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

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Owner's Name: Kncc Liston Ho	Building and Trade Permit Date: Aug 16 2006
Address: 3408 Actumn most P	L Fugury-Virina 2752/Phone: 9193695681
Directions to job site: New Construction	n Résidental
Para chara	
Subdivision: KaverStone	Lot:] [
Construction Type: (Please Check) New	Building Use: (Please Check)
Renovation	Residential Modular
Addition	Commercial
Moved House	Multi-Family
	
Description of Proposed Work: New Constituted Project Cost: 99,500	struction Residential
Building i	Permit Information
Heated SF \59\ Crawl Space N	Building Construction Cost \$ 28500
Unheated SF <u>ผ่4ก</u> Slab ()	Acres Disturbed • 5 Stories 1
The well Built House INC	919 369 5681
Building Contractor's Company Name	Telephone 56979
3408 Auturn Mig PL	
Address	License #
Signature of Officer(s) of Corporation	-
Signature of Officer(s) of Corporation	
Electrical	Permit Information
Description of Work NauConStruction	Electrical Cost \$ 6000
TS Pole: Yes () No () Underground ()	Overheard ()
Permanent Service: Underground W Overhead	ad () Service Size: <u>260</u> Amps
Kerns Electric	
Electrical Contractor's Company Name	Telephone
Address Lai Kang	License #
Signature of Officer(s) of Corporation	
Description of Work New Construction	Permit Information
Number of Units \ Type System \	Mechanical Cost \$ 7 000
HIR ESSOCIALIS INC	919 4425991
Mechanical Contractor's Company Name	Telephone .
5332 Couble Rige Rd HollySprings	27540 21536 H3
Address Jan Paris	License #
Signature of Officer(s) of Corporation	-
Signature of Militer(s) of Corporation	
A Plumbing !	Permit Information
Description of Work Way Construction	
Number of Baths 2	Plumbing Cost \$_5500
LR Glover Plumbing INC	919 894 5892
Plymbing Contractor's Company Name 10 Box 764 Boxson 27504	Telephone 7958
10 Box 764 Sonson 27504 Address	License #
200 Glove	LICOTISO #
Signature of Officer(s) of Corporation	
	B. well I. d. week an
	Permit Information
Residential () Other () Not Required ()	Come 27529 919 7739386
Insulation Contractor's Company Name	Address Telephone
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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 control performing the w	firm under penalties of perjury that the person(s), firm(s) or corporation(s) ork 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.
<u></u>	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.
compensation ins	n the project for which this permit is sought it is understood that the Central rtment issuing the permit may require certificates of coverage of worker's surance prior to issuance of the permit and at any time during the permitted work firm or corporation carrying out the work.
Firm Name: <u>V</u>	kc Customy Homes Inc
By/Title: Buin	Comment President
Date: Aug 1	92006

Required Inspections for SFA/SFD Appl# Valuation Sq. Ft Seq <u>Seq</u> R*Bldg Footing 10 60 Two Trade Final > 2500 10-30 R*Elec Temp Service Pole 60 One Trade Final 20 R*Bldg Foundation 60 One Trade Final > 2500 20 **Address Confirmation** 999 Envir. Operations Permit 30-999 R*Open Floor 30-999 R*Bidg Slab Insp R*Elec Under Slab 30-999 R*Plumb under Slab 30-999 R*Bldg Water/Damp Proofing 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