

\*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 # 16093

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: Cumberland Homes Date: 10/31/06  
Address: PO Box 727 Psum NC 28335 Phone: 812-4345  
Directions to job site from Lillington: 27 W / (TL) on Appleton Way

Subdivision: Laurel Valley Lot: 10

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: \_\_\_\_\_

Heated SF 2226 Crawl Space  **General Contractor Information**  
Unheated SF 480 Slab  Building Construction Cost \$ 95,200  
Cumberland Homes Acres Disturbed \_\_\_\_\_ Stories 2

Building Contractor's Company Name Cumberland Homes Telephone 892-4345  
Address PO Box 727 Psum NC 28335 License # 59493

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

Description of Work New Electrical Permit Information Electrical Cost \$ \_\_\_\_\_

TS Pole: Yes  No  Underground  Overhead   
Permanent Service: Underground  Overhead  Service Size: 200 Amps

Wester & Pace Telephone 919-499-5389  
Electrical Contractor's Company Name  
Address 546 Leslie Dr. Sanford, NC License # 1200-76

Signature of Officer(s) of Corporation William Wester

Description of Work New Mechanical Permit Information Mechanical Cost \$ \_\_\_\_\_

Number of Units 2 Type System Heat Pump

Jacksons Heating + Air Telephone 910-891-5410  
Mechanical Contractor's Company Name  
Address PO Box 82 Benson, NC License # 23670

Signature of Officer(s) of Corporation David Jackson

Description of Work New Plumbing Permit Information Plumbing Cost \$ \_\_\_\_\_

Number of Baths 2 1/2

Glover Contract Plumbing Telephone 910-892-1612  
Plumbing Contractor's Company Name  
Address PO Box 726 Coats, NC License # 23160

Signature of Officer(s) of Corporation [Signature]

TRI CITY Insulation Residential  Other  Not Required   
Insulation Contractor's Company Name & Address 418 Person St. Fay, NC Telephone 910-486-8855

**Sprinkler System Information - Commercial**

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

**Fire Alarm System Information - Commercial**

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

**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, 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    10/31/06

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

The undersigned applicant for Building Permit # \_\_\_\_\_ being the:

- \_\_\_\_\_ 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.
- \_\_\_\_\_ 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: Cumberland Homes  
By/Title: Harry Morris  
Date: 10/31/06

AA-1

(11-1-06) CUMBERLAND  
HINES

Required Inspections for SFA/SFD

Appl # 06 500 160 93  
Valuation \$175,813  
Sq. Ft 2706

<u>Seq</u>		<u>Seq</u>	
10	<input checked="" type="checkbox"/> R*Bldg Footing	60	<input type="checkbox"/> Two Trade Final > 2500
10-30	<input checked="" type="checkbox"/> R*Elec Temp Service Pole	60	<input type="checkbox"/> One Trade Final
20	<input type="checkbox"/> R*Bldg Foundation	60	<input type="checkbox"/> One Trade Final > 2500
20	<input type="checkbox"/> Address Confirmation	999	<input checked="" type="checkbox"/> Envir. Operations Permit
30-999	<input type="checkbox"/> R*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		
30-999	<input type="checkbox"/> R*Bldg Water/Damp Proofing		
40	<input type="checkbox"/> Four Trade Rough In		
40	<input checked="" 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 Inspection		
60	<input type="checkbox"/> Four Trade Final		
60	<input checked="" 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		