\* 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 # 065015648

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: TERHUNE HOMES FURUAY-VARENA Address: 1021 HAZELTON CN. Directions to job site from Lillington: Hwa 42 70 RT ON SELBY CT Subdivision: TAYLOR POL~75 Construction Type: (Please Check) Building Use: (Please Check) XNew \_\_ Moved House Residential Commercial \_\_ Other Modular Multi-Family Renovation Addition Total Project Cost: 99000 Description of Proposed Work: NEW Hom & **General Contractor Information** Building Construction Cost \$ 2000 Heated SF 1200 Crawl Space N Stories Acres Disturbed •33 Unheated SF \_Slab() TEPHUNE HOMES, LLC Building Contractor's Company Name 1021 HAZELYON LN License # Address. Signature of Owner/Contractor/Officer(s) of Corporation **Electrical Permit Information** Electrical Cost \$ 4000 Description of Work NEW COST. TS Pole: Yes ( ) Underground ( ) Overheard ( ) Service Size: ZOO Permanent Service: Underground () AURRY ELECTRIC 919-639-3767 Telephone Electrical Contractor's Company Name 9601-U D. O. BOY 390 ANGREA, NO Addres License # Signature of Officer(s) of Corporation Mechanical Permit Information Description of Work NEW CONS T Mechanical Cost \$ 4200 Type System HEATPUMP Number of Units HVAC SPECIALIST Mechanical Contractor's Company Name 22035 Colessburg RD. Fogua, JARWA Telephone 2203 Address ) License # Signature of Officer(s) of Corporation Plumbing Permit Information Description of Work <u>New Cons</u>ア・ Plumbing Cost \$\_460 Number of Baths 919-639-2023 AUERY PLUMB Plumbing Contractor's Company Name Telephone License # Address Signature of Officer(6) of Corporation

**Insulation Permit Information** 

Residential (\*\*) Other ( ) Not Required ( )

Insulation Contractor's Company Name

1212 How CT - RACEAGH Address 919-772-9000 Telephone

Application # 06 - 50 015647

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

The undersigned	ed applicant for Building Permit #	being the:
	General Contractor Owner Officer/Agent of the Contractor or Owner	
	Officer/Agent of the Contractor of Owner	
	onfirm under penalties of perjury that the perwork set forth in the permit:	rson(s), firm(s) or corporation(s)
	Has/have three (3) or more employees and had compensation insurance to cover them.	as/have obtained workers'
	<ul> <li>Has/have one (1) or more subcontractors(s) a compensation insurance to cover them.</li> </ul>	nd has/have obtained workers'
X_	Has/have one (1) or more subcontractors(s) workers' compensation insurance covering the	
	_ Has/have not more than two (2) employees a	nd no subcontractors.
Permitting Del compensation	on the project for which this permit is sought partment issuing the permit may require cer insurance prior to issuance of the permit and at on, firm or corporation carrying out the work.	tificates of coverage of worker's
Firm Name:	TERHUNE HOMES, LLC	
Sign/Title:	In Cloud - OWNER	
Date: 8/6	106	

## Required inspections for SFA/SFD

TERHUNE HOMES 15648) 8-28-06 Valuation Sq. Ft

Seq		
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*Bidg 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	

Seq	
60	Two Trade Final > 2500
60	One Trade Final
60	One Trade Final > 2500
999	Fryir Operations Pormit