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

	Building and Trade Permit		
	Date: (131101		
Address: 3455 Johnston ()	n. RD Phone: (339-2826		
Directions to job site: Fm. Willington	HWY 210 10WARD HOWSER, IST		
on 55, LEFT on malver 5	APPROX 6 Mi LOT ON RIGHT		
Subdivision: BRIVATE LOT	Lot:		
	Building Use: (Please Check)		
Construction Type: (Please Check)	∑ Residential		
✓ New Renovation	Modular		
Addition	Commercial		
Moved House	Multi-Family		
Other	0		
Description of Proposed Work: NEW. R	ESIDENTIAL CONST.		
Total Project Cost:			
	December 14 to form and a m		
Building	Permit Information Building Construction Cost \$ 600.00		
Heated SF 1/13 Crawl Space (1)	Acres Disturbed Stories		
Unheated SFSlab () EVANS FINE HOMES INC	<u> </u>		
Building Contractor's Company Name F.U.			
201 MIST 7 WOOD DR. 275	26 50565		
Address	License #		
Lan Lallens	_		
Signature of Officer(s) of Corporation			
Description of Work ALL ELE Electrical	Permit Information Electrical Cost \$ 3500.00		
Description of Work HCC CCC	Electrical Cost \$ 3300,00		
TS Pole: Yes No () Underground ()	ead () Service Size: 200 Amps		
Permanent Service: Underground Overher			
Electrical Contractor's Company Name	Telephone		
769 PENNY RD ANGIER NC			
Address \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	License #		
Deith Jonatha	_		
Signature of Officer(s) of Corporation			
## calcantan			
	I Permit Information VAC ALL HVAC		
Description of Work Number of Units Type System	He Mechanical Cost \$3500.00		
JERNIGANS HUAC	897-5217		
Mechanical Contractor's Company Name	Telephone		
Angler nc	19342		
Address ()	License #		
Coften Janja	_		
Signature of Officer(s) of Corporation			
Pleases In Inc.			
A	Permit Information PLU PLUMBING		
Description of Work Number of Baths	Plumbing Cost \$ 1200,00		
W.W. Plum Bing Inc	639-0195		
Plumbing Contractor's Company Name	Telephone		
ANGIER NC	14087		
Address 1 \ \ \ \ \	License #		
Tick Wells			
Signature of Officer(s) of Corporation			
le aviette - Permit Information			
Residential Other () Not Required ()			
residential (7) Other () Not required ()	Ayetteville nc 1-800,408,1012		
TRI - CITY INDULATION To Inculation Contractor's Company Name	Address		

Sprinkier System Information

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 Drivews	ay Access/Permit? Yes No
correct and that the construction will of Plumbing and Mechanical codes, and information on the above contractors is including listed contractors, site plan, be	to make necessary application, that the application is conform to the regulations in the Building, Electrical, the Harnett County Zoning Ordinance. I state the correct as known to me and if any changes occur uilding and trade plans, Environmental Health permit riffy it is my responsibility to notify the Harnett County changes.
Jan 2 Ldin	1/31/07
Signature of Owner/Contractor/Officer(s) of	of Corporation Date

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

The undersig	ned applicant for Building Permit #	being the:	
X_	Contractor Owner		
	Officer/Agent of the Contractor or Owner		
	confirm under penalties of perjury that the work set forth in the permit:	e person(s), firm(s) or corporation(
	Has/have three (3) or more employees a compensation insurance to cover them.	nd has/have obtained workers'	
	Has/have one (1) or more subcontractors compensation insurance to cover them.	s(s) and has/have obtained workers'	
X	Has/have one (1) or more subcontractors(s) who has/have their own policy workers' compensation insurance covering themselves.		
	Has/have not more than two (2) employed	es and no subcontractors.	
Permitting Decompensation	g on the project for which this permit is so epartment issuing the permit may require a insurance prior to issuance of the permit and on, firm or corporation carrying out the work.	certificates of coverage of worker'	
Firm Name:	EVANS Fine Homes in	ıc	
By/Title:	Day & Idian Pres		
Date:	(31/07)		

Plan Box Number <u>E - Z</u>

Job Name MITCHELL COAKS

Date: 1-9-07

Required Inspections for SFA/SFD

Appl. # 66500 16070 Valuation 72,964 Sq. Feet 1123

Sequence

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