

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

Application #

08 500 19174

Harnett County Central Permitting  
PO Box 65 Lillington, NC 27546

910-893-7525 Fax 910-893-2793 www.harnett.org/permits

**Application for Residential Building and Trades Permit**

Owner's Name: SAM & SANDRA WORNOM Date: 4-11-08

Site Address: 351 MALLARD RD. Phone: \_\_\_\_\_

Directions to job site from Lillington: HWY 27N TURN LEFT ON BUFFALO LAKE RD THEN LEFT ON MALLARD RD JOB ON LEFT

Subdivision: BUFFALO LAKE Lot: 244

Description of Proposed Work: NEW RESIDENTIAL #Bedrooms: 3

Heated SF 5,134 Unheated SF 948 Finished Rec Room? \_\_\_\_\_ Crawl Space ( ) Slab

**General Contractor Information**

TATUM BUILDERS, INC. 910-690-4197  
Building Contractor's Company Name Telephone

900 GILMORE DR SANFORD NC 27330 19249  
Address License #

[Signature] Must sign & fill out second page  
Signature of Owner/Contractor/Officer(s) of Corporation

**Electrical Permit Information**

Description of Work NEW Service Size: 400 Amps TPole:  yes/no

SHORT'S ELECTRIC 910-673-7444  
Electrical Contractor's Company Name Telephone

253 CRAWF ST, WEST END, NC 11294-4  
Address License #

[Signature]  
Signature of Officer(s) of Corporation

**Mechanical/HVAC Permit Information**

Description of Work NEW

SANDHILLS HEATING & REFRIGERATION 910-944-1086  
Mechanical Contractor's Company Name Telephone

PO BOX 1341, SOUTHERN PINES, NC 69744211  
Address License #

[Signature]  
Signature of Officer(s) of Corporation

**Plumbing Permit Information**

Description of Work NEW # Baths 5 1/2

GREENE'S PLUMBING 910-974-4035  
Plumbing Contractor's Company Name Telephone

980 NC HWY 731 CAUDOY, NC 13979  
Address License #

[Signature]  
Signature of Officer(s) of Corporation

**Insulation Permit Information**

INSULATION INC 1827 JEFFERSON DR HWY SANFORD NC 919-776-4138

Insulation Contractor's Company Name & Address Telephone

**Homeowners Applying to Build Their Own Home**

Please answer the following questions then see a Permit Technician to determine if you qualify for permit under Owners Exemption. Questionnaire per G.S. 87-14 Regulations as to Issue of Building Permits (Memo available upon request)

- 1. Do you own the land on which this building will be constructed?     yes     no
- 2. Have you hired or intend to hire an individual to superintend and manage construction of the project?     yes     no
- 3. Do you intend to directly control & supervise construction activities?     yes     no
- 4. Do you intend to schedule, contract, or directly pay for all phases of construction work to be done?     yes     no
- 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?     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.

*[Signature]*  
Signature of Owner/Contractor/Officer(s) of Corporation

4-11-08  
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: TATUM BUILDERS, INC.

Sign w/Title: *[Signature]* PRESIDENT    Date: 4-11-08

# Basement

Plan Box Number B3

Job Name Sanborn

Date: 4-11-08

## Required Inspections for SFA/SFD

Appl. # 08-50019174  
Valuation ~~368453~~  
Sq. Feet 5671

368453

### Sequence

10	<input checked="" type="checkbox"/>	R* Bldg. Footing
10-30		R* Elec. Temp Service Pole
20	<input checked="" type="checkbox"/>	R* Building Foundation
20		Address Confirmation
30-999	<input checked="" type="checkbox"/>	Open Floor
30-999	<input checked="" type="checkbox"/>	R* Bldg. Slab Insp.
30-999		R* Elec. Under Slab
30-999	<input checked="" type="checkbox"/>	R*Plumb. Under Slab
40		Four Trade Rough In
40	<input checked="" type="checkbox"/>	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	<input checked="" type="checkbox"/>	R* Insulation
60		Four Trade Final
60	<input checked="" type="checkbox"/>	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

Need floor  
truss in R +  
LVL +  
Roof truss