

**GRANVILLE COUNTY  
INSPECTION DEPARTMENT  
MOBILE HOME PERMIT APPLICATION**

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Owner's Name: \_\_\_\_\_

Address or Directions: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Power Company: \_\_\_\_\_

***Mobile Home Information:***

Serial #: \_\_\_\_\_ Make/Model: \_\_\_\_\_

Year: \_\_\_\_\_ Width & Length: \_\_\_\_\_

TOTAL PROJECT COSTS: \_\_\_\_\_

***Set Up Contractor Information:***

Name: \_\_\_\_\_ License: \_\_\_\_\_

Phone Number: \_\_\_\_\_

***Electrical Contractor Information:***

Name: \_\_\_\_\_ License: \_\_\_\_\_

Phone Number: \_\_\_\_\_

***Plumbing Contractor Information:***

Name: \_\_\_\_\_ License: \_\_\_\_\_

Phone Number: \_\_\_\_\_

***Heating & Air Contractor Information:***

Name: \_\_\_\_\_ License: \_\_\_\_\_

Phone Number: \_\_\_\_\_