

Master copy

Application for Building and Trade Permit

Owner's Name: STEPHENSON BUILDING INC. Date: _____
Address: 1187 N. RAVEN ST. APT 2201 Phone: 639-2862
Directions to job site: FROM LILLINGTON HWY 210 TOWARD APT. 2201
LEFT ON JAMES ADAMS, LEFT ON WOOD BURNING, RIGHT INTO ADAMS POINT

Subdivision: ADAMS POINT Lot: 19

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

Description of Proposed Work: RESIDENTIAL
Total Project Cost: 140,000.00

Building Permit Information

Heated SF 1807 Crawl Space () Building Construction Cost \$ 140,000.00
Unheated SF _____ Slab () Acres Disturbed _____ Stories 1 1/2

STEPHENSON BUILDING INC. 919-639-2862 (M-9194278654)
Building Contractor's Company Name Telephone
1187 N. RAVEN ST. APT 2201 53604
Address License #
[Signature]
Signature of Officer(s) of Corporation

Electrical Permit Information

Description of Work NEW Electrical Cost \$ 3500.00
TS Pole: Yes () No () Underground () Overhead ()

Permanent Service: Underground () Overhead () Service Size: 200 Amps
REX A DEAN ELECTRICAL 919-552-4282
Electrical Contractor's Company Name Telephone
8039 KENNEDY RD. LITTLE SPRING NC. 5748
Address 27592 License #

[Signature]
Signature of Officer(s) of Corporation

Mechanical Permit Information

Description of Work NEW Mechanical Cost \$ 5000.00
Number of Units 2 Type System ELECT.

J.C.'s HVAC 919-552-6258
Mechanical Contractor's Company Name Telephone
150 WOOD STREET RD. HAY MARKET NC. 12655 N-3
Address 27540 License #

[Signature]
Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work NEW Plumbing Cost \$ 3600.00
Number of Baths 2

W.S.W. PLUMBING CO. INC. 919-639-0195
Plumbing Contractor's Company Name Telephone
Box 1004 APT 2201 NC. 27581 141097
Address License #

[Signature]
Signature of Officer(s) of Corporation

Insulation Permit Information

Residential () Other () Not Required () 152 North Street
INSULATION INC. (RAVENA) RAVENA NC 27683 919 772-9100

Sprinkler System Information - Commercial

Sprinkler Contractor's Company Name

Telephone

Contact Person

Address

License #

Signature of Officer(s) of Corporation

Fire Alarm System Information - Commercial

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 Department of any and all changes.

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

Date

10/2/06

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

The undersigned applicant for Building Permit # _____ being the:

- General 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: Stephenson Builders Inc.

Sign/Title: [Signature] Vice President

Date: 10/2/06

G-4

10-3-06
STEPHENSON BUILDERS

Required Inspections for SFA/SFD

Appl #
Valuation
Sq. Ft

0650015841
\$149,176
2,296

- 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