

F3

Application # 06 500 16460

* 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.

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: Custom Contracting Corp Date: 4-16-07
Address: 1504 S. Horner Blvd, Sanford NC 27330 Phone: 919-775-1497
Directions to job site from Lillington: Main St to Hwy 87 to Ponderosa Rd - right into Carolina Season on Ponderosa Trail right on Hunters Ridge
Subdivision: Carolina Season Lot: V16

Construction Type: (Please Check) Building Use: (Please Check)
 New Moved House Residential Commercial
 Renovation Addition Other Modular Multi-Family

Total Project Cost: 182,000 Description of Proposed Work: New home

General Contractor Information

Heated SF 2100 Crawl Space () Building Construction Cost \$ 140,000 -
Unheated SF Slab () Acres Disturbed 1/2 Stories 2

Custom Contracting Corp Telephone 919-775-1497
Building Contractor's Company Name
1504 S. Horner Blvd Sfd NC 27330 License # 8664
Address

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

Electrical Permit Information

Description of Work _____ Electrical Cost \$ _____
TS Pole: Yes () No () Underground () Overhead ()
Permanent Service: Underground () Overhead () Service Size: _____ Amps

Electrical Contractor's Company Name _____ Telephone _____

Address _____ License # _____

Signature of Officer(s) of Corporation _____

Mechanical Permit Information

Description of Work _____
Number of Units _____ Type System _____ Mechanical Cost \$ _____

Mechanical Contractor's Company Name _____ Telephone _____

Address _____ License # _____

Signature of Officer(s) of Corporation _____

Plumbing Permit Information

Description of Work _____
Number of Baths _____ Plumbing Cost \$ _____

Plumbing Contractor's Company Name _____ Telephone _____

Address _____ License # _____

Signature of Officer(s) of Corporation _____

Insulation Permit Information Residential () Other () Not Required ()

Insulation Contractor's Company Name & Address _____ Telephone _____

See attached sheet

06-500 1646 D

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

Application for Building and Trade Permit

Owner's Name: Custom Contracting Corp. Date: _____
Address: 1504 S. HORNER Blvd. Sanford, NC 27330 Phone: 919-775-1497
Directions to job site: _____

Subdivision: _____ Lot: _____
Type Construction: (Please Check)
New Renovation Addition
Moved House Other Building Use: (Please Check)
Residential Modular
Commercial Multi-Family
Description of Proposed Work: _____
Total Project Cost: _____

Building Permit Information

Heated _____ Crawl Space
Unheated _____ Slab Building Construction Cost \$ _____
Custom Contracting Corp. Acres Disturbed _____ Stories _____
1504 So. HORNER Blvd, SANFORD
Building Contractor's Company Name Address
8664 (919) 775-1497
Signature of Officer(s) of Corporation License # Telephone

Electrical Permit Information

Description of Work New wiring Electrical Cost \$ _____
TS Pole: Yes No Underground Overhead
Permanent Service: Underground Overhead Service Size: _____ Amps
Billings Electric Co 36 John Rosser Rd Sanford NC 27333
Electrical Contractor's Company Name Address
Ron Phillips 3640-U 919-258-3115/919-770-0143
Signature of Officer (s) of Corporation License # Telephone

Insulation Permit Information

Residential Other Not Required
INSULATION INSTALLERS 119 First St. P.O. Box 333 Sanford
Insulation Contractor's Company Name Address
919-774-4335
Telephone

Mechanical Permit Information

Description of Work New HVAC Number of Units _____ Type System _____ Mechanical Cost \$ _____
WORTH PARKER A/C 1015 HAWKINS AVE, SANFORD
Mechanical Contractor's Company Name Address
Worth Parker 3813 (919) 776-4575
Signature of Officer(s) of Corporation License # Telephone

Plumbing Permit Information

Description of Work New plumbing Number of Baths _____ Plumbing Cost \$ _____
Reliable Plumbing 6316 Zion Church Rd., Sanford
Plumbing Contractor's Company Name Address
Sammy Thomas 7151 (919) 775-5782
Signature of Officer(s) of Corporation License # Telephone

Commercial Jobs must fill out this portion
Sprinkler System Information

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

Fire Alarm System Information

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

Driveway Access - NC Department of Transportation Driveway Access/Permit? Yes No

Homeowners Applying to Build Their Own Home

Please answer the following questions then see a Permit Technician to determine if you qualify for permit under Owners Exemption.

Questionnaire per G.S. 87-14 Regulations as to Issue of Building Permits (Memo available upon request)

1. Do you own the land on which this building will be constructed? ___ yes ___ no
2. Have you hired or intend to hire an individual to superintend and manage construction of the project? ___ yes ___ no
3. Do you intend to directly control & supervise construction activities? ___ yes ___ no
4. Do you intend to schedule, contract, or directly pay for all phases of construction work to be done? ___ yes ___ no
5. Do you intend to personally occupy the building for at least 12 consecutive months following completion of construction and do you understand that if you do not do so, it creates the presumption under law that you fraudulently secured the permit? ___ yes ___ no

Sign & date

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.

Mark Spivey
Signature of Owner/Contractor/Officer(s) of Corporation

4/16/07
Date

**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: Custom Contracting Corp.

Sign/Title: [Signature]

Date: 4/16/07

Plan Box Number F-3

Job Name CUSTOM CONTR.

Date: 4-18-07

Required Inspections for SFA/SFD

Appl. # 0650016460
Valuation # 159,116
Sq. Feet 2449

Sequence

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