

Application Date: _____

Application #: _____

Craven County

Inspections Department
2828 Neuse Blvd.
New Bern, NC 28562
Inspections (252) 636-4987, Fax (252) 636-4984

MANUFACTURED HOME INSPECTION

**** All manufactured homes in Craven County must be Wind Zone II or III ****

Do you have a health permit? ___yes ___no **If yes**, what is the permit number? _____

Water source _____ Sewer source _____

Year, make and model of the manufactured home _____

Is the manufactured home: new _____ (or) used _____ Number of bedrooms _____
___Single Wide ___Double Wide ___Triple Wide Length _____ Width _____

Serial number (**required**) _____ Wind zone designation _____

Where is the wind zone label located in the home? _____

Location (please provide directions) : _____

Please list the following information:

Set up contractor _____ License # _____

Dealer _____ License # _____

Electrical contractor _____ License # _____

Mechanical/Heating and Air contractor _____ License # _____

Plumbing contractor _____ License # _____

What power company will be serving your home? _____

Premise Number (issued by power company) (if applicable) : _____

*** Note: All manufactured homes shall be set up such that there is positive drainage from beneath and away from the perimeter of the home per North Carolina Regulations for Manufactured Homes, Sect. 3.3.4**

*** Two days shall be allowed for an inspection after the request has been made. I have read and understand the general requirements for manufactured home permits as set forth by the Craven County Inspections Department.**

Applicant Signature _____ **Date** _____