

* 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 # 0650015547R

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: Joseph Fanjoy, Fanjoy Custom Homes, LLC Date: 9/27/2006
Address: 109 Fairground Rd. Holly Springs NC 27540 Phone: (919) 552-8085
Directions to job site from Lillington: Hwy 401N, subdivision is on left, after crossing Rauls Church Rd.
Subdivision: Sherman Pines Lot: 10

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

Total Project Cost: \$213,000 Description of Proposed Work: new residential

Building Permit Information

Heated SF 2430 Crawl Space Building Construction Cost \$ 172,800
Unheated SF 885 Slab Acres Disturbed 0.5 Stories 1
Fanjoy Custom Homes, LLC Telephone (919) 552-8085
Building Contractor's Company Name Address 109 Fairground Rd. Holly Springs 27540 License # 58812
Joseph Fanjoy
Signature of Officer(s) of Corporation

Electrical Permit Information

Description of Work House Wiring Electrical Cost \$ ~900.00
TS Pole: Yes () No () Underground () Overhead ()
Permanent Service: Underground () Overhead () Service Size: 200 Amps
Harte Electric Telephone 639-6851
Electrical Contractor's Company Name Address 7836 Hwy 55 South Willow Springs NC 27592 License # 23339-U
[Signature]
Signature of Officer(s) of Corporation

Mechanical Permit Information

Description of Work NVAC
Number of Units 2 Type System Heat Pump Mechanical Cost \$ 8,000
P.O. Box 65 Equay VA BINA NC 27526 Telephone 919 557-3454
Mechanical Contractor's Company Name Address BAR-C. Mech. Inc License # 18460
[Signature]
Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work Plumbing - new Plumbing Cost \$ 7899.00
Number of Baths 2.5 Telephone 828-2299
API Plumbing License # 23451
Plumbing Contractor's Company Name Address 1500 Brookside Drive Raleigh
[Signature] API Plumbing
Signature of Officer(s) of Corporation

Insulation Permit Information

Residential Other () Not Required ()
Insulating, Inc. Telephone 730-7677
Insulation Contractor's Company Name Address 1212 Home Court Raleigh 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 ___

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.

Joseph Earl Farrow

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

9/27/2006

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: Fanjoy Custom Homes, LLC

Sign/Title: Joseph Mait Fanny, Manager

Date: 9/27/2006

C-5

9-28-06

Fran Joy

Required Inspections for SFA/SFD

Appl #	<u>0650015547</u>
Valuation	<u>\$ 215,382</u>
Sq. Ft	<u>3315</u>

- 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

- 60 Two Trade Final > 2500
- 60 One Trade Final
- 60 One Trade Final > 2500
- 999 Envir. Operations Permit

* Each section below to be filled out by who is performing work. Must be owner or licensed contractor. Address, company name & phone must match information on license.

Application # 0650015547R

Harnett County Central Permitting
PO Box 65 Lillington, NC 27540
Telephone Number 910-893-7525 www.harnett.org
Application for Building and Trade Permit

Owner's Name: Joseph Fajiga, Fajiga Custom Homes, LLC Date: 12/11/06
Address: 109 Fairground Road, Holly Springs, NC 27540 Phone: (919) 552-8085
Directions to job site from Lillington: _____

Subdivision: Sherman Pines Lot: 10

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

Total Project Cost: _____ Description of Proposed Work: new residential

General Contractor Information

Heated SF _____ Crawl Space () _____
Unheated SF _____ Slab () _____
Building Construction Cost \$ _____
Acres Disturbed _____ Stories _____

Building Contractor's Company Name _____ Telephone _____
Address _____ License # _____

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

Electrical Permit Information

Description of Work _____ Electrical Cost \$ _____
TS Pole: Yes () No () Underground () Overhead ()
Permanent Service: Underground () Overhead () Service Size: _____ Amps

Electrical Contractor's Company Name _____ Telephone _____
Address _____ License # _____

Signature of Officer(s) of Corporation _____

Mechanical Permit Information

Description of Work _____ Mechanical Cost \$ _____
Number of Units _____ Type System _____

Mechanical Contractor's Company Name _____ Telephone _____
Address _____ License # _____

Signature of Officer(s) of Corporation _____

Plumbing Permit Information

Description of Work plumbing - new Plumbing Cost \$ 6970.00
Number of Baths 2.5 919-639-0195
W & W Plumbing Co. Inc Telephone _____

Plumbing Contractor's Company Name _____
PO Box 1239 Angier NC License # 14087
Address _____
Rich Wells
Signature of Officer(s) of Corporation _____

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

Insulation Contractor's Company Name & Address _____ Telephone _____