* 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 #_

Harnett County Central Permitting PO Box 65 Lillington, NC 27546 Telephone Number 910-893-7525 www.harnett.org

Application	or Banania and Trace	2/0/07
Owner's Name: LBC Homes, INC.		Date: 3/9/07
Owner's Name: <u>KBC Homes</u> , INC. Address: <u>SSII Ramsey Street</u> , Suite 100	FAY, NC 28311	Phone: 910 423 3555
Directions to job site from Lillington:		
Directions to job site from Limitgren		
Subdivision: Colonial Hills		_Lot: _55
Subdivision: LAIDN: AT HITE	Building Use: (Please	Check
Construction Type: (Please Check)	X Residential	Commercial
	Modular	Multi-Family
Total Project Cost:Description o	f Proposed Work: al Contractor Informatio	n
General Space ()	Building Construction	Cost \$
Heated SF 1752 Crawl Space () Unheated SF 548 Slab ()	Acres Disturbed	Stories
PBC Homes INC. Building Contractor's Company Name	1 910 42	3-3555
Building Contractor's Company Name	Telephone	
5511 Ransey Street Site 100 P	Ay NC 283/1	23,000,0
Address / / /		License #
Signature of Owner/Contractor Officer(s) of C	orporation — Must sign back	of form & workers comp
Signature of Owner/Contractor/Officer(s) of C Elect Description of Work TS Pole: Yes (M. No () Underground ()	trical Permit Information	<u>1</u>
TS Pole: Yes (No () Underground ()	Electrical Co	St \$
- Louis Lindorground () Over	rhead () Service Size:	Amps
S. Pida, Flat Tus	910 3	73-7458
Sanoy Ridge ELect, INC Electrical Contractor's Company Name	Telephone	
454 Whitehead ROAD FAY	1, NC 28312	10006 U License #
Address		License #
auf KHorn		
Signature of Officer(s) of Corporation		
Mecn	anical Permit Information	<u>on</u>
Description of Work Type Syste	m Med	chanical Cost \$
_	910 8	58-7300
Mechanical Contractor's Company Name	Telephone	
P.O. Box 747 PARKTON,		16556
Address /		License #
Address		
Signature of Officer(s) of Corporation		
Plur	<u>nbing Permit Informatio</u>	<u>on</u>
Description of Work	Plumbing C	net \$
Number of Baths		137-7996
Bass Plumsing Plumbing Contractor's Company Name	Telephone	131 1110
Plumbing Contractor's Company Name	NC 28311	22895
841 LARKSPUR Drive FAY	1 100 0011	License #
Address		
Morphus (A) of Corporation		
Signature of Officer(s) of Corporation Insulation Permit Information	ation Residential () Ot	her () Not Required ()
	Home C+ Ral, NC 27	
Insulation Contractor's Company Name & A	Address	Telephone
madiation contractor o company trains		

Sprinkler System Information - Commercial			
Sprinkler Contractor's Company Name			
Contact Person License #			
Address			
Signature of Officer(s) of Corporation Fire Alarm System Information - Commercial			
Fire Alarm Contractor's Company Name			
Contact Person			
Address #			
Signature of Officer(s) of Corpolation 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,			
contractors is correct as known to me and if <u>any</u> changes occur including listed contractors, contractors is correct as known to me and if <u>any</u> changes or proposed use changes, I certify it is building and trade plans. Environmental Health permit changes or proposed use changes, I certify it is building and trade plans. Environmental Health permit changes or proposed use changes, I certify it is building and trade plans. Environmental Health permit changes or proposed use changes, I certify it is building and trade plans. Environmental Health permit changes or proposed use changes, I certify it is building and trade plans. Environmental Health permit changes or proposed use changes, I certify it is building and trade plans.			
3/1/01			
Signature of Owner/Contractor/Officer(s) of Corporation Date			

Application # 06500 16027

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 confir the work set forth	rm under penalties of perjury that the person(s), firm(s h in the permit:) or corporation(s) performing
	Has/have three (3) or more employees and has/have o compensation insurance to cover them.	btained workers'
	Has/have one (1) or more subcontractors(s) and has/haccompensation insurance to cover them.	ave obtained workers'
	Has/have one (1) or more subcontractors(s) who has/h workers' compensation insurance covering themselves	ave their own policy of
	Has/have not more than two (2) employees and no sub	ocontractors.
Department issuinsurance prior t	n the project for which this permit is sought it is understouing the permit may require certificates of coverage to issuance of the permit and at any time during the permit carrying out the work.	ge of worker's compensation
Firm Name:	RBC Hange INC	
Sign/Title:	M President	
Date:	3/9/07 0	

Plan Box Number +- 4

Job Name R. D. C. Homas

Date: 3-12-07

Required Inspections for SFA/SFD

Appl. # 06 500 160 27 Valuation \$149,435 Sq. Feet 2300

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
)))	Divin. Operations 1 climit