

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	11-50027979	Page	2
Issue Date	7/17/13	Date	7/17/13
Expiration Date	1/13/14	Valuation	0

Permit	RESIDENTIAL MECHANICAL PERMIT		
Additional desc			
Phone Access Code	992552		
Issue Date	7/17/13	Valuation	0
Expiration Date	7/17/14		

Permit	RESIDENTIAL PLUMBING PERMIT		
Additional desc	BATH ROOM AND KIT SINK		
Phone Access Code	992560		
Issue Date	7/17/13	Valuation	0
Expiration Date	7/17/14		

Special Notes and Comments
T/S: 12/02/2011 09:31 AM VBROWN ----
66 MELS MEADOWS DR FUQ VAR 27526.
401N, LEFT ON CHRISTIAN LIGHT RD GO 4MI
THIS WILL BE ONE MI BEFORE HWY 42, YOU
WILL MAKE A LEFT ONTO MEL'S MEADOW DR,
66 IS THE FIRST HOUSE ON THE LEFT.

Application Number	11-50027979	Page	3
Property Address	66 MELS MEADOWS DR	Date	7/17/13
PARCEL NUMBER	05-0645- - -0022- -13-		
Application description . . .	CP ADD & ALTER RESIDENTIAL		
Subdivision Name			
Property Zoning	RES/AGRI DIST - RA-30		

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
Permit type RESIDENTIAL BUILDING PERMIT					
999	103	B103	R*BLDG FOUND & TEMP SVC POLE	_____	___/___/___
999	111	B111	R*BLDG SLAB INSP/TEMP SVC POLE	_____	___/___/___
999	113	B113	R*BLDG WATER/DAMP PROOFING	_____	___/___/___
999	217	E217	R*ELEC RECONNECT	_____	___/___/___
999	209	E209	R*ELEC TEMP POWER CERT	_____	___/___/___
999	207	E207	R*ELEC TEMP SERVICE POLE	_____	___/___/___
999	205	E205	R*ELEC UNDER SLAB	_____	___/___/___
999	213	E213	R*ELECTRICAL UNDERGROUND	_____	___/___/___
999	409	M409	R*GAS PIPING	_____	___/___/___
999	405	M405	R*MECHANICAL UNDERGROUND	_____	___/___/___
999	105	B105	R*OPEN FLOOR	_____	___/___/___
999	305	M305	R*PLUMB SEWER CONNECTION	_____	___/___/___
999	309	P309	R*PLUMB UNDER SLAB	_____	___/___/___
999	307	P307	R*PLUMB WATER CONNECTION	_____	___/___/___
999	115	B115	R*OVERHEAD ELEC, MECH, PLB	_____	___/___/___
999	820	Z820	PZ*ZONING/FINAL INSPECTION	_____	___/___/___
999	101	B101	R*BLDG FOOTING / TEMP SVC POLE	_____	___/___/___
999	814	A814	ADDRESS CONFIRMATION	_____	___/___/___
999	429	R429	FOUR TRADE FINAL	_____	___/___/___
999	425	R425	FOUR TRADE ROUGH IN	_____	___/___/___
999	131	R131	ONE TRADE FINAL	_____	___/___/___
999	125	R125	ONE TRADE ROUGH IN	_____	___/___/___
999	329	R329	THREE TRADE FINAL	_____	___/___/___
999	325	R325	THREE TRADE ROUGH IN	_____	___/___/___
999	229	R229	TWO TRADE FINAL	_____	___/___/___
999	225	R225	TWO TRADE ROUGH IN	_____	___/___/___
999		H828	ENVIRO. WELL PERMIT	_____	___/___/___
999	104	B104	R*FOUND & SETBACK VERIF SURVEY	_____	___/___/___

Permit type RESIDENTIAL ELECTRICAL PERMIT

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Application description . . .	CP ADD & ALTER RESIDENTIAL		
Subdivision Name			
Property Zoning	RES/AGRI DIST - RA-30		

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
999	211	E211	R*ELEC ABOVE CEILING	_____	__/__/__
Permit type RESIDENTIAL ELECTRICAL PERMIT					
999	217	E217	R*ELEC RECONNECT	_____	__/__/__
999	205	E205	R*ELEC UNDER SLAB	_____	__/__/__
999	215	E215	R*ELEC. UND. POOL	_____	__/__/__
999	213	E213	R*ELECTRICAL UNDERGROUND	_____	__/__/__
999	131	R131	ONE TRADE FINAL	_____	__/__/__
999	125	R125	ONE TRADE ROUGH IN	_____	__/__/__
Permit type RESIDENTIAL 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 RESIDENTIAL MECHANICAL PERMIT					
999	409	M409	R*GAS PIPING	_____	__/__/__
999	407	M407	R*MECH ABOVE CEILING	_____	__/__/__
999	405	M405	R*MECHANICAL UNDERGROUND	_____	__/__/__
999	131	R131	ONE TRADE FINAL	_____	__/__/__
999	125	R125	ONE TRADE ROUGH IN	_____	__/__/__
Permit type RESIDENTIAL PLUMBING PERMIT					
999	305	M305	R*PLUMB SEWER CONNECTION	_____	__/__/__
999	307	P307	R*PLUMB WATER CONNECTION	_____	__/__/__

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Application description	CP ADD & ALTER RESIDENTIAL		
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Property Zoning	RES/AGRI DIST - RA-30		

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
999	309	P309	R*PLUMB UNDER SLAB	_____	___/___/___
999	131	R131	ONE TRADE FINAL	_____	___/___/___
999	125	R125	ONE TRADE ROUGH IN	_____	___/___/___
999	315	P315	R*PLUMB HW HEATER	_____	___/___/___

* Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address, company name & phone must match

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

Application # 11500 27979

Application for Residential Building and Trades Permit

Owner's Name: Matthew Vaughn Date: _____
Site Address: 66 MALS MEADOW DR Phone: _____
Directions to job site from Lillington: _____

Subdivision: MALS MEADOW Lot: 45
Description of Proposed Work: ADD SECOND FLOOR TO GARAGE # of Bedrooms: 1
Heated SF: 768 Unheated SF: _____ Finished Bonus Room? _____ Crawl Space: _____ Slab: _____

General Contractor Information

HOMEWIZE RENOVATIONS AND REPAIRS Telephone: 919-422-3479
Building Contractor's Company Name
1001 FLANDERS ST. GARNER NC 27529 Email Address: ede@homewize.biz
Address
67667
License #

Electrical Contractor Information

Description of Work: WIRE ADDITION Service Size: _____ Amps T-Pole: Yes _____ No
TIGHTWIRE Telephone: 919-606-7752
Electrical Contractor's Company Name
1032 WETTERHORN WAY WENDELL 27591 Email Address: R.MARTIN747@NCRC.COM
Address
11154-L
License #

Mechanical/HVAC Contractor Information

Description of Work: HEAT & AC
LOPLIN HVAC Telephone: 919-779-4284
Mechanical Contractor's Company Name
4912 GRASSHOPPER RD RALEIGH NC 27610 Email Address: _____
Address
13341
License #

Plumbing Contractor Information

Description of Work: ADD BATHROOM & KITCHEN SINK # Baths: 1
D HAREY PLUMB Telephone: _____
Plumbing Contractor's Company Name
1828 PROCRIDGE KNIGHTDALE Email Address: _____
Address
17815
License #

Insulation Contractor Information

TATUM INSULATION Telephone: 919-628-6232
Insulation Contractor's Company Name & Address

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

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 that **by signing below I have obtained all subcontractors permission to obtain these permits** 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 as per current fee schedule

Bear C. Hy
Signature of Owner/Contractor/Officer(s) of Corporation

7/17/13
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 HOMESWIRB

Sign w/Title Bear C. Hy Date 7/17/13

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

Each section below to be filled out
by whomever performing work
Must be owner or licensed
contractor Address company
name & phone must match

Application for Residential Building and Trades Permit

Owner's Name _____ Date _____
Site Address _____ Phone _____
Directions to job site from Lillington _____

Subdivision _____ Lot _____
Description of Proposed Work _____ # of Bedrooms _____
Heated SF _____ Unheated SF _____ Finished Bonus Room? _____ Crawl Space _____ Slab _____

General Contractor Information

Building Contractor's Company Name _____ Telephone _____
Address _____ Email Address _____
License # _____

Electrical Contractor Information

Description of Work _____ Service Size _____ Amps T-Pole _____ Yes _____ No _____
Electrical Contractor's Company Name _____ Telephone _____
Address _____ Email Address _____
License # _____

Mechanical/HVAC Contractor Information

Description of Work _____
Mechanical Contractor's Company Name _____ Telephone _____
Address _____ Email Address _____
License # _____

Plumbing Contractor Information

Description of Work _____ # Baths _____
Plumbing Contractor's Company Name _____ Telephone _____
Address _____ Email Address _____
License # _____

Insulation Contractor Information

Insulation Contractor's Company Name & Address _____ Telephone _____

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

~~Change roof deck into~~

Change roof deck into → Bonus Room

32X24

Plan Box # C-7

Date 7-1-13

Job Name Vaughn

App # 1150027979

Valuation \$45675

SQ Feet 703

Inspections for SFD/SFA

Crawl X

Slab _____

Mono _____

Footing	Footing	Plumbing Under Slab
Foundation	Foundation	Ele. Under Slab
Address	Address	Address
Open Floor	Slab	Mono Slab
Rough In	Rough In	Rough In
Insulation	Insulation	Insulation
Final	Final	Final

>2500 _____

>2500 _____

>2500 _____

Foundation Survey No

Envir. Health _____

Other _____

Additions / Other

- Footing _____
- Foundation _____
- Slab _____
- Mono _____
- Open Floor _____
- Rough In _____
- Insulation _____
- Final _____

Add Enviro Operations Step
 Cust will Add Drain Line to
 Exist Tanks, JM will have to
 see Drain Line Add it.