

\* 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 # 065001472312  
Harnett County Central Permitting  
PO Box 65 Lillington, NC 27546  
Telephone Number 910-893-7525 www.harnett.org  
**Application for Building and Trade Permit**

Owner's Name: Lee Garcia Date: 5/7/09  
Address: 360 N. Raleigh St., Angier Phone: 919-427-7021  
Directions to job site from Lillington: 210 N; (L) on 55; (L) on Williams St./  
Chalybeate Springs Rd; 4D 3 mi on (L)  
Subdivision: Cross Link Lot: 33

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

SCANNED  
5/14/09  
DATE

Total Project Cost: 150,000 Description of Proposed Work: SFD

**General Contractor Information**

Heated SF 1600 Crawl Space   
Unheated SF  Slab () Building Construction Cost \$ \_\_\_\_\_  
Acres Disturbed .25 Stories 1

Raynor Builders, Inc. 919-639-3612  
Building Contractor's Company Name Telephone  
360 N. Raleigh St., Angier NC 27501 40079  
Address License #

Signature of Owner/Contractor/Officer(s) of Corporation - Must sign back of form & workers comp

**Electrical Permit Information**

Description of Work Electrical per code Electrical Cost \$ 4,000-  
TS Pole: Yes  No () Underground () Overhead ()  
Permanent Service: Underground () Overhead () Service Size: 200 Amps

Stancil's Owen Electrical 919-639-2073  
Electrical Contractor's Company Name Telephone  
466 Stancil Rd, Angier 13075-L  
Address License #

Signature of Officer(s) of Corporation

**Mechanical Permit Information**

Description of Work Install 15 seer HVAC  
Number of Units 1 Type System 15 seer Mechanical Cost \$ 6000-

JC's Heating & Air 919-557-3053  
Mechanical Contractor's Company Name Telephone  
1589 Wade Stephenson Rd, Holly Springs 12655H-3  
Address License #

Signature of Officer(s) of Corporation

**Plumbing Permit Information**

Description of Work Plumbing per  
Number of Baths \_\_\_\_\_ Plumbing Cost \$ \_\_\_\_\_

Barne's Plumbing, Inc. 919-639-3401  
Plumbing Contractor's Company Name Telephone  
PO Box 207, Angier, NC 17735  
Address License #

Signature of Officer(s) of Corporation

**Insulation Permit Information** Residential  Other () Not Required ()

Garner, NC  
Insulation Contractor's Company Name & Address Telephone

MAY 14 2009

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

The undersigned applicant for Building Permit # \_\_\_\_\_ 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: Raynor Builders, Inc.

Sign/Title: President

Date: 5 7-2009

**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

5 - 10 2009  
\_\_\_\_\_  
Date

CRAWL

PLAN BOX NUMBER E-6

JOB NAME Cross Links

#33

DATE 5-12-09

REQUIRED INSPECTIONS FOR SFA/SFD

APPL. # 0650014723

VALUATION \$129,553

SQ. FEET 1994

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
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	ENVIRO. OPERATIONS PERMIT