Ap. # 06-50015974 2

## Harnett County Central Permitting PO Box 65 Lillington, NC 27546 Telephone Number 910-893-4759

Owner's Name: Keith Bullock Builders, TNC Date: 11-27-06					
Owner's Name: Keith Bullock Builder	3, INC	Date: Phone: <del>?/?</del>	187 - 111 00		
Address.	150 - 01 -11 -1	71 -4 10+	7		
Directions to job site: Hwy. Gol N tuen	1 management	on left			
onto sexterield or left on Bren			<del></del>		
Subdivision: <u>Dektaticla</u>		Lot: <u>34</u>			
Construction Type: (Please Check)	Building Use: (Please Ch	neck)			
New	Residential				
Renovation	Modular				
Addition	Commercial				
Moved House	Multi-Family				
Other	anily				
Description of Proposed Work: Single - Total Project Cost: 120,000					
Total Project Cost.					
	Permit Information				
Heated SF 1550 Crawl Space (4)	Building Construction Co		<del></del>		
Unheated SF310 Slab () Keith Bullock Buildos, INC.	Acres Disturbed	Stories _			
Keith Bullost Buildon INC.	Telephone	-4628			
Building Contractor's Company Name 72 Overlock Ct, Angier, NC 275		7504			
Address 1	License #				
Address					
Signature of Officer(s) of Corporation	-				
	m				
	Permit Information Electrical Cost \$				
Description of Work No ( ) Underground (4)	Overboard ( )				
Permanent Service: Underground (4) Overhe	ad ( ) Service Size:	200 A	mps		
Rex Dean Electrical	552-4	1252			
Flectrical Contractor's Company Name	Telephone	18			
3039 Kennehected. Frightow Spi	25 <u>17</u> License #	<u> </u>			
Address Dean by L. Billock	License #				
Signature of Officer(s) of Corporation	_				
· ·					
<u>Mechanica</u>	I Permit Information				
Description of Work	1/O Machar	nical Cost \$			
Number of Units Type System _	Wiechar (38)	- 2297			
Mechanical Contractor's Company Name	Telephone ,		<del></del>		
Po Box 398 Angier	HC	4469			
Address.	License #				
Ted your by Allerd	<del>_</del>				
Signature of Officer(s) of Corporation					
Plumbing Permit Information					
Description of Work	1 emit impimation				
Number of Baths	Plumbing Cost 9				
WEW HUMBING CO. INC.	638-0	0194	<del></del>		
Plumbing Contractor's Company Name	Telephone				
Po Box 1004 Angier		087			
Address	License #				
Lid welk to a Dellich					
Signature of Officer(s) of Corporation	N.				
Insulation Permit Information					
Residential ( Other ( ) Not Required ( )		7. G	2 0 -		
Insulating Inc.	1212 Home Ct. Ash		2-9500		
Insulation Contractor's Company Name	Address	Telephor	16		

## Sprinkler System Information npany Name Telephone

Sprinkler Contractor's Company Name	Telephone	
Contact Person		
Address	License #	
Signature of Officer(s) of Corporation Fire	Alarm System Information	\$
Fire Alarm Contractor's Company Name	Telephone	
Contact Person		
Address	License #	
Signature of Officer(s) of Corporation	Driveway Access	
NC Department of Transportation Drivew	ay Access/Permit? Yes _	No
I hereby certify that I have the authority correct and that the construction will Plumbing and Mechanical codes, and information on the above contractors is above contractors I certify it is my respond of any changes.	conform to the regulations in the Harnett County Zoning correct as known to me and if a harnett County to notify the Harnett County	n the Building, Electrical, Ordinance. I state the any changes occur in the
Signature of Owner/Contractor/Officer(s)	or Corporation Date	

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

The undersigned applic	ant for Building Permit # 06	5001 5974 Z being t	he:
Contra Owne Office		)wner	\(\frac{1}{1}\)
Do hereby confirm u performing the work se	nder penalties of perjury the total to the terminate to the termit to the permit:	nat the person(s),	firm(s) or corporation(s)
Has/r	nave three (3) or more employ ensation insurance to cover t	/ees and has/have of hem.	otained workers'
Has/r	nave one (1) or more subcont ensation insurance to cover t	ractors(s) and has/ha hem.	ave obtained workers'
Has/have one (1) or more subcontractors(s) who has/have their own policy workers' compensation insurance covering themselves.			
Has/h	nave not more than two (2) er	nployees and no sub	contractors.
Permitting Departmen compensation insurance from any person, firm of	project for which this permit issuing the permit may reprior to issuance of the permit corporation carrying out the	equire certificates of mit and at any time of work.	of coverage of worker's
Firm Name: 4c	the Bullock Suilders	Zuk	
By/Title: Juli	BULL "		
Date: 11-27	06		

D-9

KEITH BULLOCK 11-28-06:

## Required Inspections for SFA/SFD Appl # 66 50 0 / 5 9 7 Valuation \$ 136, 44

		Sq. Ft	200
Seq		<u>Seq</u>	
10	R*Bldg Footing	60	Two Trade Final > 2500
10-30	R*Elec Temp Service Pole	60	One Trade Final
20	R*Bldg Foundation	60	One Trade Final > 2500
20	Address Confirmation	999	Envir. Operations Permit
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		

Two Trade Final

60