

0650016437

Application for Building and Trade Permit

Owner's Name: CHRISTOPHER W. WEINER T/A CWW CONTRACTORS Date: 1/16/07
Address: 172 WINDMERE DR. ANGLER, N.C. 27501 Phone: 919-796-9286
Directions to job site: _____

Subdivision: PEAR MEADOW Lot: 7
Construction Type: (Please Check) Building Use: (Please Check)
 New Residential
 Renovation Modular
 Addition Commercial
 Moved House Multi-Family
 Other
Description of Proposed Work: CONSTRUCT NEW SFD
Total Project Cost: 150,000

Building Permit Information

Heated SF 1897 Crawl Space Building Construction Cost \$ 125,000
Unheated SF 501 Slab Acres Disturbed .34 Stories _____
CWW CONTRACTORS Telephone 919-796-9286
Building Contractor's Company Name Address 172 WINDMERE DR. ANGLER NC License # 56674
Signature of Officer(s) of Corporation Chris W. Weiner

Electrical Permit Information

Description of Work _____ Electrical Cost \$ 4500
TS Pole: Yes No Underground Overhead
Permanent Service: Underground Overhead Service Size: 200 Amps
MABRY'S ELECTRICAL SERVICE Telephone 919-639-4837
Electrical Contractor's Company Name Address 731 MABRY RD. ANGLER, N.C. 27501 License # 15077-U
Signature of Officer(s) of Corporation Johnny J. Mabry

Mechanical Permit Information

Description of Work _____
Number of Units _____ Type System _____ Mechanical Cost \$ 6000
M&H Heating & A/C Inc Telephone 919-552-9223
Mechanical Contractor's Company Name Address 126 S. Fuquay Ave Fuquay Varina NC License # 5529223 4412 class I
Signature of Officer(s) of Corporation H.C. Allred Jr

Plumbing Permit Information

Description of Work _____
Number of Baths _____ Plumbing Cost \$ 4500
Tommy Allen Plg. Telephone 552-6902
Plumbing Contractor's Company Name Address 116 Kennebec Rd License # 9268
Signature of Officer(s) of Corporation Willow Springs NC 27192
Tommy E. Allen

Insulation Permit Information

Residential Other Not Required
TRI-CITY Telephone 910-486-8855
Insulation Contractor's Company Name Address 418 Person St. Fayetteville N.C.

**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 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: CWW CONTRACTORS

Sign/Title: Charles W. Weaver / OWNER

Date: 1/16/07

Plan Box Number A-4

Job Name CWW CONTRACTORS

Date: 1-16-07

Required Inspections for SFA/SFD

Appl. # 0650016437

Valuation 152,879

Sq. Feet 2353

Sequence

10	<u>✓</u>	R* Bldg. Footing
10-30	<u>✓</u>	R* Elec. Temp Service Pole
20	<u>✓</u>	R* Building Foundation
20	<u>✓</u>	Address Confirmation
30-999	<u>✓</u>	Open Floor
30-999		R* Bldg. Slab Insp.
30-999		R* Elec. Under Slab
30-999		R*Plumb. Under Slab
40	<u>✓</u>	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	<u>✓</u>	R* Insulation
60	<u>✓</u>	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	<u>✓</u>	Envir. Operations Permit