\* 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 50

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: JOE/LISABELL/ ADVANTAGE PLUS HOUSENG Date: 2/16/2009	
Site Address: LOT 15 KNOLLWOOD DE BILDADUAY Phone: (910)692-3334	
Directions to job site from Lillington: TAKE HWY421 pATOF LICENGTON THEN LEFT	SCANNED
ONTO MUNEILL MILL RD, LEFT ONTO KNOLLWOOD DRIVE LOT ON REGIST	2/25/09 DATE
TOPOF HILL.	DAIL
Subdivision: WOOD HAVEN ACRES SUBDIVISION Lot: 15	
Description of Proposed Work: Mopucal Home #Bedrooms: 3	
Heated SF Unheated SF Finished Rec Room? Crawl Space ( ) Slab  General Contractor Information	()
ADVANTAGE PLUS HOUSENG (910)692-3334	
Building Contractor's Company Name Telephone	
5395 US1 HWY JASS NC 18394 30508	
Address License #  Must sign & fill out second page	
Signature of Owner/Contractor/Officer(s) of Corporation	
Description of Work INTALL METERDASE Service Size: 200 Amps TPole: yes/fio)	
TRIPLE "A" ELECTRIC (919) 353- 1982	
Electrical Contractor's Company Name Telephone	
P.O.BOX 494, LOMONSPRINGS NC 28355 25128	
Address License #	
Signature of Officer(s) of Corporation	
Mechanical/HVAC Permit Information	
Description of Work THEAT PUMP UNIT.	
CAROUNA AIR (910) 585-2425  Mechanical Contractor's Company Name  Telephone	
370 Janes H RD, cameran NC 28326 23549	
Address License #	
Signature of Officer(s) of Corporation	
Plumbing Permit Information Home BUTEL DOSSIE PLAN	.genf
Description of Work INSTALL DROPS AND CONNECTIONS #Baths 2	W ORCE
HOMEBUYER- JOE BELL (919) 499-8200	
Plumbing Contractor's Company Name Telephone	
503 FIRST ST. BROODWAY NODISOS HOMEBLYBR	
Address License #	
Signature of Officer(s) of Corporation	
Insulation Permit Information	
$\mathcal{N}/\mathcal{A}$	
Insulation Contractor's Company Name & Address Telephone	

Homeowners Applying to Build I neir 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? 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?		
I beautiful about I beautiful about the section of		
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 schedule.		
2/1/2008		
Signature of Owner/Contractor/Officer(s) of Corporation  2/14/2008  Date		
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.		
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		





KNOW ALL MEN BY THESE PRESENTS: That OLD REPUBLIC SURETY COMPANY, a Wisconsin stock insurance corporation, does make, constitute and appoint:

PAUL M. SIMSON, JAMES F. HANLEY, BONNIE B. HIGGINS, OF RALEIGH, NC

its true and lawful Attorney(s)-in-Fact, with full power and authority not exceeding \$10,000,000, for and on behalf of the company as surety, to execute and delive and affix the seal of the company thereto (if a seal is required), bonds, undertakings, recognizances or other written obligations in the nature thereof, (other than bail bonds, bank depository bonds, mortgage deficiency bonds, mortgage guaranty bonds, guarantees of installment paper and note guaranty bonds, self-insurance workers compensation bonds guaranteeing payment of benefits, asbestos abatement contract bonds, waste management bonds, hazardous waste remediation bonds or black lung bonds), as follows:

ALL WRITTEN INSTRUMENTS IN AN AMOUNT NOT TO EXCEED AN AGGREGATE OF FIVE HUNDRED THOUSAND DOLLARS (\$500,000) ------ FOR ANY SINGLE OBLIGATION, REGARDLESS OF THE NUMBER OF INSTRUMENTS ISSUED FOR THE OBLIGATION

and to bind OLD REPUBLIC SURETY COMPANY thereby, and all of the acts of said Attorneys-in-Fact, pursuant to these presents, are ratified and confirmed. This document is not valid unless printed on colored background and is multi-colored. This appointment is made under and by authority of the board of directors at a special meeting held on February 18, 1982. This Power of Attorney is signed and sealed by facsimile under and by the authority of the following resolutions adopted by the board of directors of the OLD REPUBLIC SURETY COMPANY on February 18, 1982.

RESOLVED that, the president, any vice-president, or assistant vice president in conjunction with the secretary or any assistant secretary, may appoint attorneys in fact or agents with authority as defined or limited in the instrument evidencing the appointment in each case, for and on behalf of the company to execute and deliver and affix the seal of the company to bonds, undertakings, recognizances, and suretyship obligations of all kinds, and said officers may remove any such attorney-in-fact or agent and revoke any Power of Attorney previously granted to such person.

RESOLVED FURTHER, that any bond, undertaking, recognizance, or suretyship obligation shall be valid and binding upon the Company

- (i) when signed by the president, any vice president or assistant vice president, and attested and sealed (if a seal be required) by any secretary or assistant secretary; or
- (ii) when signed by the president, any vice president or assistant vice president, secretary or assistant secretary, and countersigned and sealed (if a seal be required) by a duly authorized attorney-in-fact or agent; or
- (iii) when duly executed and sealed (if a seal be required) by one or more attorneys-in-fact or agents pursuant to and within the limits of the authority evidenced by the Power of Attorney issued by the company to such person or persons.

RESOLVED FURTHER, that the signature of any authorized officer and the seal of the company may be affixed by facsimile to any Power of Attorney or certification thereof authorizing the execution and delivery of any bond, undertaking, recognizance, or other suretyship obligations of the company, and such signature and seal when so used shall have the same force and effect as though manually affixed.

IN WITNESS WHEREOF, OLD REPUBLIC SURETY COMPANY has caused these presents to be signed by its proper officer, and its corporate seal to be affixed this

Assistant Secretary STATE OF WISCONSIN, COUNTY OF WAUKESHA - SS OLD REPUBLIC SURETY COMPANY

On this 18TH day of JANUARY, 2007

, personally came before me,

and RICK A. JOHNSON to me known to be the individuals and officers of the OLD REPUBLIC SURETY COMPANY who executed the above instrument, and they each acknowledged the execution of the same, and being by me duly sworn, did severally depose and say; that they are said officers of the corporation aforesaid, and that the seal affixed to the above instrument is the seal of the corporation, and that said corporate seal and their signatures as such officers were duly affixed and subscribed to the said instrument by the authority of the board of directors of said corporation.

My commission expires: 01/18/2009

## CERTIFICATE

I, the undersigned, assistant secretary of the OLD REPUBLIC SURETY COMPANY, a Wisconsin corporation, CERTIFY that the foregoing and attached Power of Attorney remains in full force and has not been revoked; and furthermore, that the Resolutions of the board of directors set forth in the Power of Attorney, are now in force.

Signed and sealed at the City of Brookfield, WI this 3rd day of \_

TAYLOR,

INSURANCE AGENCY

## NORTH CAROLINA MODULAR BUILDING SET-UP CONTRACTOR LICENSE BOND

08500 211 97

# LLI2078810

WE, Stealth Properties, LLC, dba Advantage Plus Housing, as principal located at 5395 US 1 Hwv., Vass, NC 28394 and Old Republic Surety Company (Surety) of PO Box 569480, Dallas, TX 75356 a corporation incorporated under the laws of the State of Wisconsin and duly licensed to transact a surety business in the State of North Carolina as surety, are indebted and bound to the Harnett County (city or county inspection department) in the sum of five thousand (\$5,000) dollars for which payment we bind ourselves and our legal representatives jointly and severally.

THE CONDITION OF THIS OBLIGATION IS SUCH, that whereas the principal has entered into a contract for the set-up and installation of the modular building described herein:

NOW, THEREFORE, if the principal and all his agents and employees shall set-up and install said modular building in compliance with the regulations of the North Carolina State Building Code governing installation of modular buildings, then this obligation shall be null and void: otherwise, it shall be in full force and effect.

It is expressly provided that:

- 1. This bond is executed by the said principal and surety to enable the principal to set-up one North Carolina labeled modular building.
- 2. This bond is in full force and effect as to the above State Building Code obligations of the principal for the set-up of one North Carolina labeled modular building at the following address:

Street Lot 15 Knollwood Drive, Woodhaven Acres Subdivision Broadway, NC 27505

- 3. This bond will remain in full force and effect for one year following the issuance of the certificate of compliance for the modular building.
- 4. The bond must remain on file with the Harnett County (city or county inspection dept.).
- 5. The owner of the modular building described in paragraph 2, who sustains any loss or damage by reason of any act or omission covered by this bond may, in addition to any other remedy that he may have, bring an action in his own name on this bond for the recovery of damages sustained by him. 6. It is further understood and agreed that this bond shall be open to successive claims up to the face value of the bond. The surety shall not be liable for successive claims in excess of the bond amount, regardless of the number of claims made against the bond.

In Witness Whereof, the above bounden parties have executed this instrument under their several seals, this the 3rd day of February, 2009, the name and corporate seal of each corporate party being hereto affixed and these presents duly signed by its undersigned representative, pursuant to authority of its governing body.

Signature of Principal Surety by Old Republic Surety Company (printed name) Bonnie B. Higgins, Attorney-in-Fact P.O. Box 18106, Raleigh, NC 27619 Stanton Taylor Agency, Inc. N.C. Resident Agent P.O. Box 18106, Raleigh, NC 27619

MODULAP MODULAP

Plan Box Number File

Job Name ADVANTAGE PLUS" Housing

Date: 2-18-09

Required Inspections for SFA/SFD

Appl. # 0850021197Valuation #111,231Sq. Feet 1712

## Sequence

10-30	R* Bldg. Footing
20	R* Elec. Temp Service Pole
20	K* Building Foundation
30-999	Address Confirmation
3 <b>0-999</b>	Open Floor
30-999	R* Bldg. Slab Insp.
30-999	R* Elec. Under Slab
40	R*Plumb. Under Slab
40	Four Trade Rough In
10	Four Trade Rough In> 2500
40	Hare Frade Rough In
40	Three Trade Rough In> 2500
40	I Wo I rade Rough In
40	Two Trade Rough In> 2500
40	One Trade Rough In
50	One Trade Rough In > 2500
60	R* Insulation
	Four Trade Final
50	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
	Operations Permit