

* 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 #

0750018185

Harnett County Central Permitting

PO Box 65 Lillington, NC 27546

Phone 910-893-7525 Fax 910-893-2793 www.harnett.org

Application for Building and Trades Permit

Owner's Name: Durane Curtzn Date: 8-30-07

Site Address: 951 Silas Moore Rd, Coats NC Phone: 919 2077640

Directions to job site from Lillington: Take 27 to Coats - TL on Ebenezer Church Rd. Go 2 mi - TL on Johnson Rd. - TR on Silas Moore - L on N left

Subdivision: Quartz Hollow Lot: 20

Construction Type: (Please Check) Building Use: (Please Check)
 New Moved House Residential Commercial
 Renovation Addition Other Modular Multi-Family

Total Project Cost: _____ Description of Proposed Work: _____

Heated SF _____ Unheated SF _____ Finished Rec Room? _____ Crawl Space () Slab ()

General Contractor Information Building Cost \$ #58691

Curtzn & Curtzn Const Co. Inc 919-207-7640

Building Contractor's Company Name Telephone

1044 Fleming Rd, Coats, N.C. 15858

Address License #

N. Durane Curtzn Must sign second page & fill out third page

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

Electrical Permit Information Elec Cost \$ 800

Description of Work Hookup Elec. Serv Service Size: 200 Amps #TPoles _____

RST Electrical 919 291-1488

Electrical Contractor's Company Name Telephone

3376 Zacks Mill Rd, Angier, N.C. 27501 22446L

Address License #

Kandy Ryz

Signature of Officer(s) of Corporation

Mechanical Permit Information Mech Cost \$ 1900

Description of Work INSTALL CENTRAL A/C # Units 1

HAMILTON HEATING & AIR INC 919 552-9419

Mechanical Contractor's Company Name Telephone

5209 Suags Rd, Fuquay Varina, N.C. 27526 15698

Address License #

John Hamilton

Signature of Officer(s) of Corporation

Plumbing Permit Information Plumb Cost \$ #1100

Description of Work Hookup water & Sewer to Modular # Baths _____

Global Plumbing 919-971-3843

Plumbing Contractor's Company Name Telephone

PO Box 376, Coats, NC. 27521 24491

Address License #

Richard Dillm

Signature of Officer(s) of Corporation

Insulation Permit Information

NA
Insulation Contractor's Company Name & Address Telephone

**Affidavit for Worker's Compensation
N.C.G.S. 87-14**

The undersigned applicant for Building Permit # 07-50018185 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/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.

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.

Firm Name: The Housing Center

Sign/Title: Linda T. Jones - President

Date: 8-30-07

(MODULAR)

Plan Box Number E-2

Job Name CURRIN

Date: 8-17-07

Required Inspections for SFA/SFD

Appl. # 0750018185
Valuation \$120,847
Sq. Feet 1860

Sequence

- | | | |
|--------|-------------------------------------|-----------------------------|
| 10 | <input checked="" type="checkbox"/> | 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 | <input checked="" type="checkbox"/> | 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 | <input checked="" type="checkbox"/> | 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 | <input checked="" type="checkbox"/> | Envir. Operations Permit |

**Commercial Jobs must fill out this portion
Sprinkler System Information**

Sprinkler Contractor's Company Name

Contact & Telephone

Address

License #

Signature of Officer(s) of Corporation

Fire Alarm System Information

Fire Alarm Contractor's Company Name

Contact & Telephone

Address

License #

Signature of Officer(s) of Corporation

Driveway Access - NC Department of Transportation Driveway Access/Permit? Yes No

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

Sign & date

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, 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

9-10-07

Date