

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
Telephone Number 910-893-4759

Application for Building and Trade Permit

Owner's Name: Austin Construction and Development LLC. Date: 4-16-05
Address: 208 Wycreek Circle, Holly Springs, N.C. 27540 Phone: 919-656-5212
Directions to job site: Hwy 401 North, 3 miles subdivision on Right, Right on Mill Branch Circle, Right on Robert branch circle, job site on Right.

Subdivision: MILL BRANCH Lot: 23

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

Description of Proposed Work: New Home
Total Project Cost: \$ 220,000.00

Building Permit Information

Heated SF 2357 Crawl Space (
Unheated SF Slab (
R and K Anderson Builders Inc.
Building Contractor's Company Name Telephone 919-656-5212
Hwy 401 North, Frying Panine N.C. License # 41888
Address Signature of Officer(s) of Corporation

Electrical Permit Information

Description of Work Wiring of New Const. Electrical Cost \$ 4000.00
TS Pole: Yes () No () Underground () Overhead ()
Permanent Service: Underground () Overhead () Service Size: 200 Amps
Patrick + Burgess Inc. Telephone 910-893-5774
Electrical Contractor's Company Name License # 4710U
1309 North Main Lillington 27546
Address Signature of Officer(s) of Corporation

Mechanical Permit Information

Description of Work Heat And Air Mechanical Cost \$ 6,000.00
Number of Units 2 Type System electric Telephone 552-6238
Mechanical Contractor's Company Name License # 12655-43
J.C.'s Htg & A.C
Address 1538 Wade Stephens Rd.
Signature of Officer(s) of Corporation Holly Spgs. N.C.

Plumbing Permit Information

Description of Work Plumbing Plumbing Cost \$ 8,000
Number of Baths 2 1/2 BATH'S Telephone 910-893-8797
Sea West AKA Home Plumbing License # 11987
Plumbing Contractor's Company Name
PO Box 224 Boles Creek NC 27594
Address Signature of Officer(s) of Corporation

Insulation Permit Information

Residential () Other () Not Required ()
Insulation Inc Address 1212 Home Ct., Raleigh, N.C. Telephone 919-772-9000
Insulation Contractor's Company Name 27603

Sprinkler System Information

Sprinkler Contractor's Company Name _____ Telephone _____

Contact Person _____

Address _____ License # _____

Signature of Officer(s) of Corporation _____

Fire Alarm System Information

Fire Alarm Contractor's Company Name _____ Telephone _____

Contact Person _____

Address _____ License # _____

Signature of Officer(s) of Corporation _____

Driveway Access

NC Department of Transportation Driveway Access/Permit? Yes ___ No X

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 Division of any and all changes.

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

5-16-06
Date

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

The undersigned applicant for Building Permit # _____ being the:

_____ Contractor
 X 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.

 X 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: Austin Construction and Development, LLC.

By/Title: Bullfinch Deal etc

Date: 5-16-06