

Each section 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 # 110021

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: John Campbell Builders Date: \_\_\_\_\_

Address: 757 McArthur Rd. Fayetteville, NC. Phone: 910-488-8914

Directions to job site from Lillington: Hwy 210 South, T/R on Overhills Rd, T/R on Ray Rd, T/R on Nursery Rd, T/L on Doc's Rd, 3/4 of mile T/L

Subdivision: Colonial Hills Lot: 50

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

Total Project Cost: 175,000 Description of Proposed Work: New Single Family Dwelling

**General Contractor Information**

Heated SF 1960 Crawl Space  Unheated SF 2800 Slab ( ) Building Construction Cost \$ 175,000 Acres Disturbed .3 Stories 1 1/2

Building Contractor's Company Name Robert W. Deere Telephone 910-237-5577

Address 779 Byrd's Pond Rd. Erwin, N.C. 28339-3480 License # 57046

Signature of Owner/Contractor/Officer(s) of Corporation - Must sign back of form & workers comp

**Electrical Permit Information**

Description of Work New Construction Electrical Cost \$ 5,800.00  
TS Pole: Yes  No ( ) Underground  Overhead ( )  
Permanent Service: Underground  Overhead ( ) Service Size: 200 Amps

Electrical Contractor's Company Name Tommy Mula Electric Telephone 910-6792

Address 34 Eagle Rd. Coats N.C. 27521 License # 23491-L

Signature of Officer(s) of Corporation On file

**Mechanical Permit Information**

Description of Work New Construction  
Number of Units 1 Type System Heat pump Mechanical Cost \$ 6,300

Mechanical Contractor's Company Name Ron Co. Heating & A/C Telephone 910-858-7300

Address P.O. Box 747 Puckett, N.C. 28371 License # 16556H-3

Signature of Officer(s) of Corporation On file

**Plumbing Permit Information**

Description of Work New Construction  
Number of Baths 2 Plumbing Cost \$ 5,700

Plumbing Contractor's Company Name Jamie Johnson Telephone 591-8111

Address 1490 Clark Rd Lillington, N.C. 27546 License # 21649

Signature of Officer(s) of Corporation On file

**Insulation Permit Information** Residential  Other ( ) Not Required ( )

Insulation Contractor's Company Name & Address Blow-n-Rite Insulation, Inc. 3737 Clinton Rd. 483-8191 Telephone

**Commercial Jobs must fill out this portion**  
**Sprinkler System Information**

Sprinkler Contractor's Company Name	Contact & Telephone
Address	License #
Signature of Officer(s) of Corporation	

**Fire Alarm System Information**

Fire Alarm Contractor's Company Name	Contact & Telephone
Address	License #
Signature of Officer(s) of Corporation	

**Driveway Access** - NC Department of Transportation Driveway Access/Permit?      Yes       No

**Homeowners Applying to Build Their Own Home**

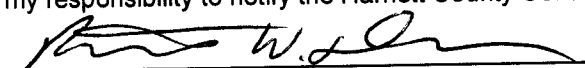
Please answer the following questions then see a Permit Technician to determine if you qualify for permit under Owners Exemption.

Questionnaire per G.S. 87-14 Regulations as to Issue of Building Permits (Memo available upon request)

1. 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?      \_\_\_ yes      \_\_\_ no
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

\_\_\_\_\_  
Sign & date

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

**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.

*disregard*  <sup>RWL</sup> 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: Robert W. Deese

Sign/Title: *[Signature]* General Contractor

Date: \_\_\_\_\_

\* Each section 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 # 15962, 16021, 16022, 16024

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: \_\_\_\_\_ Date: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Directions to job site from Lillington: \_\_\_\_\_  
Subdivision: \_\_\_\_\_ Lot: \_\_\_\_\_

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

Total Project Cost: \_\_\_\_\_ Description of Proposed Work: \_\_\_\_\_

**General Contractor Information**

Heated SF \_\_\_\_\_ Crawl Space ( ) Building Construction Cost \$ \_\_\_\_\_  
Unheated SF \_\_\_\_\_ Slab ( ) Acres Disturbed \_\_\_\_\_ Stories \_\_\_\_\_

John Campbell Builders  
Building Contractor's Company Name Telephone \_\_\_\_\_  
757 McArthur Rd. Fayetteville N.C.  
Address License # \_\_\_\_\_

[Signature]  
Signature of Owner/Contractor/Officer(s) of Corporation - Must sign back of form & workers comp

**Electrical Permit Information**

Description of Work \_\_\_\_\_ Electrical Cost \$ \_\_\_\_\_  
TS Pole: Yes ( ) No ( ) Underground ( ) Overhead ( )  
Permanent Service: Underground ( ) Overhead ( ) Service Size: \_\_\_\_\_ Amps

Tommy Maide Electric  
Electrical Contractor's Company Name Telephone \_\_\_\_\_  
Address License # \_\_\_\_\_

Thomas J. Maide  
Signature of Officer(s) of Corporation

**Mechanical Permit Information**

Description of Work \_\_\_\_\_  
Number of Units \_\_\_\_\_ Type System \_\_\_\_\_ Mechanical Cost \$ \_\_\_\_\_

Ron Co. Heating + Air  
Mechanical Contractor's Company Name Telephone \_\_\_\_\_  
Address License # \_\_\_\_\_

[Signature]  
Signature of Officer(s) of Corporation

**Plumbing Permit Information**

Description of Work \_\_\_\_\_ Plumbing Cost \$ \_\_\_\_\_  
Number of Baths \_\_\_\_\_

Jamie Johnson  
Plumbing Contractor's Company Name Telephone \_\_\_\_\_  
Address License # \_\_\_\_\_

Jamie Johnson  
Signature of Officer(s) of Corporation

**Insulation Permit Information** Residential ( ) Other ( ) Not Required ( )

Blown-Rite Insulation  
Insulation Contractor's Company Name & Address Telephone \_\_\_\_\_

See attached

Application # 15962, 16021  
16022, 16024

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

Certification of Work Performed  
By Owner/Contractor

Owner (s) of Structure: \_\_\_\_\_

Owner (s) Telephone: \_\_\_\_\_

Owner (s) Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Construction or Site Address: \_\_\_\_\_  
\_\_\_\_\_

Directions to Job: \_\_\_\_\_  
\_\_\_\_\_

Subdivision: \_\_\_\_\_ Lot #: \_\_\_\_\_

I JAMIE Johnson have provided or will provide the  
Plumbing labor on this structure. I am the owner or hold a  
NC state Plumbing license, which entitles me to perform such work on  
the above structure legally. All work shall comply with the State Building Code and all  
other applicable State & local laws, ordinances and regulations.

Owner (s) signature: \_\_\_\_\_ Date: \_\_\_\_\_

Contractor's signature: Jamie Johnson Date: \_\_\_\_\_

Contractor's Name: JAMIE Johnson Date: \_\_\_\_\_

Address: 7591 old US 421

Lillington, N.C. 27544

County: HARNETT

Contractor's License: 21649

Plan Box Number AA 11

Job Name ROBERT DEESE

Date: 2-19-06

Required Inspections for SFA/SFD

Appl. # 06 50016021

Valuation \$ 142,743

Sq. Feet 2197

Sequence

10	<input checked="" type="checkbox"/>	R* Bldg. Footing
10-30	<input checked="" type="checkbox"/>	R* Elec. Temp Service Pole
20	<input checked="" type="checkbox"/>	R* Building Foundation
20	<input checked="" type="checkbox"/>	Address Confirmation
30-999	<input checked="" type="checkbox"/>	Open Floor
30-999	<input type="checkbox"/>	R* Bldg. Slab Insp.
30-999	<input type="checkbox"/>	R* Elec. Under Slab
30-999	<input type="checkbox"/>	R*Plumb. Under Slab
40	<input checked="" type="checkbox"/>	Four Trade Rough In
40	<input type="checkbox"/>	Four Trade Rough In > 2500
40	<input type="checkbox"/>	Three Trade Rough In
40	<input type="checkbox"/>	Three Trade Rough In > 2500
40	<input type="checkbox"/>	Two Trade Rough In
40	<input type="checkbox"/>	Two Trade Rough In > 2500
40	<input type="checkbox"/>	One Trade Rough In
40	<input type="checkbox"/>	One Trade Rough In > 2500
50	<input checked="" type="checkbox"/>	R* Insulation
60	<input type="checkbox"/>	Four Trade Final
60	<input type="checkbox"/>	Four Trade Final > 2500
60	<input type="checkbox"/>	Three Trade Final
60	<input type="checkbox"/>	Three Trade Final > 2500
60	<input type="checkbox"/>	Two Trade Final
60	<input type="checkbox"/>	Two Trade Final > 2500
60	<input type="checkbox"/>	One Trade Final
60	<input type="checkbox"/>	One Trade Final > 2500
999	<input checked="" type="checkbox"/>	Envir. Operations Permit