

Application # \_\_\_\_\_

Harnett County Central Permitting  
PO Box 65 Lillington, NC 27546  
910-893-7525 Fax 910-893-2793  
www.harnett.org/permits

**Application for Existing Septic Tank in a Mobile Home Park**

Applicant Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Lot Address: \_\_\_\_\_

Name of Park: \_\_\_\_\_ Lot Number: \_\_\_\_\_

Parcel: \_\_\_\_\_ PIN: \_\_\_\_\_

\_\_\_ SW \_\_\_ DW \_\_\_ TW (Size \_\_\_ x \_\_\_) # Bedrooms \_\_\_ Year \_\_\_

Power Company: \_\_\_\_\_ (For Progress Energy we need the premise number.)

Specific Directions to Job from Lillington:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**There is a \$100.00 charge for this service. This certification is subject to revocation if the intended use of the septic system changes, or if false information is provided on this application.**

You signature below certifies that all above information is correct.

Signature of owner or authorized agent: \_\_\_\_\_

<b>DO NOT SIGN BELOW – FOR OFFICE USE ONLY</b>	
Authorization of Existing System	
_____ Signature of Environmental Health Specialist	_____ Date