Application for	or Building and Trade Permit
Owner's Name: Christoffed W. Wewer T/F	CWW CONTRACTORS Date: 7/26/06
Directions to job site: 310 78:4505 M.	HER, N.C. 2750 Phone: 919-796-928
Yymile, right INTO SUBDIVISIA	MER LEFT ON HAINETT CENTRAL PD.
D-12 14 1	
Subdivision: PEAR MEADOW	Lot: 27
Construction Type: (Please Check)  New	Building Use: (Please Check)
Renovation	✓ Residential Modular
Addition	Commercial
Moved House	Multi-Family
Other	
Description of Proposed Work: Const.	ULT NEW SFD
•	T Downit Information
Heated SF /858 Crawl Space (	g Permit Information Building Construction Cost \$ /25,000
Unheated SF 608 Slab ()	Acres Disturbed 39 Stories
CHIN CONTRACTORS	Acres Disturbed 34 Stories Stories
Building Contractor's Company Name	Telephone .
172 WINDMERE DR. ANGER.	NC 56679
Address Chille W. Wear	License #
Simply of Office (s) of Company	<u> </u>
Signature of Officer(s) of Corporation	•
Electrica	I Permit Information
Description of Work	Electrical Cost \$ 5,000
TS Pole: Yes () No () Underground ()	Overheard ( )
Permanent Service: Underground () Overh	nead ( ) Service Size:Amps
MABRYS ELECTRICAL SERVICE	919-639-4837
Electrical Contractor's Company Name 731 MABRY RO ANNER N.C. 77	Telephone /5077 - U
Address	License #
Johny & Maley	LIGHTSO II
Signature of Officer(s) of Corporation	<del></del>
	al Permit Information
Description of Work	Manharian Cook C. Cook
Number of Units Type System Type System	Mechanical Cost \$ 5,000 916 53 2 9223
Mechanical Contractor's Company Name	Telenhone
126 S. Tuguay Ave Fuguay Van	IND NC 5529223 4412 ClassI
Address/ Address/	License #
1+ Callred 4	_
Signature of Officer(s) of Corporation	
Plumbine	Permit Information
Description of Work	Fernit mornation
Number of Baths	Plumbing Cost \$ 5,000
Tommy Aller Plg.	552.6902
Plumbing Contractor's Company Name	Telephone
1116 Rennebac R.S.	9268
Address	License #
Willow Springe INC 27192.	
Signature of Officer(s) of Corporation	
Jamy & all Insulation	n Permit Information
Residential () Other () Not Required ()	
TR1-C174	418 Person St. Fayenville 110-486-8855
Insulation Contractor's Company Name	Address Afr. Telephone

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

e undersigned applicant for Building Permit # <u>15&amp;&amp;/</u> being the:	The undersigne
Contractor Owner Officer/Agent of the Contractor or Owner	
hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) aforming 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.	
hile working on the project for which this permit is sought it is understood that the Central ermitting Department issuing the permit may require certificates of coverage of worker's impensation insurance prior to issuance of the permit and at any time during the permitted work om any person, firm or corporation carrying out the work.	Permitting Deposition
m Name: CWW CONTRACTORS	Firm Name:
MYTitle: Chthw. Wear / aware	By/Title:
7/24/5/	Date:

Two Trade Final > 2500

One Trade Final > 2500

Envir. Operations Permit

One Trade Final

## 

60

60

60

999

Seg	
10	R*Bldg Footing
10-30	R*Elec Temp Service Pole
20	R*Bldg Foundation
20	Address Confirmation
30-999	R*Open Floor
30-999	R*Bldg Slab Insp
30-999	R*Elec Under Slab
30-999	R*Plumb under Slab
30-999	R*Bldg Water/Damp Proofing
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 Inspection
60	Four Trade Final
60	Four Trade Final > 2500
60	Three Trade Final
60	Three Trade Final > 2500
60	Two Trade Final