BZ

Owner's Name: Keith Bullock Builders	ilding and Trade Permit - エル。 Date: 9-38-06 - ルータ750/ Phone: アパラーイタフーイドスタ
Address: 72 overlock it Angier Directions to job site: they, 401 N 1	- UC 3750/ Phone: 919-4027-4408 turn left on Chapphante Bl
- 1 1	
Subdivision: Dextertical	Lot: '6
<u> </u>	<u>uilding Use</u> : (Please Check) ✓Residential
New	Modular
Addition	Commercial
Moved House	_ Multi-Family
Other Description of Proposed Work: Single Fam	i W
Total Project Cost: 4/10,000	
,	41.5
· 1	unmit Information uilding Construction Cost \$
Heated SF 15/9 Crawl Space (1) Unheated SF 480Slab (1) A	cres Disturbed 35 Stories /
Keith Bullork Buildos INC.	919-427-4628
Building Contractor's Company Name	Telephone 47594
72 Overlock Ct. Angier NC 2750, Address	License #
Address Sulla	
Signature of Officer(s) of Corporation	•
Flectrical Pr	ermit Information
Description of Work	Electrical Cost \$
TS Pole Ves M No () Underground M C	Overheard ()
Permanent Service: Underground & Overhead Rex Dean Electrical	Amps
Electrical Contractor's Company Name	Telephone 5748
Address Leave to f. Billook	
Address	License #
Signature of Officer(s) of Corporation	
Mechanical F	Permit Information
Description of Work Number of Units / Type System	#P Mechanical Cost \$
Young's Electric INC.	638-2277
Mechanical Contractor's Company Name	Telephone HO446?
Po Box 398 Angier	License #
Ted Your to Allery	Elochico II
Signature of Officer(s) of Corporation	
'	amit Information
Description of Work New	ermit Information
Number of Baths 2	Plumbing Cost \$
W&W Hunking Co. INC.	Plumbing Cost \$
Plumbing Contractor's Company Name	Telephone
Po Box 1004 Angier	License #
Address Life to follow	
Signature of Officer(s) of Corporation	
Insulation F	Permit <u>Information</u>
Tisulating Tile.	1212 Hone ct Fileil 772-9000
	Address Telephone
	- 4 60 68/01

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

The undersigne	ed applicant for building Fermit # being the	ie.
	Contractor Owner Officer/Agent of the Contractor or Owner	
	infirm under penalties of perjury that the person(s), fi work set forth in the permit:	rm(s) or corporation(s)
	Has/have three (3) or more employees and has/have ob compensation insurance to cover them.	tained workers
	Has/have one (1) or more subcontractors(s) and has/have compensation insurance to cover them.	ve obtained workers'
	Has/have one (1) or more subcontractors(s) who has/haworkers' compensation insurance covering themselves.	ve their own policy of
	_ Has/have not more than two (2) employees and no subc	ontractors.
Permitting Dep compensation is	on the project for which this permit is sought it is undepartment issuing the permit may require certificates of insurance prior to issuance of the permit and at any time due, firm or corporation carrying out the work.	coverage of worker's
By/Title:	Kull .	
Data:	9-78-06	

Required Inspections for SFA/SFD

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*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

Two Trade Final

60

Appl #	0650015	745
Valuation	\$155, 218	
Sq. Ft	2389	

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