

Initial Application Date: 12.30.13

In home beauty shop

Application # 13-50032685
DRB # _____ CU # _____

COMMERCIAL

COUNTY OF HARNETT LAND USE APPLICATION

Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 Fax: (910) 893-2793 www.harnett.org/permits

LANDOWNER: BARRY EADIE Mailing Address: 129 CYPRESS CREEK FARM RD

City: SANFORD State: NC Zip: 27332 Contact # 919-449-1189 Email: _____

APPLICANT*: _____ Mailing Address: _____

City: _____ State: _____ Zip: _____ Contact # _____ Email: _____

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: BARRY EADIE Phone # _____

PROPERTY LOCATION: Subdivision: CYPRESS CREEK PHASE 1 Lot #: 46 Lot Size: _____

State Road # _____ State Road Name: CYPRESS CREEK FARM RD Map Book & Page: F 1354A

Parcel: 03-9507-0005-12 PIN: 9577-07-2332

Zoning: R20K Flood Zone: X Watershed: na Deed Book & Page: 3091, 830 Power Company*: _____

*New structures with Progress Energy as service provider need to supply premise number _____ from Progress Energy.

SPECIFIC DIRECTIONS TO THE PROPERTY FROM LILLINGTON: TAKE HWY 27 TO HWY 87 TAKE RIGHT EXIT, GO 2 MILES TURN LEFT ONTO CALVEY CHURCH Rd. TURN IMMEDIATE LEFT ONTO CYPRESS CREEK FARM RD 129 IS 4TH HOUSE ON THE LEFT.

PROPOSED USE:

- Multi-Family Dwelling No. Units: _____ No. Bedrooms/Unit: _____
- Business Sq. Ft. Retail Space: _____ Type: Beauty shop # Employees: 2 Hours of Operation: M-SAT 9-6PM
- Daycare # Preschoolers: _____ # Afterschoolers: _____ # Employees: _____ Hours of Operation: _____
- Industry Sq. Ft: _____ Type: _____ # Employees: _____ Hours of Operation: _____
- Church Seating Capacity: _____ # Bathrooms: _____ Kitchen: _____
- Accessory/Addition/Other (Size _____ x _____) Use: _____

Water Supply: County _____ Existing Well _____ New Well (# of dwellings using well _____) *MUST have operable water before final
Sewage Supply: _____ New Septic Tank (Complete Checklist) Existing Septic Tank (Complete Checklist) _____ County Sewer

Comments: _____

If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted. I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

Barry Eadie
Signature of Owner or Owner's Agent

12-30-13
Date

This application expires 6 months from the initial date if permits have not been issued

A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION



Application for Plan Review

*DUH
12.30.13*

Application # 13-50032685

Date Received: 12-30-13

Received By: dyolunom

Name of Project: EADIES HAIR CUTTERY

Physical Address of Project: 129 CYPRESS CREEK FARM Rd
SANFORD NC 27332

Plans Submitted By: BARRY EADIE

Project Phone: (919)-499-1189

Contact Person/Address: SAHE

Contact Phone: ()- - ()- -

Contractor's Name/Info: _____

Contractor's Phone: ()- -

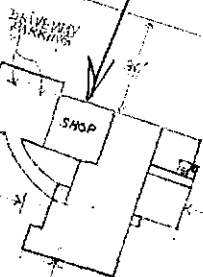
- Plans that are submitted will be reviewed as quickly as possible with an average time of review between 7-10 working days.
- Status checks may be conducted on plan reviews by visiting the website <http://hteweb.harnett.org/Click2GovBP/Index.jsp> or by calling the Harnett County Central Permitting Office (910-893-7525, Option #2), or the Harnett County Fire Marshal's Office (910-893-7580).
- Approved plans must be picked up from the Central Permitting Office and all fees paid before any required inspections can be conducted.



PEBBLES CT.

LOT
47 RESIDENTIAL
MARY BATTLE
109

Using existing
Garage for
Shop



LOT
46
129
1.37 AC

WET
LAND



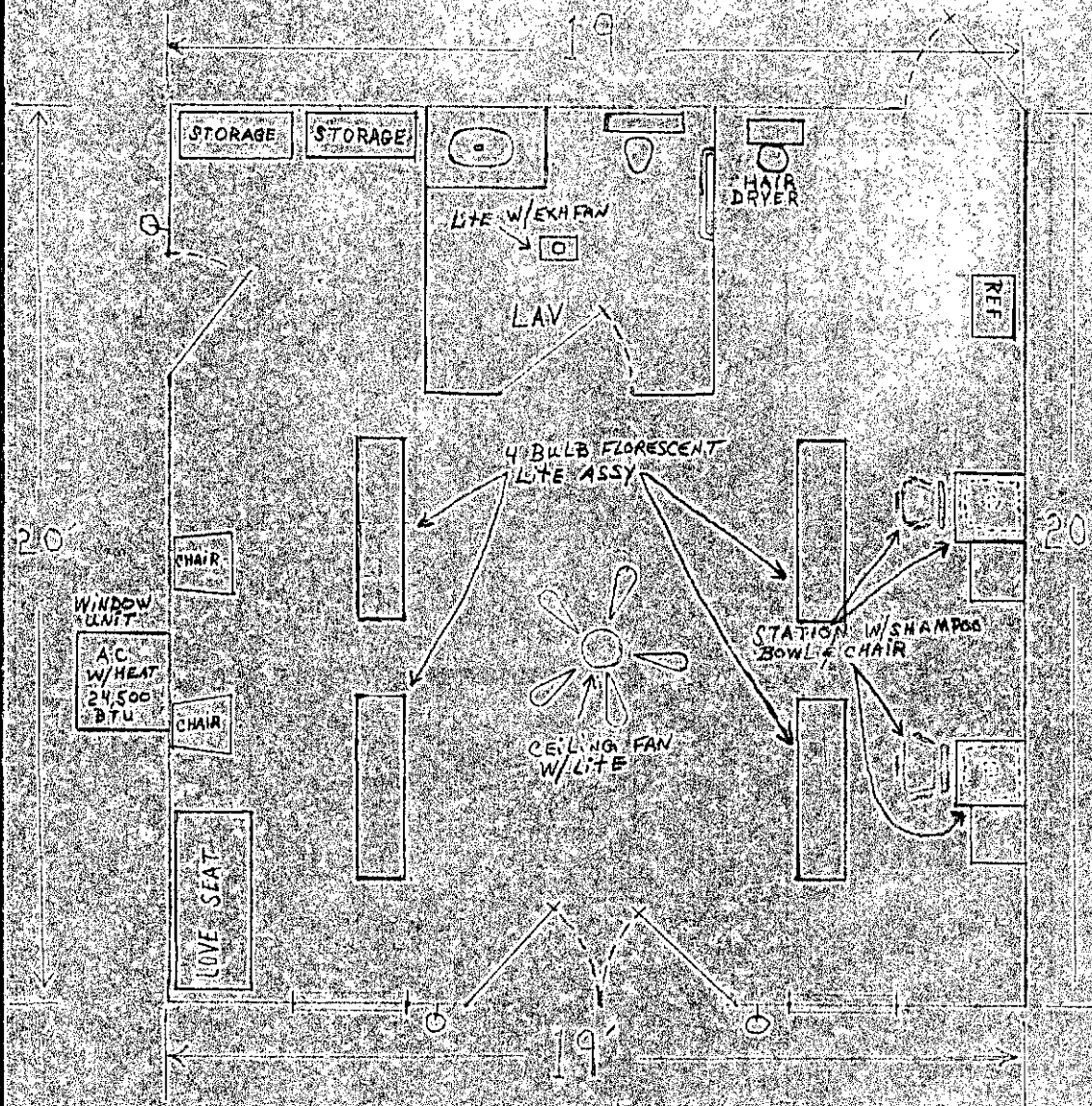
FIRE HYDRANT

BARNEY CT.

CYPRESS CREEK FARM RD.

LOT
45 RESIDENTIAL
WILLIAM TUCKER
177

PROJECT - SITE PLAN	DATE - 12 DEC 2015	PID - 9577-07-23320000	ZONE - RA20R
OWNERS - BARRY & MELBA EADIE	DEED BOOK - 1128	PAGE - 0173	ACRES - 1.37
ADDRESS - 129 CYPRESS CREEK FARM RD. SANFORD, NC 27326	PHONE - 719-497-1171		
COUNTY - HARNETT	LOCATION - SAME	SCALE - 1" = 32'	HOURS - MON-SAT 9AM-6PM



PROJECT - EADIE'S HAIR CUTTERY	DATE - 12 NOV 2013
OWNERS - BARRY & HELEN EADIE	DEED BOOK - 1128 PAGE - 0173
ADDRESS - 129 CYPRESS CREEK FARM RD. SANFORD, NC 27332	
ZONING DISTRICT - RA20R	SCALE - 3/8" = 1'

NAME: BARRY EADIE

APPLICATION #: 13-50032685

This application to be filled out when applying for a septic system inspection.

County Health Department Application for Improvement Permit and/or Authorization to Construct

IF THE INFORMATION IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT PERMIT OR AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration depending upon documentation submitted. (Complete site plan = 60 months; Complete plat = without expiration)

910-893-7525 option 1

CONFIRMATION # 4

Environmental Health New Septic System Code 800

- **All property irons must be made visible.** Place "pink property flags" on each corner iron of lot. All property lines must be clearly flagged approximately every 50 feet between corners.
- Place "orange house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks, out buildings, swimming pools, etc. Place flags per site plan developed at/for Central Permitting.
- Place orange Environmental Health card in location that is easily viewed from road to assist in locating property.
- If property is thickly wooded, Environmental Health requires that you clean out the **undergrowth** to allow the soil evaluation to be performed. Inspectors should be able to walk freely around site. **Do not grade property.**
- **All lots to be addressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred for failure to uncover outlet lid, mark house corners and property lines, etc. once lot confirmed ready.**
- After preparing proposed site call the voice permitting system at 910-893-7525 option 1 to schedule and use code 800 (after selecting notification permit if multiple permits exist) for Environmental Health inspection. Please note confirmation number given at end of recording for proof of request.
- Use Click2Gov or IVR to verify results. Once approved, proceed to Central Permitting for permits.

Environmental Health Existing Tank Inspections Code 800

- Follow above instructions for placing flags and card on property.
- Prepare for inspection by removing soil over **outlet end** of tank as diagram indicates, and lift lid straight up (if possible) and then **put lid back in place.** (Unless inspection is for a septic tank in a mobile home park)
- **DO NOT LEAVE LIDS OFF OF SEPTIC TANK**
- After uncovering **outlet end** call the voice permitting system at 910-893-7525 option 1 & select notification permit if multiple permits, then use code 800 for Environmental Health inspection. Please note confirmation number given at end of recording for proof of request.
- Use Click2Gov or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.

SEPTIC

If applying for authorization to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.

- { } Accepted { } Innovative { } Conventional { } Any
 { } Alternative { } Other _____

The applicant shall notify the local health department upon submittal of this application if any of the following apply to the property in question. If the answer is "yes", applicant **MUST ATTACH SUPPORTING DOCUMENTATION**:

- { } YES { } NO Does the site contain any Jurisdictional Wetlands?
 { } YES { } NO Do you plan to have an irrigation system now or in the future?
 { } YES { } NO Does or will the building contain any drains? Please explain. _____
 { } YES { } NO Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
 { } YES { } NO Is any wastewater going to be generated on the site other than domestic sewage?
 { } YES { } NO Is the site subject to approval by any other Public Agency?
 { } YES { } NO Are there any Easements or Right of Ways on this property?
 { } YES { } NO Does the site contain any existing water, cable, phone or underground electric lines?

If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service.

I Have Read This Application And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And State Officials Are Granted Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules.

I Understand That I Am Solely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making The Site Accessible So That A Complete Site Evaluation Can Be Performed.

Barry Eadie
PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

12-30-13
DATE



Plan Review, Inspection and Permit Fees

Application Number 13-50032685

\$150.00	<input type="checkbox"/>	Explosive Mat. (90 Days)
\$ 75.00	<input type="checkbox"/>	Explosive Mat. (72 Hrs)
\$ 35.00	<input type="checkbox"/>	Fireworks Public Display
\$ 50.00	<input checked="" type="checkbox"/>	Final Inspection
\$ 35.00 +2.00 per device	<input type="checkbox"/>	Fire Alarm Testing
\$ 35.00 + 2.00 per nozzle	<input type="checkbox"/>	Fixed Fire Suppression
\$ 25.00	<input type="checkbox"/>	Insecticide Fog/Fumigation
\$ 50.00	<input type="checkbox"/>	Pipe Test/UST/AGST
\$ 50.00	<input checked="" type="checkbox"/>	Plans up to 5000 ft ²
\$100.00	<input type="checkbox"/>	Plans 5001 ft ² to 10,000 ft ²
\$150.00	<input type="checkbox"/>	Plans 10,001 ft ² to 25,000 ft ²
\$250.00	<input type="checkbox"/>	Plans 25,001 ft ² and over
\$ 35.00 + 2.00 per Head	<input type="checkbox"/>	Sprinkler Certification Test
\$ 35.00	<input type="checkbox"/>	Standpipe Testing
\$ 25.00	<input type="checkbox"/>	Special Assembly
\$ 25.00	<input type="checkbox"/>	Temporary Kiosks/Displays
\$ 25.00	<input type="checkbox"/>	Tents, Canopies, Air Supported
\$ 50.00	<input type="checkbox"/>	Tank Installation (charge for each tank)
\$ 50.00	<input type="checkbox"/>	Tank Removal (charge for each tank)

\$ 100.00 Total

n/a Total device/heads

Michael L. Martin *MLN*
Code Enforcement Official

1/06/14
Date



January 6, 2014

Barry Eadie
129 Cypress Creek Farm Road
Sanford, NC 27332

Re: Eadies Hair Cuttery
129 Cypress Creek Farm Road
Sanford, NC 27332

Application Number 13-50032685

Mr. Eadie,

Thank you for submitting the plans for the new salon. The plans have been carefully reviewed by a qualified code enforcement official to examine for compliance with the North Carolina Fire Prevention Code and all other fire protection regulatory documents. There are some items that were found during the plan review process that need to be addressed before a final inspection of the new facility can be given. These items are outlined and described below.

• **505.1 Physical Address**

- The physical address of the building shall be posted in a conspicuous place so that it can be seen on approach from the road, access road, and/or parking lot.
- The numbers used to make up the physical address shall be at least 5 inches in height.

• **Fire Department Access**

- The fire department access shall extend to within 150 feet of all portions of the facility.
- The fire department access road shall be of an unobstructed width of not less than 20 feet and shall have an unobstructed vertical clearance of not less the 13 feet 6 inches.



- **506.1 Knox Box**

- A secure key box shall be installed on the new building that houses all keys to all the doors within the building in which the fire department would need access to in the event of an emergency.
- Knox Box ID stickers shall be placed on all exterior doors in which entry to the building may be gained.
- The box shall be mounted not to exceed 48 – 60 inches in height.
- The basic model for the buildings should be at least a selection from the 3200 Series listed on the order form.
- An order form is included with this letter.

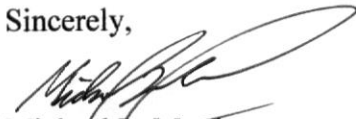
- **Fire Extinguishers**

- Fire extinguishers shall be placed as noted on the plans.
- The extinguishers shall not be less than 2A:10BC rating and mounted no higher than 5 feet above the finished floor.

Thank you again for submitting the plans for the new salon. Please review the plans and adhere to any notes and alterations that were made in addition to the original drawings. These remarks are for the plans that were submitted and its original intent. These remarks do not apply if the original intent changes or what was submitted on the above date changes. If you have any questions, please do not hesitate to call this office

Again, thank you and we look forward to working with you during the construction period!

Sincerely,



Michael L. Martin
Chief Deputy Fire Marshal



Application for Plan Review

Application # 13-50032685

Date Received: 12-30-13

Received By: djduchon

Name of Project: EADIE'S HAIR CUTTERY

Physical Address of Project: 129 CYPRESS CREEK FARM Rd
SANFORD NC 27332

Plans Submitted By: BARAY EADIE

Project Phone: (919)-499-1189

Contact Person/Address: SADE

Contact Phone: ()- - ()- -

Contractor's Name/Info: _____

Contractor's Phone: ()- -

*turned
existing
garage
into
beauty
shop*

- Plans that are submitted will be reviewed as quickly as possible with an average time of review between 7-10 working days.
- Status checks may be conducted on plan reviews by visiting the website <http://htweb.harnett.org/Click2GovBP/Index.jsp> or by calling the Harnett County Central Permitting Office (910-893-7525, Option #2), or the Harnett County Fire Marshal's Office (910-893-7580).
- Approved plans must be picked up from the Central Permitting Office and all fees paid before any required inspections can be conducted.

Application # 1350032685R

*Each section below must be filled out by whoever is performing the work. Must be owner or licensed contractor. Address, company name & phone must match information on state license.

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

COMMERCIAL

Application for Building and Trades Permit

Owner's Name: _____ Date: _____

Site Address: _____ Phone: _____

Directions to job site from Lillington: _____

Subdivision: _____ Lot: _____

Description of Proposed Work: _____

Heated SF _____ Unheated SF _____

General Contractor Information: Building Cost \$ _____

Barry Eadie
Building Contractor's Company Name

Telephone _____

Address _____

Email Address _____

Signature of Owner/Contractor/Officer(s) of Corporation _____

License # _____

Electrical Contractor Information: Electrical Cost \$ _____

Description of Work _____ Service Size: _____ Amps #T-Poles _____

Barry Eadie
Electrical Contractor's Company Name

Telephone _____

Address _____

Email Address _____

Signature of Owner/Contractor/Officer(s) of Corporation _____

License # _____

Mechanical Contractor Information: Mechanical Cost \$ _____

Description of Work _____ # Units _____

Mechanical Contractor's Company Name _____

Telephone _____

Address _____

Email Address _____

Signature of Owner/Contractor/Officer(s) of Corporation _____

License # _____

Plumbing Contractor Information: Plumbing Cost \$ _____

Description of Work _____ # Baths _____

Barry Eadie Clyde Dickey PLUMB
Plumbing Contractor's Company Name

Telephone 919-775-1118

221 JANCOW LANE LN
Address

Email Address _____

Sartford, NC 27332
Signature of Owner/Contractor/Officer(s) of Corporation

License # 0451

Insulation Contractor Information

Barry Eadie
Insulation Contractor's Company Name & Address

Telephone _____

***NOTE: General Contractor must fill out and sign the second page of this application**

Sprinkler Contractor Information

Sprinkler Contractor's Company Name _____

Telephone _____

Address _____

Email Address _____

Signature of Officer(s) of Corporation _____

License # _____

Fire Alarm Contractor Information

Fire Alarm Contractor's Company Name _____

Telephone _____

Address _____

Email Address _____

Signature of Officer(s) of Corporation _____

License # _____

Driveway Access - NC Department of Transportation Driveway Access/Permit? Yes No

I hereby certify that I have the authority to make necessary application, that the application is correct and that the construction will conform to the regulations in the Building, Electrical, Plumbing and Mechanical codes, and the Harnett County Zoning Ordinance. I state the information on the above contractors is correct as known to me and if **any** changes occur including listed contractors, site plan, number of bedrooms, building and trade plans, Environmental Health permit changes or proposed use changes, I certify it is my responsibility to notify the Harnett County Central Permitting Department of any and all changes.

Expired Permit Fees - 6 months to 2 years permit re-issue fee is \$150.00. After 2 years re-issue fee is charged at full price per current fee schedule.

Barry Eadie
Signature of Owner/Contractor/Officer(s) of Corporation

4-14-2014
Date

Affidavit for Worker's Compensation N.C.G.S. 87-14

The undersigned applicant being the:

General Contractor Owner Officer/Agent of the Contractor or Owner

Do hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:

Has three (3) or more employees and has obtained workers' compensation insurance to cover them.

Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them.

Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance covering themselves.

Has no more than two (2) employees and no subcontractors.

While working on the project for which this permit is sought it is understood that the Central Permitting Department issuing the permit may require certificates of coverage of worker's compensation insurance prior to issuance of the permit and at any time during the permitted work from any person, firm or corporation carrying out the work.

Company or Name: _____

Sign w/Title: Barry Eadie

Date: 4-14-2014

HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

LILLINGTON, NC 27546

For Inspections Call: (910) 893-7525 Fax: (910) 893-2793

Bldg Insp scheduled before 2pm available next business day.

Application Number	13-50032685	Date	4/17/14
Property Address	129 CYPRESS CREEK FARM RD		
PARCEL NUMBER	03-9567- - -0005- -12-		
Application type description	CP COMMERCIAL ADD & ALTER		
Subdivision Name			
Property Zoning	PENDING		

Owner	Contractor
-----	-----
EADIE BARRY S & HELEN G	OWNER
129 CYPRESS CREEK FARM RD	
SANFORD NC 27332	

--- Structure Information 000 000 CONVERTING GARAGE TO BEAUTY SALON SHOP

Flood Zone	FLOOD ZONE X	
Other struct info	PROPOSED USE	BEAUTY SHOP
	SEPTIC - EXISTING?	EXISTING

Permit	COMMERCIAL BUILDING PERMIT	
Additional desc	380 SQ FT MINIMAL WORK DONE	
Phone Access Code	1028943	
Issue Date	4/17/14	Valuation 0
Expiration Date	4/17/15	

Permit	COMMERCIAL ELECTRICAL PERMIT	
Additional desc		
Phone Access Code	1028950	
Issue Date	4/17/14	Valuation 0
Expiration Date	4/17/15	

Permit	COMMERCIAL INSULATION PERMIT	
Additional desc		
Phone Access Code	1028885	
Issue Date	4/17/14	Valuation 0
Expiration Date	4/17/15	

Permit	LAND USE PERMIT	
Additional desc		
Phone Access Code	1028901	
Issue Date	4/17/14	Valuation 0
Expiration Date	10/14/14	

Permit	COMMERCIAL PLUMBING PERMIT	
Additional desc		
Phone Access Code	1028984	
Issue Date	4/17/14	Valuation 0
Expiration Date	4/17/15	

HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

LILLINGTON, NC 27546

For Inspections Call: (910) 893-7525 Fax: (910) 893-2793

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Application Number 13-50032685

Page 2
Date 4/17/14

Special Notes and Comments

T/S: 12/30/2013 04:09 PM DJOHNSON --
27 TO 87 TAKE RIGHT EXIT GO 2 MILES
THEN LEFT ONTO CALVARY CHURCH RD TURN
IMMEDIATELY LEFT ONTO CYPRESS CREEK
FARM RD 129 IS 4TH HOUSE ON THE LEFT.

HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

LILLINGTON, NC 27546

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PARCEL NUMBER	03-9567- - -0005- -12-		
Application description	CP COMMERCIAL ADD & ALTER		
Subdivision Name			
Property Zoning	PENDING		

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
Permit type COMMERCIAL BUILDING PERMIT					
10	151	C151	C*BLDG FOOTING	_____	____/____/____
20	814	A814	ADDRESS CONFIRMATION	_____	____/____/____
30	179	C179	C*BLDG FINAL	_____	____/____/____
999	163	C163	C*BLDG FLOOR FRAMING	_____	____/____/____
999	155	C155	C*BLDG FOUNDATION	_____	____/____/____
999	153	C153	C*BLDG ROUGH IN	_____	____/____/____
999	159	C159	C*BLDG SLAB INSP	_____	____/____/____
999	157	C157	C*BLDG WATERPROOFING	_____	____/____/____
999	177	C177	C*HOOD SYSTEM	_____	____/____/____
999	185	I185	C*INSULATION INSPECTION	_____	____/____/____
999	175	C175	C*MOD MARRIAGE WALL	_____	____/____/____
999	173	C173	C*MODULAR INSPECTION	_____	____/____/____
999	161	C161	C*MONOLITH SLAB	_____	____/____/____
999	169	C169	C*OVERHEAD ELE, MECH, PLB	_____	____/____/____
999	165	C165	C*OVERHEAD FOR BUILDING	_____	____/____/____
999	171	C171	C*REBAR INSPECTION	_____	____/____/____
999	828	S828	C*SIGN INSPECTION	_____	____/____/____
999	167	C167	C*WALL INSPECTION	_____	____/____/____
999	822	H822	ENVIR. HLTH/SANITATION FINAL	_____	____/____/____
999		H824	ENVIR. OPERATIONS PERMIT	_____	____/____/____
999	880	F880	FM*ABOVE CEILING	_____	____/____/____
999	878	F878	FM*AGST/UST PIPES	_____	____/____/____
999	852	F852	FM*DAYCARE INSPECTION	_____	____/____/____
999	854	F854	FM*FINAL INSPECTION	_____	____/____/____
999	850	F850	FM*FIRE ALARM	_____	____/____/____
999	884	F884	FM*FIRE MISC INSPECTION	_____	____/____/____
999	870	F870	FM*FIRE WORKS / EXPLOSIVES	_____	____/____/____
999	856	F856	FM*FIXED FIRE SUPPRESSION	_____	____/____/____
999	882	F882	FM*FOGGING OR FUMIGATION	_____	____/____/____
999	858	F858	FM*SPRINKLER CERT TEST	_____	____/____/____

HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

LILLINGTON, NC 27546

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 Property Zoning PENDING

Page 4
 Date 4/17/14

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
999	864	F864	FM*SPRINKLER-FLOW	_____	___/___/___
999	860	F860	FM*SPRINKLER-FLUSH	_____	___/___/___
999	862	F862	FM*SPRINKLER-HYDRO	_____	___/___/___
999	866	F866	FM*STANDPIPE	_____	___/___/___
999	872	F872	FM*TANKS-ABANDON IN PLACE	_____	___/___/___
999	874	F874	FM*TANKS-INSTALLATION	_____	___/___/___
999	876	F876	FM*TANKS-REMOVAL	_____	___/___/___
999	868	F868	FM*TENTS	_____	___/___/___
999	357	P357	C*PLUMB UNDER SLAB	_____	___/___/___
999		MISC	COMMERCIAL MISCELLANEOUS	_____	___/___/___
Permit type			COMMERCIAL ELECTRICAL PERMIT		
999	265	E265	C*ELEC FINAL	_____	___/___/___
999	257	E257	C*ELEC OVERHEAD	_____	___/___/___
999	263	E263	C*ELEC RECONNECT	_____	___/___/___
999	253	E253	C*ELEC TEMP POWER CERT	_____	___/___/___
999	261	E261	C*ELEC UND POOL	_____	___/___/___
999	259	E259	C*ELEC UNDER SLAB	_____	___/___/___
999	255	E255	C*ELECTRICAL UNDERGROUND	_____	___/___/___
999	251	E251	C*ELEC ROUGH IN	_____	___/___/___
999	267	E267	C*ELEC TEMP SERVICE POLE	_____	___/___/___
Permit type			COMMERCIAL INSULATION PERMIT		
999	185	I185	C*INSULATION INSPECTION	_____	___/___/___
999	129	I129	R*INSULATION INSPECTION	_____	___/___/___
Permit type			LAND USE PERMIT		
999	818	Z818	PZ*ZONING INSPECTION	_____	___/___/___
999	820	Z820	PZ*ZONING/FINAL INSPECTION	_____	___/___/___
Permit type			COMMERCIAL PLUMBING PERMIT		

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Subdivision Name			
Property Zoning	PENDING		

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
999	361	P361	C*PLUMB FINAL	_____	__/__/__
	Permit type		COMMERCIAL PLUMBING PERMIT		
999	359	P359	C*PLUMB OVERHEAD	_____	__/__/__
999	355	P355	C*PLUMB SEWER CONNECTION	_____	__/__/__
999	353	P353	C*PLUMB WATER CONNECTION	_____	__/__/__
999	351	P351	C*PLUMB ROUGH IN	_____	__/__/__
999	357	P357	C*PLUMB UNDER SLAB	_____	__/__/__
999	363	P363	C*PLUMB GREASE TRAP	_____	__/__/__