

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 James P. Moore Date 2-22-16
Site Address 461 Cedar Rock Trail Fingert, NC 27526 Phone 910-922-7010
Directions to job site from Lillington # 401N for 3.6 miles. Turn Left onto Christian Light Road. Go 4.3 miles and turn Left onto Colerbury Road. Go 1/2 mile and turn left onto Cedar Rock Trail. Last Driveway at cal dr sec
Subdivision Cedar Rock Subdivision Lot # 9
Description of Proposed Work Office with Bathroom # of Bedrooms _____
Heated SF 7 Unheated SF _____ Finished Bonus Room? _____ Crawl Space _____ Slab _____

General Contractor Information

James P. Moore - Home Owner 910-922-7010
Building Contractor's Company Name _____ Telephone _____
461 Cedar Rock Trail Fingert, NC 27526 Jimmoore22@yahoo.com
Address _____ Email Address _____
N/A
License # _____

Electrical Contractor Information

Description of Work Electrical Rough in Finish Service Size 100 Amps T-Pole Yes No
R.A. Jackson Electric 919-894-5367
Electrical Contractor's Company Name _____ Telephone _____
9261 Raleigh Rd. Benson, NC 27504 N/A
Address _____ Email Address _____
21144
License # _____

Mechanical/HVAC Contractor Information

Description of Work Plumbing Bathroom, kitchen, laundry HVAC
JC's Heating and Air Conditioning _____
Mechanical Contractor's Company Name _____ Telephone _____
1539 Wade Stephenson Road JCshvac@gmail.com
Address Holly Springs, NC 27540 Email Address _____
12656 H3
License # _____

Plumbing Contractor Information

Description of Work Plumbing Bathroom, kitchen, laundry # Baths 1
JR Plumbing _____
Plumbing Contractor's Company Name _____ Telephone _____
555 Firzah Dr. Lillington, NC 27546 N/A
Address _____ Email Address _____
31576
License # _____

Insulation Contractor Information

Home Owner _____
Insulation Contractor's Company Name & Address _____ Telephone _____

*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


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

2-23-16
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 James P. Moore

Sign w/Title  Owner Date 2-23-16

Plan Box # File

Date 2-9-11

Job Name Moore

App # 37872

Valuation ~~8~~ 77568

SQ Feet 808

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 _____

Other _____

Additions / Other

Footing _____

Foundation _____

Slab _____

Mono _____

Open Floor _____

Rough In _____

Insulation _____

Final _____

747 19'8" 38

Finish
2nd Floor
Home Office

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 16-50037872 Date 2/23/16
Property Address 461 CEDAR ROCK TRL
PARCEL NUMBER 05-0633- - -0112- -11-
Application type description CP ADD & ALTER RESIDENTIAL
Subdivision Name
Property Zoning RES/AGRI DIST - RA-30

| | |
|--------------------------|------------|
| Owner | Contractor |
| ----- | ----- |
| MOORE JAMES P & KELLY #9 | OWNER |
| 176 GREMAR DRIVE | |
| HOLLY SPRINGS NC 27540 | |

Applicant

MOORE JAMES P #9
461 CEDAR ROCK TRL
FUQUAY VARINA NC 27526
(910) 922-7010

--- Structure Information 000 000 TURN UPSTAIRS OF FARM BLDG OFFICE W/BATH
Flood Zone FLOOD ZONE X
Other struct info # BEDROOMS .00
SEPTIC - EXISTING? EXISTING
WATER SUPPLY COUNTY

Permit RESIDENTIAL BUILDING PERMIT
Additional desc
Phone Access Code 1126291
Issue Date 2/23/16 Valuation 77568
Expiration Date 2/22/17

Permit RESIDENTIAL ELECTRICAL PERMIT
Additional desc
Phone Access Code 1126309
Issue Date 2/23/16 Valuation 0
Expiration Date 2/22/17

Permit RESIDENTIAL INSULATION PERMIT
Additional desc
Phone Access Code 1126325
Issue Date 2/23/16 Valuation 0
Expiration Date 2/22/17

Permit LAND USE PERMIT
Additional desc HOME OCCUP ALSO
Phone Access Code 1126333

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|------------------------------|-------------|---------------------|---------|
| Application Number | 16-50037872 | Page | 2 |
| Issue Date | 2/23/16 | Date | 2/23/16 |
| Expiration Date | 8/21/16 | Valuation | 0 |

| | | | |
|-----------------------------|-------------------------------|---------------------|---|
| Permit | RESIDENTIAL MECHANICAL PERMIT | | |
| Additional desc | | | |
| Phone Access Code | 1126341 | | |
| Issue Date | 2/23/16 | Valuation | 0 |
| Expiration Date | 2/22/17 | | |

| | | | |
|-----------------------------|-----------------------------|---------------------|---|
| Permit | RESIDENTIAL PLUMBING PERMIT | | |
| Additional desc | | | |
| Phone Access Code | 1126358 | | |
| Issue Date | 2/23/16 | Valuation | 0 |
| Expiration Date | 2/22/17 | | |

Special Notes and Comments
T/S: 01/20/2016 12:29 PM DJOHNSON --
CEDAR ROCK TRAIL LOT 9
401 N ABOUT 3.6 MILES THEN LEFT ONTO
CHRISTIAN LIGHT RD. GO 4.3 MILES AND
THEN LEFT ONTO COKESBURY RD DRIVE 1/2
MILE AND TURN LEFT ONTO CEDAR ROCK TRL
GRAVEL DRIVE AT THE END OF CUL DE SAC.

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P.O. BOX 65

LILLINGTON, NC 27546

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| Application Number | 16-50037872 | Page | 3 |
| Property Address | 461 CEDAR ROCK TRL | Date | 2/23/16 |
| PARCEL NUMBER | 05-0633- - -0112- -11- | | |
| 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 | 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 INSULATION PERMIT | | | | | |
| 999 | 129 | I129 | R*INSULATION INSPECTION | _____ | ___/___/___ |
| Permit type LAND USE PERMIT | | | | | |
| 999 | 818 | Z818 | PZ*ZONING INSPECTION | _____ | ___/___/___ |