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 # 0150017382 22

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

Application for Resident	ial Building and Trades Permit
Owner's Name: WILLIAM & SHIRLEY TL	Ney Date: n/8/08
Site Address: MCN = 14 RJ	Phone: 917-258-626
Directions to job site from Lillington: 421 み	. TO LEFT ON M SUBILL
MILL RA TO RIGHT ON	
15 LOT#14	Na Site
Subdivision: 16 5-201	4:11
	Lot: #14
Description of Proposed Work: 42×64 Mobius	TOMINE BITSEMBLY -
Heated SF 1962 Unheated SF 3162 Finishe	ed Rec Room? Crawl Space () Slab tractor Information
HOMES TO VANDORBUILT	919-718-2760
Building Contractor's Company Name	Telephone
3800 JEFFERSON DAVIS the	· · · · · · · · · · · · · · · · · · ·
Address /	License #
Drul Dut	Must sign & fill out second page
Signature of Owner/Contractor/Officer(s) of Corporal	ormit Information
Description of Work Mach Hork 3 Ser	vice Size: 200 Amps TPole: vestoo
Makela Done McCaken	915- 353-1121
Electrical Contractor's Company Name	Telephone
529 Bring Part Sant	/ <u>//702 - 4</u> License #
Address	License #
2 /12	
Signature of Officer(s) of Corporation	
	AC Permit Information
	Wark
Mechanical Contractor's Company Name	910-770-8560
PU Sox 3805	910- 770- 95-60 Telephone 2031/
Address /	
102	License #
Signature of Officer(s) of Corporation	
Plumbing P	ermit Information
Description of Work Comet Owe & Wall	4 yadadaphs # Baths 2
Walida Davi McCarles	915-303-1121
Plumbing Contractor's Company Name	Telephone
	2473
Description of Work Const Owa 4 60 6  Plumbing Processing Contractor's Company Name	License #
Signature of Officer(s) of Corporation	
Insulation Pe	ermit Information
nsulation Contractor's Company Name & Address	<del>-</del>
nacion 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)			
Do you own the land on which this building will be constructed? yes no			
Have you hired or intend to hire an individual to superintend and manage construction of the project?  yes no			
Do you intend to directly control & supervise construction activities? yes no			
Do you intend to schedule, contract, or directly pay for all phases of construction work to be 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 <u>any</u> 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 sepedule.			
Signature of Owner/Contractor/Officer(s) of Corporation  Date			
Signature of Owner/Contractor/Officer(s) of Corporation Date			
Signature of Owner/Contractor/Officer(s) of Corporation  Affidavit for Worker's Compensation N.C.G.S. 87-14  The undersigned applicant being the:			
Affidavit for Worker's Compensation N.C.G.S. 87-14			
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:			
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			
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:			
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			
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			
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.			
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			

FRAME MOD!

Plan Box Number_	<u> </u>	Job Name_	WILLIAM	R
	· · · · · · · · · · · · · · · · · · ·	100 1 1d111C_		

Date: 10 - 10 - 08

Required Inspections for SFA/SFD

Appl. # 95500 17382 Valuation # 113,643 Sq. Feet 1749

## 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
10	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
50	Four Trade Final > 2500
60	Three Trade Final
60	
60	Three Trade Final > 2500 Two Trade Final
60	
60	Two Trade Final > 2500
60	One Trade Final
999	One Trade Final > 2500
	Envir. Operations Permit