* Each Lection 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 #

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: Southsastsan Denslopment Da	te: <u>//-09-0</u> 7
Address: 39/- Falance Lill III Sa	one: 910-670-2004
Directions to job site from Lillington: 2/A week + > 3/2 D 7	. ^ 1
Doc's Ré Subdivision Approp. 3 miles on Right	1
Subdivision: Colonial Hus	21
Construction Type: (Please Check) Building Use: (Please Check)	
	k) Commercial
Nerrovation Other Modular	Multi-Family
Total Project Cost: 180,000. Description of Proposed Work: NEW R	sidential
Heated SF 70 Crawl Space General Contractor Information Unbeated SF 70 Slab () Building Construction Cost \$	115,000.00
Acres Disturbed	Stories
1131 Enterprises of Fam 910 977-	
Telephone	
5511 Ramsey St Fays Houlle NC 28311	62661
Mayor hill -	License #
Signature of Owner/Contractor/Officer(s) of Corporation — Must sign back of form 8	
Electrical Permit Information	workers comp
Description of WorkElectrical Cost \$ TS Pole: Yes () No () Underground () Overheard ()	
Permanent Service: Underground () Overhead () Service Size:	Amps
SANDY RIDGE ENEX, INC. 910.323.2	VCD Amps
Electrical Contractor's Company Name Telephone	120
454 WHITEHERO RD PAY. N.C. 28312	100064
Address	License #
Signature of Officer(s) of Corporation	
Description of Work TRS 2 8 4 6	
Description of Work エルミナルイム レボル カレルと Number of Units ユ Type System SPAST Mechanical	l Cost \$ 7300
CAROLIUA COMEURI CENTER PONDIO	7 COSt \$ 7 7 0 0
Mechanical Contractor's Company Name Telephone	
235 GUN CLUB DE PINEHURST NC 18374	29043
Address	License #
Deede fr. Wand. Is	
Signature of Officer(s) of Corporation Plumbing Permit Information	and the second s
Description of Work	
Number of Baths Plumbing Cost \$	
Plumbing Contractor's Company Name 910-424 Telephone	1-6712
3242 mid Dene DA FOUNC 28306	77.56-P1
Address	License #
Reanda Bleacher	
Signature of Officer(s) of Corporation	- "
Insulation Permit Information Residential (X) Other () No TRI CITY INSULATION 418 PERSON ST	
TRI CITY INSULATION 418 PFRSON ST Insulation Contractor's Company Name & Address F カッ ルC 29301	910 486-8855 Telephone

Application #
Homeowners Applying to Build Their Own Home Please answer the following questions then see a Permit Technician to determine if you qualify for permit under Owners Exemption. Questionnaire per G.S. 87-14 Regulations as to Issue of Building Permits (Memo available upon request)
Do you own the land on which this building will be constructed? yes no
2. Have you hired or intend to hire an individual to superintend and manage construction of the project? yesno
3. Do you intend to directly control & supervise construction activities? yes no
4. Do you intend to schedule, contract, or directly pay for all phases of construction work to be done?yes no
5. Do you intend to personally occupy the building for at least 12 consecutive months following completion of construction and do you understand that if you do not do so, it creates the presumption under law that you fraudulently secured the 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, number of bedrooms, 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

ARC J. C. C.
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant 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 three (3) or more employees and has obtained workers' compensation insurance to cover them.
Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them.
Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance covering themselves.
Has no 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. Company or Name: **Enterpease** Company or Name:** Company or Name:**
Sign w/Title: Low W Menber Date: 11/16/07

Please replace Mr. Electric for Sandy Ridge Electric on applications 06-50015936, 0650015937, 0650015939 Mary W. Robinson Rik Enterprises

Application # 06-50015936

Harnett County Central Permitting 06-50015937 PO Box 65 Lillington, NC 27546

Telephone Number 910-893-7525 Fax 910-893-2793 www.harnett.org

Certification of Work Performed By Owner/Contractor

Owner (s) o	of Structure: Phone:			
Owner (s) A	Mailing Address:			
Land Owner	Name (s): Phone:			
PIN or Parc	9 #:			
	Description of Work to be done			
Mechanical:	Olim Vital Operation New Unit Without Ductwork Gas Piping			
Plumbing:	Service Change Service Reconnect Other			
•	Water/Sewer Tap Number of Baths Water Heater			
Specific Direc	ctions to Job from Lillington:			
Subdivision: Lot #: Lot #: Luther T. Porter have provided or will provide the # Electrical labor				
	r(s) signature: Date:			
County: Contract	1534 Gordonderry Place Faretterille Nr 28301			
	and the state of t			

Plan Box N	Vumber	B -	6
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Job Name Ry R #121 ...

Date: 1/-19-07

Required Inspections for SFA/SFD

Appl. # <u>0750015936</u> Valuation <u># 149,694</u> Sq. Feet <u>2364</u>

Sequence

10	R* Bldg. Footing
10-30	R* Elec. Temp Service Pole
20	R* Building Foundation
20	Address Confirmation
30-999	Open Floor
30-999	R* Bldg. Slab Insp.
30-999	R* Elec. Under Slab
30-999	R*Plumb. Under Slab
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
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