

Harnett County Central Permitting
PO Box 68 Lenoir, NC 27846
Telephone Number: 910-883-4750

Application for Building and Trade Permit

Owner's Name: DR. GUY HARRIS Date: 1/12/06
Address: P.O. Box 6027 Raleigh Phone: (919) 883-5520
Directions to job site: _____

Submission: B. WOOD WOODS Lot: _____
Construction Type (Please Check): New Renovation Addition Moved House Other
Building Use (Please Check): Residential Modular Commercial Multi-Family
Description of Proposed Work: NEW SED
Total Project Cost: _____

Building Permit Information

Heated SF _____ Crew Space (s) _____
Unheated SF _____ Slab () _____
Building Contractor's Company Name: DR. GUY HARRIS Building Construction Cost \$: _____
Address: P.O. Box 6027 Raleigh Acres Disturbed: 0.9 Stories: 2
Telephone: (919) 883-5520
License #: SR 423
Signature of Officer(s) of Corporation: [Signature]

Electrical Permit Information

Description of Work: _____ Electrical Cost \$: _____
TS Pole: Yes (x) No () Underground () Overhead () Service Size: 200 Amps
Permanent Service: Underground () Overhead () Telephone: (919) 883-8483
Electrical Contractor's Company Name: SCOTT BRIDGEMAN License #: 22983-L
Address: 12 Brookside Cir Asheville
Signature of Officer(s) of Corporation: [Signature]

Mechanical Permit Information

Description of Work: _____ Mechanical Cost \$: _____
Number of Units: _____ Type System: _____ Telephone: (919) 883-5520
Mechanical Contractor's Company Name: DR. GUY HARRIS License #: 19942
Address: _____
Signature of Officer(s) of Corporation: [Signature]

Plumbing Permit Information

Description of Work: _____ Plumbing Cost \$: _____
Number of Baths: _____ Telephone: (919) 883-8114
Plumbing Contractor's Company Name: _____ License #: 071074
Address: _____
Signature of Officer(s) of Corporation: [Signature]

Insulation Permit Information

Residential () Other () Not Required () Telephone: (919) 554-9004
Insulation Contractor's Company Name: All Pro Ins. Inc. Address: _____

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.

NOEL MEDOZZA
Signature of Owner/Contractor/Officer(s) of Corporation

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: oak city Homes

By/Title: Robert J. Cherry owner

Date: 8/1/06

FINISHING ATTIC +
REC. RM.

Plan Box Number B-5

Job Name OAK CITY Home

Date: 3-21-07

Required Inspections for SFA/SFD

Appl. # 0650015439
Valuation \$61,074
Sq. Feet 940
(REC. RM + ATTIC)
ONLY

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 In
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	_____ ✓	Envir. Operations Permit



OAK CITY
8-3-06

Required Inspections for SFA/SFD

Appl # 0650015439
Valuation \$219,995
Sq. Ft 3386

<u>Seq</u>	
10	<input checked="" type="checkbox"/> R*Bldg Footing
10-30	<input type="checkbox"/> R*Elec Temp Service Pole
20	<input type="checkbox"/> R*Bldg Foundation
20	<input 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 type="checkbox"/> R*Bldg Water/Damp Proofing
40	<input type="checkbox"/> Four Trade Rough In
40	<input checked="" 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 type="checkbox"/> Four Trade Final
60	<input checked="" 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