(FHX)9195549134 , эммг јатовек пояй) зекой — мишеме имовинском 0650016375 Application #\_ " Each section below to be filled out by whomever performing work. Must be own at licensed contractor. Address, company Hernett County Central Permitting PCI Sou 63 Lillington, NC 27646 Telephone Number 910-892-7525 www.hamett.org name & phone must meter information on Icense Application for Building and Trade Permit Dall Col 919-833-55-26 Directions to job site from Lillington: Loods Kelled Louds Lot: Subdivision: Construction Type: (Please Check) ikiling Use: (Please Check) Commercial Mayed House Residential Modular Multi-Partity Addition Other Renovation Total Project Cost: \$200,000 Description of Proposed Work: General Contractor Information
Building Construction Cost \$\_ 180,000 Heated SF 2400 Crawl Space ( Stones\_ Unheated SF (109 Slab () Acres Disturbed 915 -537-5526 63 **Building Contractor's Company Name** Telephone Signature of Oyther/Contractor/Officer(s) of Corporation -- Must sign back of form & workers comp Electrical Permit Information

Electrical Cost \$ Description of Work Garbicas TS Pole: Yos (\*) No ( ) Underground ( ) Overfread ( ) Overheard () 200 Amps Service Size: CHOICE ELECTRICAL SERVICE Electrical Contractor's Company Name Circle 12 Brooknee Unger Address Sighature of Officer(s) of Corporation Mechanical Permit Information Description of Work Machanical Cost \$ Type System Number of Units 910 1897-5317 Mechanical Contractor License # Address Signature of Office Flumbiao Permit Information Description of Work Plumbing Cost \$ Number of Baths (96)893-3050 - Plumbine Contractor's Company Name Plumbing Mamers Address

nature of Officer(s) of Corporation

Insulation Permit Information Residential M. Other () Not Required () 919 554-9 004 Alpro Insulation Company Name & Address Tampville 18 2754 6 8/06

Page 1 of 3


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

The undersigned	d applicant for Building Permit # 06 500 16375 being the
	General Contractor Owner Officer/Agent of the Contractor or Owner
Do hereby conf the work set fort	irm under penalties of perjury that the person(s), firm(s) or corporation(s) performing
***************************************	Has/have three (3) or more employees and has/have obtained workers' compensation insurance to cover them.
<del>\</del>	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.
Department issinsurance prior	on the project for which this permit is sought it is understood that the Central Permitting suing the permit may require certificates of coverage of worker's compensation to issuance of the permit and at any time during the permitted work from any personion carrying out the work.
Firm Name	Oak City Hones
Sign/Title:	Line
Date: 1/10/	07'

	Application #
Sprinkler System	n Information - Commercial
Sprinkler Contractor's Company Name	Telephone
Contact Person	
Address	License #
Signature of Officer(s) of Corporation Fire Alarm Syste	m Information - Commercial
Fire Alarm Contractor's Company Name	Telephone
Contact Person	
Address	License #
Signature of Officer(s) of Corporation	iveway Access
NC Department of Transportation Driveway Acce	
and that the construction will conform to the I Mechanical codes, and the Harnett County Zon contractors is correct as known to me and if any	e necessary application, that the application is correct regulations in the Building, Electrical, Plumbing and ing Ordinance. I state the information on the above changes occur including listed contractors, site plan, permit changes or proposed use changes. I certify it is intral Permitting Department of any and all changes.
NOW MENAZA Signature of Owner/Contractor/Officer(s) of Corp	poration Date

o hy

Plan Box Number A-8

Job Name OAK CITY

Date: 1 - 9 - 07

Required Inspections for SFA/SFD

Appl. # <u>06 560</u> 16375 Valuation <u># 206,0</u>26 Sq. Feet <u>3 71</u>

## Sequence

10	R* Bldg. Footing
10	R* Elec. Temp Service Pole
10-30	
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