

City of Lyons

161 NE Broad St
Lyons, GA 30436
Office (912) 526-3626
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MOBILE HOME/MOVING PERMIT APPLICATION

Permit # _____

Date: _____ Current Zone: _____

Property Owner Name: _____

Site Address: _____ Tax Map Parcel: _____

Phone Number: _____

Mailing Address (if different from above): _____

City: _____ State: _____ Zip: _____

Name of Installer _____

Phone# _____ Mailing Address _____

City: _____ State: _____ Zip: _____

Structure Information:

Site:	Type:	Condition:	Proposed Use:
<input type="checkbox"/> New Lot	<input type="checkbox"/> Single Wide	<input type="checkbox"/> New	<input type="checkbox"/> Residence
<input type="checkbox"/> Existing	<input type="checkbox"/> Double Wide	<input type="checkbox"/> Used	<input type="checkbox"/> Storage
	<input type="checkbox"/> Triple Wide		<input type="checkbox"/> Commercial Office
	<input type="checkbox"/> Modular (Units:____)		<input type="checkbox"/> Other:_____

Size _____ Decal# _____ Dealer _____

Year _____ Make _____ Model _____

Serial Numbers _____

Structure (Coming from): _____

Fee Schedule

Condition Bond/ Deposit \$500

Refundable if conditions are met before 90 days from date of inspection unless all conditions and standards are met prior to the end of the 90 days or an extension has been issued in writing by the Code Enforcement Officer. Entire bond will be **forfeited** by applicant after 90 days if conditions are not met.

Permit Fee \$200 (Nonrefundable)

Failure to remove a new manufactured home and pre-owned manufactured home from the jurisdiction upon failure to receive a certificate of occupancy or maintain a certificate of occupancy or obtain a moving permit for a previously permitted new or pre-owned manufactured home shall be punishable by a fine of \$ 50.00. Each day any violation under this ordinance continues shall be considered a separate offense.

Term – Building permit is active for six (6) Months from date of issuance: Provided that the work is not completed within the initial permit term.

A copy of the Recorded Deed and/or Recorded plat must be attached to this application

Signature of applicant verifies the above information is true and correct. I understand the conditions under which my permit is being approved and accepted that no changes or refunds can be made once issued. I am authorized to sign for the property owner and understand that any misrepresentation of information on this application may result in the revocation of the permit and/or possible enforce action being initiated against the property owner or his/her representative.

Applicant Name

Signature

For Official Use Only

Check List – **Please Initial**

_____ Permit Fees Paid

_____ Recorded Deed and/or Recorded Plat

_____ Bond/Deposit

_____ Property Taxes must be current

Approved by _____ Date _____

Inspection	Inspected By	Initial inspection Date	Final (approved) inspection
Interior Condition			
Exterior Condition			
Sanitary Facilities			
Heating System			
Electrical System			
Hot Water Heater			
Egress Windows (fire Dept.)			
Ventilation			
Smoke Detectors (Fire Dept.)			
Steps and Landings			
Skirting			

Zoning Verified by _____

Date _____

<p>Certificate of Occupancy Approved by _____</p> <p>Title _____</p> <p>Date _____</p>
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