Harnett County Central Permitting
PO Box 65 Elllington, NC 27546
Telephone Number 910-893-4759

Owner; SiName; William & Last Ha R Date: 8 - 06 - 07 Address: 2010 Old Stage Rd South Rull NC: Phone: (94) 820 - 3665	
Directionsito job site 421 south For 18 18 18 WA'N post Turn Right on old	stag
Subdivision: Pour Acros	+K.
Sconstruction Type: (Please Check))
Renovations Modular	建
Commercial Multi-Family	
Description of Proposed Work: F. A. 1997	AND THE RESERVE TO THE PERSON NAMED IN COLUMN TO THE PERSON NAMED
Total!Project Cost: 85000.00	
Header SE Craws Space (4) Bull-the light until in the state of the sta	
Acros Distribution Stories	
	4
Address Addres	<i>.</i> ,,
Signature of Officer(s) of Corporation	
The state of the s	
TS Poles Yes (1) Supplement (1) Overheart (1)	
Overhead () Service Size: Amps	
Electrical Contractor's Company Name Telephone 143 Min No. 9 Company Name 27504 20 2 56	
License #	
Agnature of Officer(s) of Corporation	,
Description of Work Tustall Hills	
Number of Units: 2 Type System Heat Punes Mechanical Cost \$!
Telephone Telephone	
Address License #	
Signature of Officer(s) of Corporation	
Discoult of Cognit Informati	
Number of Baths.	,
Plumbing Contractor's Company Name 01 Telephone Telephone	
200/3	•
Signature of Officer(s) of Corporation	
Residential () Other () Not Required ()	İ
Insulation Contractor's Company Name Address Telephone	

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Telephone

12/04

	Application #	
Commercial Jol	bs must fill out this portion System Information	
Sprinkler Contractor's Company Name	Contact & Telephone	
Address	License #	-
Signature of Officer(s) of Corporation Fire Alarm	n System Information	
Fire Alarm Contractor's Company Name	Contact & Telephone	
Address	License #	
Signature of Officer(s) of Corporation <u>Driveway Access</u> - NC Department of Tra	ansportation Driveway Access/Permit? Yes	No
Please answer the following questions then see a Permit T		·
Questionnaire per G.S. 87-14 Regulations as	s to Issue of Building Permits (Memo availa	ble upon request)
1. Do you own the land on which this bui	lding will be constructed? yes	no
2. Have you hired or intend to hire an ind the project?	lividual to superintend and manage co	
3. Do you intend to directly control & sup	ervise construction activities? ye	s no

4. Do you intend to schedule, contract, or directly pay for all phases of construction work to

5. Do you intend to personally occupy the building for at least 12 consecutive months following completion of construction and do you understand that if you do not do so, it

creates the presumption under law that you fraudulently secured the permit?

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, 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.

Signature of Oxforer/Contractor/Officer(s) of Corporation

be done?

Date

___ yes

_ yes

no

Application # 07 500 18143

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

The undersigned	ed applicant for Building Permit # being the:
	_ General Contractor Owner
	Officer/Agent of the Contractor or Owner
Do hereby con the work set for	firm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the in the permit:
	Has/have three (3) or more employees and has/have obtained workers'
	Has/have one (1) or more subcontractors(s) and has/have obtained workers' compensation insurance to cover them.
	Has/have one (1) or more subcontractors(s) who has/have their own policy of workers' compensation insurance covering themselves.
	Has/have not more than two (2) employees and no subcontractors.
Department issinsurance prior	on the project for which this permit is sought it is understood that the Central Permitting suing the permit may require certificates of coverage of worker's compensation to issuance of the permit and at any time during the permitted work from any person, ion carrying out the work.
Firm Name:	Whittenton Builders Interprises INC
Sign/Title:	John Chilleton of
Date:	8-05-02

Plan Box Number _____

Job Name WHITTEN TON

Date: 8-7-07

Required Inspections for SFA/SFD

Appl. #<u>0750018173</u> Valuation<u>#57, 283</u> #50,158 Sq. Feet<u>+772</u> %,

Sequence

•	
10 10-30 20 20 30-999 30-999 30-999	R* Bldg. Footing R* Elec. Temp Service Pole R* Building Foundation Address Confirmation Open Floor R* Bldg. Slab Insp. R* Elec. Under Slab
30-999	R*Plumb. Under Slab
40	Four Trade Rough In
40	Four Trade Rough In> 2500
40	Three Trade Rough In
40	Three Trade Rough In> 2500
40	Two Trade Rough In
40	Two Trade Rough In> 2500
40	One Trade Rough In
40	One Trade Rough In > 2500
50	R* Insulation
60	Four Trade Final
60	Four Trade Final > 2500
60	Three Trade Final
60	Three Trade Final > 2500
60	Two Trade Final
60	Two Trade Final > 2500
60	One Trade Final
60	One Trade Final > 2500
999	Envir. Operations Permit