Each section below to be filled out by whomever performing work Must be owner or licensed contractor Address company name & phone must match

Application # 11500 27105

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 James Semonmous	Date 8 - 5 - 20 / /	
Site Address 1791 Blackman Rand, Du		
Directions to job site from Lillington Take 42/ E.To	5. m Kay ane, Tuen	
2 - 5 20012 1 22 7 -	ugn. Lush right on arrawler	
	ORd Luns in to Blackmon Rd	
Subdivision foccos to soo Lapiderny agar on	left, son Property on right	
Description of Proposed Work 20 nove modular Lome # of Bedrooms 4		
Heated SF 2156 Unheated SF Finished Bonus Room?	Crawl Space V Slab	
As DWN Cr General Contractor Information	<u> </u>	
Building Contractor's Company Name	Telephone	
Address	Email Address	
License #		
Electrical Contractor Information		
Description of Work Dr. Neatfour - Hook Carp Service Size	Amps T Pole Yes No	
Electrical Contractor's Company Name	910 - 385 - 5941 Telephone	
1900 Indian Journ Rd. Clinton NC)	
Address 23219L Zip 28238	Email Address	
License # Mechanical/HVAC Contractor Inform	nation	
Description of Work Discourt hont summer and home back up,		
Godwin Heating and Air	9/0-268-7248	
Mechanical Contractor's Company Name	Telephone	
625 Honers Ln. Dunn. NC 28334	Slicks-resting- hlue solvenso.	
Address	Email Address	
13327 License #		
Plumbing Contractor Information		
Description of Work Water & sewer for dublin	# Baths	
Halls Plumbins	9/0 897 5220 Telephone Halls Plumbing 897 @ yatoo Com	
Plumbing Contractor's Company Name	Telephone	
4056 Old Stage Rd. Erwin	Halls Plunding 897 6 yatto Lon	
Address 2 0 9 0 7	Email Address	
License #		
Insulation Contractor Information		
Insulation 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			
2 Have you hired or intend to hire an individual to superintend and			
manage construction of the project?YesNo			
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			
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 I affirm that I have obtained all listed contractors			
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			
· · · · · · · · · · · · · · · · · · ·			
8-8-11			
Signature of Owner/Contractor/Officer(s) of Corporation 8-8-11 Date			
Affidavit for Worker's Compensation N C G S 87-14			
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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			
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Moving MOD to this Location

Plan Box Number / //e	Job Name_	Brewing Fon
,	Date: 8 -	- 8-11
Required Inspections for SFA		() Da () T
	Appl. #_//	5002/105
	Valuation_	146078
	Sq. Feet	2156
Sequence		
10	D# D11- E	
10	R* Bldg. Footing	
10	R* Mono Slab	
10-30	R* Elec. Temp Service Pole	
20	Foundation Survey	
20	R* Building Foundation	C1 1
20	Address Confirmation	Slab
30-999	Open Floor	1.6
30-999	R* Bldg. Slab Insp.	Mono
30-999	R* Elec. Under Slab	
30-999	R*Plumb. Under Slab	Crawl
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 Four Trade Final > 2500	
60		
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	