* Each Jection 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 # 06508 15943

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: R R R E L T E L P		te: 1-16-0/
Address: 5431 RODWELL R	20 FAY NC 28311 Ph	one: 910 391 -2079
Directions to job site from Lillington:	14 27 LEFT ON	DUC'S 120AD
PLIGHT ON COLONIAL		
Subdivision: COLOLIABL 12	ques lo	t <u>69</u>
Construction Type: (Please Check) X New Moved House Renovation Addition Other	Building Use: (Please Chec	
Total Project Cost: # 130,000 Description	of Proposed Work: LEW	PES
Gen	eral Contractor Information	
Heated SF 1776 Crawl Space () Unbeated SF594 Slab (4)	Acres Disturbed	Stories 1
RER ENTERPRISES of		
Building Contractor's Company Name	Talanhana	
	28311	<i>5</i> 8689
214 Glensla Str		License #
Address		Licetise #
Sayl Sh		
Signature of Owner/Contractor/Officer(s) of	Corporation — Must sign back of form ctrical Permit Information	a workers comp
Description of Work エルリナルとし	22W Electrical Cost S	3800
TS Pole: Yes (A) No () Underground (X)	Overneard ()	
Permanent Service: Underground 💢 Ov	/erhead () Service Size:	200 Amps
SANDY RIDGE ELET, INC	(71 A 441	2458
Electrical Contractor's Company Name	Telephone	
454 WHITEHERD RA	PAY, N.C. 28312	100064
Address		License #
Atton 0		
Signature of Officer(s) of Corporation	Production with	
Mec	hanical Permit Information	
Description of Work I 237 BLL	LIEW	
Number of Units Type Syst	em <u>H 2</u> Mechanic	al Cost \$ 6800
Blanton's Heating + A/C	910-822-	2866
Mechanical Contractor's Company Name	Telephone Telephone	1/4 5 4 5 5
1769 Pamake Drive Fay	etherille NC 28301	H3.20688
Address ///		License #
Chin State		
Signature of Officer(s) of Corporation	COLOR	
Plu	mbing Permit Information	
Description of Work	ZEW	1000
Number of Baths 2	Plumbing Cost \$	6900
Allen K. Callahan	910-476-2	565
Plumbing Contractor's Company Name	Telephone	
1551 Varborough Rd Pa	APKTON NC.	08910-81
Address	28371	License #
allent alfalan		
Signature of Officer(s) of Corporation		
Insulation Permit Inform	ation Residential (a) Other ()	Not Required ()
TRI CITY INSULATION	418 PERSON ST	910 486-8855
Insulation Contractor's Company Name & A		Telephone
	Page 1 of 3	10/00

pplication #	 	
is portion	 	

	must fill out this portion estem Information	
Sprinkler Contractor's Company Name	Contact & Telephone	_
Address	License #	_
Signature of Officer(s) of Corporation Fire Alarm St	ystem Information	
Fire Alarm Contractor's Company Name	Contact & Telephone	
Address	License #	
Signature of Officer(s) of Corporation <u>Driveway Access</u> - NC Department of Transp	portation Driveway Access/Permit? Yes	No
Homeowners Applying Please answer the following questions then see a Permit Tech	g to Build Their Own Home nician to determine if you qualify for permit under Owne	ers Exemption.
Questionnaire per G.S. 87-14 Regulations as to	o Issue of Building Permits (Memo available	upon request)
1. Do you own the land on which this building	ng will be constructed? yes	no
Have you hired or intend to hire an individual the project?	dual to superintend and manage con	
3. Do you intend to directly control & superv	rise construction activities? yes	no
4. Do you intend to schedule, contract, or d be done?	· · · · · · · · · · · · · · · · · · ·	ion work to no
5. Do you intend to personally occupy the b following completion of construction and do creates the presumption under law that you	you understand that if you do not do fraudulently secured the permit?	so, it
	yes	no
Sign & date		
I hereby certify that I have the authority to make negation and that the construction will conform to the regular Mechanical codes, and the Harnett County Zoning contractors is correct as known to me and if any chabuilding and trade plans, Environmental Health permiting responsibility to patify the Harnett County Central	lations in the Building, Electrical, Plumbing Ordinance. I state the information on the langes occur including listed contractors, site it changes or proposed use changes, I certi	g and above plan, fy it is

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 confi the work set fort	rm under penalties of perjury that the person(s), firm(s) or corporation(s) performing 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.
Department iss insurance prior to	the project for which this permit is sought it is understood that the Central Permitting uing the permit may require certificates of coverage of worker's compensation o issuance of the permit and at any time during the permitted work from any person, on carrying out the work.
Firm Name:	KOK ENTERPRISES
Sign/Title:	Day hole
Date: 1/1	8/09

Job Name 06 500 15943

Date: 1-19-07

Required Inspections for SFA/SFD

Appl. # 0650615943 Valuation # 154, 893 Sq. Feet 2384

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	<u> </u>	Two Trade Final > 2500
60	<u></u>	One Trade Final
60		One Trade Final > 2500
999		Envir. Operations Permit