

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

**Application for Building and Trade Permit**

Owner's Name: HOMECO Date: 7-17-06  
Address: P.O. Box 777 Dunn NC 28335 Phone: 910-892-4345  
Directions to job site: 27 WEST TURN LEFT INTO LAUREL VALLEY  
SUBDIVISION, TURN LEFT ON CHASON TERRACE, LOT IS 3<sup>rd</sup> ON LEFT  
Subdivision: LAUREL VALLEY Lot: 94  
Construction Type: (Please Check) Building Use: (Please Check)  
 New  Residential  
 Renovation  Modular  
 Addition  Commercial  
 Moved House  Multi-Family  
 Other  
Description of Proposed Work: 2 STORY w/ Bonus Room  
Total Project Cost: \_\_\_\_\_

**Building Permit Information**

Heated SF 1864 Crawl Space   
Unheated SF 624 Slab ( )  
CUMBERLAND HOMES  
Building Contractor's Company Name  
P.O. Box 777 Dunn NC 28335  
Address  
[Signature]  
Signature of Officer(s) of Corporation  
Building Construction Cost \$ 95,064  
Acres Disturbed .35 Stories 2  
Telephone 910-892-4345  
License # \_\_\_\_\_

**Electrical Permit Information**

Description of Work New Electrical Cost \$ \_\_\_\_\_  
TS Pole: Yes (X) No ( ) Underground (X) Overhead ( )  
Permanent Service: Underground (X) Overhead ( ) Service Size: 200 Amps  
Wester & Pace  
Electrical Contractor's Company Name Telephone  
546 Leslie Dr., Sanford NC 919-499-5389  
William Wester  
Address License # 1200-76  
[Signature]  
Signature of Officer(s) of Corporation

**Mechanical Permit Information**

Description of Work New Mechanical Cost \$ \_\_\_\_\_  
Number of Units \_\_\_\_\_ Type System Heat Pump  
Jackson's Heating & Air  
Mechanical Contractor's Company Name Telephone  
Jackson Heating & Air 910-891-5410  
PO Box 82, Benson, NC  
David Jackson  
Address License # 23670  
[Signature]  
Signature of Officer(s) of Corporation

**Plumbing Permit Information**

Description of Work New Plumbing Cost \$ \_\_\_\_\_  
Number of Baths \_\_\_\_\_  
Glover Contract Plumbing Inc.  
Plumbing Contractor's Company Name Telephone 910-892-7002  
Glover Contract Plumbing Inc. 910-892-1612  
PO Box 726 Coats, NC  
Shawn Glover

Address

*Shirley Glover*

License # ~~1192~~ 23160

Signature of Officer(s) of Corporation

**Insulation Permit Information**

Residential (X) Other ( ) Not Required ( )

Tri City \_\_\_\_\_

Po Box 6405, Fayetteville, NC 910-486-8855 \_\_\_\_\_

Insulation Contractor's Company Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

**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 \_\_\_

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.

*[Signature]*  
Signature of Owner/Contractor/Officer(s) of Corporation

7-17-06  
Date

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

The undersigned applicant for Building Permit # \_\_\_\_\_ being the:

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: HOMECO BUILDERS INC.  
By/Title: Danny Morris  
Date: 7-17-06

**Required Inspections for SFA/SFD**

Home Co -

Appl # 06-5-15400  
 Valuation 188287  
 Sq. Ft 2898

<u>Seq</u>		
10	<input checked="" type="checkbox"/>	R*Bldg Footing
10-30		R*Elec Temp Service Pole
20	<input checked="" type="checkbox"/>	R*Bldg Foundation
20	<input checked="" type="checkbox"/>	Address Confirmation
30-999	<input checked="" type="checkbox"/>	R*Open Floor
30-999	<input type="checkbox"/>	R*Bldg Slab Insp
30-999	<input type="checkbox"/>	R*Elec Under Slab
30-999	<input type="checkbox"/>	R*Plumb under Slab
30-999	<input checked="" type="checkbox"/>	R*Bldg Water/Damp Proofing
40	<input checked="" type="checkbox"/>	Four Trade Rough In
40	<input type="checkbox"/>	Four Trade Rough In > 2500
40	<input type="checkbox"/>	Three Trade Rough In
40	<input type="checkbox"/>	Three Trade Rough In > 2500
40	<input type="checkbox"/>	Two Trade Rough In
40	<input type="checkbox"/>	Two Trade Rough In > 2500
40	<input type="checkbox"/>	One Trade Rough In
40	<input type="checkbox"/>	One Trade Rough In > 2500
50	<input checked="" type="checkbox"/>	R*Insulation Inspection
60	<input checked="" type="checkbox"/>	Four Trade Final
60	<input type="checkbox"/>	Four Trade Final > 2500
60	<input type="checkbox"/>	Three Trade Final
60	<input type="checkbox"/>	Three Trade Final > 2500
60	<input type="checkbox"/>	Two Trade Final

<u>Seq</u>		
60	<input type="checkbox"/>	Two Trade Final > 2500
60	<input type="checkbox"/>	One Trade Final
60	<input type="checkbox"/>	One Trade Final > 2500
999	<input checked="" type="checkbox"/>	Envir. Operations Permit