

09/09/11

Application #

1450034759

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 George & Barbara Dickens Date 10/24/14

Site Address 5895 U.S. 421 N, Lillington NC 27546 Phone 919 499 8616

Directions to job site from Lillington Take 421 north - Last Beck House on left before Raven Rock exit -

Subdivision N/A Lot _____

Description of Proposed Work addition of 22x22 # of Bedrooms _____

Heated SF _____ Unheated SF _____ Finished Bonus Room? No Crawl Space Slab _____

General Contractor Information

Self-Owner - Barbara Dickens
Building Contractor's Company Name Telephone _____

Address _____ Email Address _____

License # _____

Electrical Contractor Information

Description of Work Existing 200 Amp Service Size 100 Amps T-Pole Yes No

Owner - Barbara Dickens
Electrical Contractor's Company Name Telephone _____

Address _____ Email Address _____

License # _____

Mechanical/HVAC Contractor Information

Description of Work Run Ducts & Returns & tie in to trunk of existing 2T Heat Pump

Owner - Barbara Dickens
Mechanical Contractor's Company Name Telephone _____

Address _____ Email Address _____

License # _____

Plumbing Contractor Information

Description of Work 1 commode, 1 sink & 1 shower tie in to existing lines - # Baths 1

Owner - Barbara Dickens
Plumbing Contractor's Company Name Telephone _____

Address _____ Email Address _____

License # _____

Insulation Contractor Information

Owner - Barbara Dickens
Insulation Contractor's Company Name & Address Telephone _____

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

12-22-14

Application # 34759

Harnett County Central Permitting

PO Box 65 Lillington NC 27546 - Ph 910-893-7525 - Fx 910-893-2793 - www.harnett.org/permits

Certification of Work Performed By Owner/Contractor

George (Individual Trade Application)

Owner (s) of Structure Alvin + Barbara Dickens Phone: _____

Owner (s) Mailing Address 5895 Hwy 421 North
Lillington NC

Land Owner Name (s): Alvin + Barbara Dickens Phone: _____

Construction or Site Address 5895 Hwy 421 North

PIN # 062046981.000 Parcel # 13 06200657

Job Cost 5871.00 Description of Work to be done ADD -
Heatpump ~~Change out~~ 1 1/2 Ton

Mechanical New Unit With Ductwork ___ New Unit Without Ductwork Gas Piping ___ Other ___

Electrical* 200 Amp ___ <200 Amp ___ Service Change ___ Service Reconnect ___ Other ___
* For Progress Energy customers we need the premise number

Plumbing Water/Sewer Tap ___ Number of Baths ___ Water Heater ___

Specific Directions to Job from Lillington

Subdivision _____ Lot # _____

I JOYNER & DICKENS HVAC will provide the MECHANICAL labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 9369 / 204615L, which entitles me to perform such work on the above structure legally. All work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations

JOYNER & DICKENS HVAC

Contractor's Company Name
2218 LEE AVENUE

Address

License # 9369 / 204615L

919 774-6841

Telephone

BOOKKEEPING@WINDSTREAM.

Email Address

Structure Owner / Contractor Signature Arthur Mike David Date: 12/22/14

By signing this application you affirm that you have obtained permission from the above listed license holder to purchase permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or sell the listed property for 12 months after completion of the listed work.

*Company name, address, & phone must match information on license

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

Barbara Dickens, Design Technician
Signature of Owner/Contractor/Officer(s) of Corporation

10/24/14
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 Barbara Dickens, Design Technician Date 10/24/14

Addition of bc, back, lr

Date 10.14.14

Plan Box # F2

Job Name DICKENS

App # 1450034759

Valuation \$3,455

Heated SQ Feet 484
~~250~~

Garage _____

Inspections for SFD/SFA

Crawl Slab _____ Mono _____ Basement _____

Footing	Footing	Plum Under Slab	Footing
Foundation	Foundation	Ele. Under Slab	Foundation
Address	Address	Address	Waterproofing
Open Floor	Slab	Mono Slab	Plum Under slab
Rough In	Rough In	Rough In	Address
Insulation	Insulation	Insulation	Slab
Final	Final	Final	Open Floor
			Rough In
			Insulation
			Final

Foundation Survey _____

Envir. Health existing Other _____

Additions / Other

Footing _____

Foundation _____

Slab _____

Mono _____

Open Floor _____

Rough In _____

Insulation _____

Final _____

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 14-50034759 Date 10/31/14
Property Address 5895 US 421 N
PARCEL NUMBER 13-0620- - -0057- - -
Application type description CP ADD & ALTER RESIDENTIAL
Subdivision Name
Property Zoning PENDING

Owner Contractor

DICKENS GEORGE & WILDA MAE OWNER
5895 US 421 N
LILLINGTON NC 27546

Applicant

DICKENS BARBARA
2530 HOLLY SPRINGS CH RD
BROADWAY NC 27505
(919) 499-8616

--- Structure Information 000 000 22X22 EXTEND LR, BATH AND BEDROOM
Flood Zone FLOOD ZONE X
Other struct info # BEDROOMS 3.00
SEPTIC - EXISTING? YES
WATER SUPPLY COUNTY

Permit RESIDENTIAL BUILDING PERMIT
Additional desc
Phone Access Code 1058478
Issue Date 10/31/14 Valuation 31445
Expiration Date 10/31/15

Permit RESIDENTIAL ELECTRICAL PERMIT
Additional desc
Phone Access Code 1059526
Issue Date 10/31/14 Valuation 0
Expiration Date 10/31/15

Permit RESIDENTIAL INSULATION PERMIT
Additional desc
Phone Access Code 1059534
Issue Date 10/31/14 Valuation 0
Expiration Date 10/31/15

Permit RESIDENTIAL MECHANICAL PERMIT
Additional desc
Phone Access Code 1059559

HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

LILLINGTON, NC 27546

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Application Number	14-50034759	Page	2
Issue Date	10/31/14	Date	10/31/14
Expiration Date	10/31/15	Valuation	0

Permit	RESIDENTIAL PLUMBING PERMIT		
Additional desc			
Phone Access Code	1059542		
Issue Date	10/31/14	Valuation	0
Expiration Date	10/31/15		

Special Notes and Comments

T/S: 10/21/2014 10:21 AM DJOHNSON --
5895 US 421 N LILLINGTON

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Date 10/31/14

Application Number 14-50034759
Property Address 5895 US 421 N
PARCEL NUMBER 13-0620- - -0057- - -
Application description . . . CP ADD & ALTER RESIDENTIAL
Subdivision Name
Property Zoning PENDING

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	105	B105	R*OPEN FLOOR	_____	___/___/___
999	101	B101	R*BLDG FOOTING / TEMP SVC POLE	_____	___/___/___
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	_____	___/___/___
Permit type RESIDENTIAL ELECTRICAL PERMIT					
999	211	E211	R*ELEC ABOVE CEILING	_____	___/___/___
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 RESIDENTIAL MECHANICAL PERMIT					
999	409	M409	R*GAS PIPING	_____	___/___/___

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Property Address	5895 US 421 N	Date	10/31/14
PARCEL NUMBER	13-0620- - -0057- - -		
Application description . . .	CP ADD & ALTER RESIDENTIAL		
Subdivision Name			
Property Zoning	PENDING		

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
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	_____	___/___/___
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	_____	___/___/___