



BEAUFORT COUNTY INSPECTION DEPARTMENT

Multi Government Center – 100 Ribaut Road
Post Office Drawer 1228, Beaufort, SC 29901 – 1228
Phone: (843) 255-2065 - Fax: (843) 255-9410



Manufactured Home Permit Requirements

Home Registration Requirements

Obtain Zoning Permit:

- Three copies of a plat or site plan.
- Copy of a septic tank final permit (unless replacing an existing home).
- Physical address for the property where the mobile home is being placed.

Obtain a placement permit:

- Title of the mobile home in the new owners name.
(Dealers may use bill of sale and title application receipt.)
- Two copies of a plat or site plan with zoning approval stamp.
- Copy of zoning permit.
- Septic tank final permit (unless replacing an existing home).
- Proof of wind zone II.
- If home is pre-owned, provide previous owners name.
- Impact fee assessment.

Obtain Miscellaneous Electrical Permit./Site Inspections:

- Complete permit application and applicable affidavits.
- If home is in a Flood Zone, provide flood elevation certificate to certify that the mobile home and air conditioner platform is set above base flood elevation.
- Call Beaufort County Inspection Line to schedule an inspection (843) 255-2078.
- Contact power company and apply for electrical service.

Note: The home needs to be open or someone needs to be there because we have to get inside the mobile home. The silver decal and the address must be on the mobile home in order to get your inspection. Once the inspection is done and passes we will contact the power company and let them know that the power can be turned on.

If you are moving a mobile home out of Beaufort County we will need a paid tax receipt for the mobile home for the current year.

**BEAUFORT COUNTY BUILDING CODES DEPARTMENT
PO DRAWER 1228, BEAUFORT, SC 29901
Office:(843) 255-2065 Fax:(843) 255-9410**

MANUFACTURED HOME SUB-CONTRACTOR ROSTER

Mover / Installer Name: _____

Owner Name: _____

Job Location: _____

Parcel ID#: _____

I, _____, AS MOVER/INSTALLER/OWNER, AFFIRM THAT THE INFORMATION I HAVE PROVIDED BELOW IS TRUE AND CORRECT. I AM AWARE THAT ANY FALSE INFORMATION PROVIDED BELOW IS A VIOLATION OF THE CODE OF ORDINANCES OF BEAUFORT COUNTY PURSUANT TO BEAUFORT COUNTY ORDINANCE 18-55, FOR WHICH I MAY BE CITED AND/OR FINED.

SIGNATURE OF APPLICANT

PHONE NUMBER

DATE

Manufactured Home Installer:

Company Name _____

Contact Name _____

Address/Phone _____

State License # _____ **Beaufort County Business License #** _____

Circle All That Apply: **W/BME** **DBE** **SBE** **DOT**