.\* 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.

ection below to be filled out by	Ар	plication # 16918
	rnett County Central Permitt PO Box 65 Lillington, NC 27546	ing
phone must match information on Telepho	ne Number 910-893-7525 www.ha	
	tion for Building and Trade	
Owner's Name: WAYNE Mu	rchisow	Date:
Address: 1216 Green bria	r pc VASS A	/C Phone: 9/9-235-27
an Stop Siew lot	on Right Con	ver Cupres Church
go Stop Sigw Lot:  Subdivision:		Lot: 74
Construction Type: (Please Check)	Building Use: (Pleas	e Check)
New Moved House	Residential	Commercial
Renovation Addition Other	Modular	Multi-Family
Total Project Cost:Descript	ion of Proposed Work:	
<u>G</u> e	eneral Contractor Information	ion n Cost \$
Heated SFCrawl Space ( ) Unheated SFSlab ( )	Acres Disturbed	ion n Cost \$ Stories
INTAUNE MURCHISCH	019- 3	25-2770
WAGNE MUTCHISEN Building Contractor's Company Name	Telephone	135-2770
	•	ALWNEY
Address	- New Resource and Production and Pr	License #
Wan like		
Signature of Owner Contractor/Officer(s)	of Corporation - Must sign bac	ck of form & workers comp
Danasiatian of Minds	Electrical Permit Information	on ost \$
Description of Work TS Pole: Yes () No () Underground	() Overhead ()	J5( \$
Permanent Service: Underground ()	Overhead () Service Size	e:Amps
WAYNE Murchison	/	
Electrical Contractor's Company Name	Telephone	
		Owner
Address		License #
Wan/In-		
Signature of Officer(s) of Corporation	a abautaa) Massatt tafassati	
Manager at Made	echanical Permit Informati	
Number of Units Type S	ystem Me	chanical Cost \$
WAYNE Murhison		
Mechanical Contractor's Company Name	Tele	ерћопе
0/1		nuner
Address	Nill I	License #
Man / //h		
Signature of Officer(s) of Corporation		
Description of Work	Plumbing Permit Information	<u> 211</u>
Number of Baths	Plumbing C	ost \$
Wagne Murch		
Plumbing Contractor's Company Name		ephone
		OWNER
Address	***************************************	License #
Wan Ille		
Signature of Officer(s) of Corporation		
Insulation Permit Info	rmation Residential () Ot	her () Not Required ()
		T-1h
Insulation Contractor's Company Name	& Address	Telephone

1/07

	obs must fill out this portion or System Information	
Sprinkler Contractor's Company Name	Contact & Telephone	<del>onarea</del>
Address	License #	
Signature of Officer(s) of Corporation Fire Alar	m System Information	
Fire Alarm Contractor's Company Name	Contact & Telephone	
Address	License #	
Signature of Officer(s) of Corporation	ransportation Driveway Access/Permit? Yes	No
Driveway Access - NC Department of Tr	•	
Driveway Access - NC Department of Tr		
/ Homeowners Apply	ying to Build Their Own Home	ners Exempli
Homeowners Apply Please answer the following questions then see a Permit	ying to Build Their Own Home Technician to determine if you qualify for permit under Ow	-
Homeowners Apply Please answer the following questions then see a Permit Questionnaire per G.S. 87-14 Regulations a	ying to Build Their Own Home Technician to determine if you qualify for permit under Ow as to Issue of Building Permits (Memo availab	ile upon req
Homeowners Apply Please answer the following questions then see a Permit Questionnaire per G.S. 87-14 Regulations at 1. Do you own the land on which this bu	ying to Build Their Own Home Technician to determine if you qualify for permit under Ow as to Issue of Building Permits (Memo availab	le upon req
Homeowners Apply Please answer the following questions then see a Permit Questionnaire per G.S. 87-14 Regulations a	ying to Build Their Own Home Technician to determine if you qualify for permit under Ow as to Issue of Building Permits (Memo availab	le upon requ
Homeowners Apply Please answer the following questions then see a Permit Questionnaire per G.S. 87-14 Regulations at 1. Do you own the land on which this bu 2. Have you hired or intend to hire an in-	ying to Build Their Own Home Technician to determine if you qualify for permit under Ow as to Issue of Building Permits (Memo availab	ile upon required no
Homeowners Apply Please answer the following questions then see a Permit Questionnaire per G.S. 87-14 Regulations at 1. Do you own the land on which this but 2. Have you hired or intend to hire an inche project? 3. Do you intend to directly control & sup	ying to Build Their Own Home Technician to determine if you qualify for permit under Own as to Issue of Building Permits (Memo availabuilding will be constructed?  yes dividual to superintend and manage co yes pervise construction activities?	non required not
Homeowners Apply Please answer the following questions then see a Permit Questionnaire per G.S. 87-14 Regulations at 1. Do you own the land on which this but 2. Have you hired or intend to hire an inche project?	ying to Build Their Own Home Technician to determine if you qualify for permit under Own as to Issue of Building Permits (Memo availabuilding will be constructed?  yes dividual to superintend and manage co yes pervise construction activities?	non required not
Homeowners Apply Please answer the following questions then see a Permit Questionnaire per G.S. 87-14 Regulations at 1. Do you own the land on which this but 2. Have you hired or intend to hire an inche project? 3. Do you intend to directly control & sup 4. Do you intend to schedule, contract, one done? 5. Do you intend to personally occupy the following completion of construction and	ying to Build Their Own Home  Technician to determine if you qualify for permit under Own as to Issue of Building Permits (Memo available)  aliding will be constructed?  yes  dividual to superintend and manage co  yes  pervise construction activities?  yes  or directly pay for all phases of construction  yes  the building for at least 12 consecutive in do you understand that if you do not do	nonths
Homeowners Apply Please answer the following questions then see a Permit Questionnaire per G.S. 87-14 Regulations at 1. Do you own the land on which this but 2. Have you hired or intend to hire an inche project? 3. Do you intend to directly control & sup 4. Do you intend to schedule, contract, one done? 5. Do you intend to personally occupy the	ying to Build Their Own Home  Technician to determine if you qualify for permit under Own as to Issue of Building Permits (Memo available)  aliding will be constructed?  yes  dividual to superintend and manage co  yes  pervise construction activities?  yes  or directly pay for all phases of construction  yes  the building for at least 12 consecutive in do you understand that if you do not do	nonths

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 <u>any</u> 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 Owner/Contractor/Officer(s) of Corporation

Date

Application	#
11	the self-tension of the company of t

•	Application #
•	Affidavit for Worker's Compensation N.C.G.S. 87-14
The undersig	ned applicant for Building Permit # <u>16978</u> being the:
	General Contractor
	Owner Officer/Agent of the Contractor or Owner
	onfirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing forth in the permit:
	Has/have three (3) or more employees and has/have obtained workers' compensation insurance to cover them.
	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 insurance pr	g on the project for which this permit is sought it is understood that the Central Permitting issuing the permit may require certificates of coverage of worker's compensation for to issuance of the permit and at any time during the permitted work from any person, ration carrying out the work.
Firm Name:_	
Sign/Title:	WAYNE Murchison Jouner
Date:	6-18-07

(madular)

Plan Box Number D-2

Job Name MURCHISON

Date: <u>6-7-07</u>

Required Inspections for SFA/SFD

Appl. # 0750016978 Valuation #114,350 Sq. Feet 1760

## Sequence

10 .	R* Bldg. Footing
10-30	R* Elec. Temp Service Pole
20	R* Building Foundation
20	Address Confirmation
30-999	Open Floor
30-999	R* Bldg. Slab Insp.
30-999	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