* 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 # 06-5006239

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546

Telephone Number 910-893-7525 www.harnett.org

Application for Building and Trade Permit

regency Homes inc.	Date: 12-4-6
Address: 6506 Dental Lane Fayetteville, N	NC 28314 Phone: 910-424-0455
Directions to job site from Lillington: Hwy 27,	(L) Hwy 24, (R) Cameron Hill Rd. (R) Vorkshire
Dr, (L) Checkmate Ct	Try servers that the try to the try
Subdivision: Yorkshire Plantation	Lot: \5/
Construction Type: (Please Check)	Building Use: (Please Check) ✓ Residential Commercial Modular Multi-Family
Total Project Cost:Description of Pr	
Heated SF 2332 Crawl Space () Unheated SF 573 Slab ()</td <td>Building Construction Cost \$ Acres Disturbed Stories 2</td>	Building Construction Cost \$ Acres Disturbed Stories 2
Regency Homes Inc. Building Contractor's Company Name	910-424-0455 Telephone
Address 6506 Dental Lane Favetteville, NC 28314	License #
Signature of Owner/Contractor/Orticer(s) of Corporation	n – Must sign back of form & workers comp
Description of Work Electric TS Pole: Yes (✓) No () Underground (✓) Overhea Lonnie Smith Elec.	d () Service Size: <u>200</u> Amps
Electrical Contractor's Company Name	Telephone
Address Address	Telephone
Address Signature of Officer(s) of Corporation Machanica	Telephone 25606-L
Address Signature of Officer(s) of Corporation Machanica Description of Work HVAC	Telephone 391 25606-L License #
Address Signature of Officer(s) of Corporation Description of Work Number of Units Description of Units Type System E	Telephone 391
Address Signature of Officer(s) of Corporation Machanica Description of Work HVAC	Telephone 391 25606-L License #
Address Signature of Officer(s) of Corporation Description of Work HVAC Number of Units 2 Type System E McGowan Heating & Air, Inc. Mechanical Contractor's Company Name 1722 Gillespie St Fayetteville, NC 28306	Telephone 391 25606-L License # al Permit Information Electric Mechanical Cost \$
Address Signature of Officer(s) of Corporation Description of Work HVAC Number of Units 2 Type System E McGowan Heating & Air, Inc. Mechanical Contractor's Company Name 1722 Gillespie St Fayetteville, NC 28306 Address Address Signature of Officer(s) of Corporation	Telephone 391 25606-L License # al Permit Information Electric Mechanical Cost \$
Address Signature of Officer(s) of Corporation Description of Work HVAC Number of Units 2 Type System E McGowan Heating & Air, Inc. Mechanical Contractor's Company Name 1722 Gillespie St Fayetteville, NC 28306 Address Address Signature of Officer(s) of Corporation Plumbing Description of Work Plumbing	Telephone 391 25606-L License # al Permit Information Electric Mechanical Cost \$
Address Signature of Officer(s) of Corporation Description of Work HVAC Number of Units 2 Type System E McGowan Heating & Air, Inc. Mechanical Contractor's Company Name 1722 Gillespie St Fayetteville, NC 28306 Address Signature of Officer(s) of Corporation Plumbing	Telephone 391 25606-L License # al Permit Information Electric Mechanical Cost \$
Address Signature of Officer(s) of Corporation Description of Work HVAC Number of Units 2 Type System E McGowan Heating & Air, Inc. Mechanical Contractor's Company Name 1722 Gillespie St Fayetteville, NC 28306 Address Address Signature of Officer(s) of Corporation Plumbing Description of Work Plumbing	Telephone 391 25606-L License # al Permit Information Electric Mechanical Cost \$
Address Signature of Officer(s) of Corporation Description of Work HVAC Number of Units 2 Type System E McGowan Heating & Air, Inc. Mechanical Contractor's Company Name 1722 Gillespie St Fayetteville, NC 28306 Address Signature of Officer(s) of Corporation Plumbing Description of Work Plumbing Number of Baths Bill Hallock Plumbing Plumbing Contractor's Company Name 24218 NC Hwy 71N Parkton, NC	Telephone 391 25606-L License # al Permit Information Electric Mechanical Cost \$
Address Signature of Officer(s) of Corporation Description of Work HVAC Number of Units 2 Type System E McGowan Heating & Air, Inc. Mechanical Contractor's Company Name 1722 Gillespie St Fayetteville, NC 28306 Address Signature of Officer(s) of Corporation Plumbing Description of Work Plumbing Number of Baths Bill Hallock Plumbing Plumbing Contractor's Company Name	Telephone 391 25606-L License # al Permit Information Electric Mechanical Cost \$
Address Signature of Officer(s) of Corporation Description of Work HVAC Number of Units 2 Type System E McGowan Heating & Air, Inc. Mechanical Contractor's Company Name 1722 Gillespie St Fayetteville, NC 28306 Address Signature of Officer(s) of Corporation Plumbing Description of Work Plumbing Number of Baths Bill Hallock Plumbing Plumbing Contractor's Company Name 24218 NC Hwy 71N Parkton, NC Address Signature of Officer(s) of Corporation	Telephone 391 25606-L License # ai Permit Information Electric Mechanical Cost \$

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

Application for Build	Ing and Trade Permit Date:
Owner's Name: Researcy Romes Toc.	
Address: (50) Mental Lange Facellaui Directions to job sites 100 Huy 27 W Hug 24	(B) Croseron Hill RA (B) Yarkshire Dr.
Directions to job site way 2/ 4 Alas 1	
11) 01 1 11.	Lot: 156
Subdivision: Yackshine Plantatio	ding Use: (Please Check)
CONTRACTOR TYPE	Residential
7 (AEM	Modular
Addition	Commercial
Moved House	Multi-Family
Other	
Description of Proposed Work: Actidence	
Total Project Cost:	
Building Per	mit Information
Treated of State Orden Opado 47	ilding Construction Cost \$ res Disturbed3Stories2
Officated of 473 of as ()	910- 424-0485
Building Contractor's Company Name	Telephone
2500 Deptal Lane Frathwill NC	32067-4
Address	License #
Street and Office of Collection	
Signature of Officer(s) of Comporation	
Electrical Pe	mit information
Description of Work F. leetais	Electrical Cost \$
TS Pole: Yes () No () Underground () Oremanent Service: Underground () Overhead	() Service Size: 200 Amps
Permanent Service: Underground () Overhead	1910) 974-6638
Electrical Contractor's Company Name	Telephone
1063 Corl Freemon Rd	License #
Address	Fice ise #
Signature of Officer(s) of Corporation	
-	f
	ermit Information
Description of Work Number of Units Type System E	Mechanical Cost \$
Mint steam it	
Mechanical Contractor's Company Name	Telephone 23 (08
409 Sutton 10	License #
Address Means	
Signature of Officer(s) of Corporation	
	Permit Information
Description of Work Planhing	
Number of Baths	Plumbing Cost \$
Hallock District	~5 Tolephone
Plumbing Contractor's Company Name	Velephone 24037
Address	License #
Signature of Officer(s) of Corporation	
insulation	Permit Information
Residential &) Other () Not Required ()	
Insulation Contractor's Company Name	4/8 from 5+ type with NC 910-486-8855 Telephone
Including Chairmators Company NAME	Lifted Ange

Page 1 of 3

2/04

Sprinkler System Information

Sprinkler Contractor's Company Name	Telephone
Contact Person	
Address	License #
Signature of Officer(s) of Corporation	n System Information
riie Alaili	1 System information
Fire Alarm Contractor's Company Name	Telephone
Contact Person	
Address	License #
Signature of Officer(s) of Corporation	
	veway Access
NC Department of Transportation Driveway Acc	cess/Permit? Yes No
correct and that the construction will conformation and Mechanical codes, and the hinformation on the above contractors is correctionally listed contractors, site plan, building	ake necessary application, that the application is m to the regulations in the Building, Electrical, Harnett County Zoning Ordinance. I state the ect as known to me and if any changes occur g and trade plans, Environmental Health permit is my responsibility to notify the Harnett County les.
Signature of Owner/Contractor/Officer(s) of Cor	poration Date

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

The undersigne	d applicant for Building Permit # being the:
	_ Contractor _ Owner _ Officer/Agent of the Contractor or Owner
Do hereby corperforming the	nfirm under penalties of perjury that the person(s), firm(s) or corporation(s) 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.
compensation in	on the project for which this permit is sought it is understood that the Central artment issuing the permit may require certificates of coverage of worker's assurance prior to issuance of the permit and at any time during the permitted work firm or corporation carrying out the work.
Firm Name:	egency Homes Inc.
By/Title: Jim	Prozylowski Odner
Date:	
(

Two Trade Final > 2500

One Trade Final > 2500

Envir. Operations Permit

One Trade Final

500/6239

Appl # Required Inspections for SFA/SFD Valuation Sq. Ft Seq Seq R*Bldg Footing 60 10 R*Elec Temp Service Pole 60 10-30 R*Bldg Foundation 60 20 Address Confirmation 999 20 30-999 R*Open Floor R*Bldg Slab Insp 30-999 R*Elec Under Slab 30-999 30-999 R*Plumb under Slab R*Bldg Water/Damp Proofing 30-999 40 Four Trade Rough In Four Trade Rough In > 2500 40 Three Trade Rough In 40 Three Trade Rough In > 2500 40 40 Two Trade Rough In Two Trade Rough In > 2500 40 40 One Trade Rough In One Trade Rough In > 2500 40 R*Insulation Inspection 50 60 Four Trade Final Four Trade Final > 2500 60 Three Trade Final 60 60 Three Trade Final > 2500

Two Trade Final

60