisdiction and must assume total liability for correction of any problems the occur as a result of the set-up of the manufactured home. I personally have a thorough knowledge of the requirements of the **CURRENT** State of North Carolina Regulations for Manufactured Homes that require me to set-up the home in accordance with the home manufacture's installation manual for **NEW** manufactured homes and either the home manufacture's installation instructions or the **CURRENT** State of North Carolina Regulations for Manufactured Homes for **USED** manufactured homes with regard to the set-up of my home.

\_\_\_\_\_  
**Printed Name of Owner**

\_\_\_\_\_  
**Signature of Owner**

\_\_\_\_\_  
**Date**

**NOTE: ONLY the CURRENT manufactured home manufacturer's installation instructions may be used for the installation of a NEW manufactured home. If the homeowner is acting as his or hers own set-up contractor as prescribed in Section 1.2.4 of the CURRENT State of North Carolina Regulations for Manufactured Homes and in all cases the license name and number of the set-up contractor shall appear on the permit.**