

164970

* 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 #

Hamett County Central Permitting
PO Box 85 Lillington, NC 27548
Telephone Number 910-883-7525 www.hamett.org
Application for Building and Trade Permit

Owner's Name: Israel Lucas Contruction Inc. Date: 2-22-07
Address: 4437 Fox Run Rd Sanford Phone: 919-770-0902
Directions to job site from Lillington: 84/27 to Tingin Rd left to Tingin Place Sub div.
Subdivision: Tingin Place Lot: 900101

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: _____

General Contractor Information

Heated SF _____ Crawl Space () _____ Building Construction Cost \$ _____
Unheated SF _____ Slab () _____ Acres Disturbed _____ Stories _____

Building Contractor's Company Name _____ Telephone _____

Address _____ License # _____

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

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 All New Install to include duct work with 9000 BTU mini split
Number of Units 2 Type System 3ton 13Seer Mechanical Cost \$ 5985.00

Total Systems Heating & Cooling, Inc 910-436-3450
Mechanical Contractor's Company Name Telephone

13341 Hwy 210 South Sp Lk 28846
Address License #

Plumbing Permit Information

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

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 _____

5/8/07
Chang Center

4-18-07

I EDWARD ERTLE OF AFFORDABLE Htg & AIR COND. (Lic # 00046)
DID NOT PERFORM WORK AT SAID PROPERTIES FOR LUCAS CONSTRUCTION
AT, KNOLLWOOD

91 SANDY TINGEN CT.

121 SANDY TINGEN CT.

Edward W. Ertle

rev.
by James B. Buck

Each section below to be filled out by whoever performing work. Must be owner or licensed contractor. Address, company name & phone must match information on license.

Application # 0750016496

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: Israel Lucas Date: 1/10/07
Address: 4432 Fox Run Rd, Sanford 27330 Phone: 919 776 1071 / 919 770 0902

Directions to job site from Lillington: 27 W To Tingen Rd, Left into Tingen Place,
1st Rt lot on left

Subdivision: Tingen Place Lot: 62

Construction Type: (Please Check) Building Use: (Please Check)
 New Moved House Residential Commercial 08
 Renovation Addition Other Modular Multi-Family

Total Project Cost: 140K Description of Proposed Work: New Const Residential

General Contractor Information

Heated SF 2200 Crawl Space Building Construction Cost \$ 120K
Unheated SF 600 Slab () Acres Disturbed .39 Stories 1

Israel Lucas Const. 919-770-0902
Building Contractor's Company Name Telephone

4432 Fox Run Rd, Sanford NC 27330 39324
Address License #

Israel Lucas
Signature of Owner/Contractor/Officer(s) of Corporation

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

Electrical Permit Information

Description of Work New Const Electrical Cost \$ 5000

TS Pole: Yes No () Underground Overhead ()
Permanent Service: Underground Overhead () Service Size: _____ Amps

Wester Pace Electric 919 499 3946
Electrical Contractor's Company Name Telephone

546 Leslie Rd, Sanford NC 27332 12007-U
Address License #

Wester Pace
Signature of Officer(s) of Corporation

Signature of Officer(s) of Corporation

Mechanical Permit Information

Description of Work Now const

Number of Units 1 Type System Electric Heat Pump Mechanical Cost \$ 5500

Affordable Heating & Air 919-499-2791
Mechanical Contractor's Company Name Telephone

7938 Sheriff Watson Rd, Sanford NC 27332 20046
Address License #

Eddie Estle
Signature of Officer(s) of Corporation

Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work new const

Number of Baths 2 Plumbing Cost \$ 5500

Cox Bros Plumbing 919-258-3622
Plumbing Contractor's Company Name Telephone

8301 Hillcrest Farm Rd, Sanford NC 27330 08644
Address License #

Steve Cox
Signature of Officer(s) of Corporation

Signature of Officer(s) of Corporation

Insulation Permit Information Residential Other () Not Required ()

Tri-City Insulation 418 Person St. Fayetteville N.C. 28301 910-486-8855
Insulation Contractor's Company Name & Address Telephone

Insulation Contractor's Company Name & Address Telephone

**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: Israel Lucas Const.

Sign/Title: Israel Lucas Owner

Date: 1/19/07

Plan Box Number A-2

Job Name ISRAEL LUCAS

Date: 1-11-07

Required Inspections for SFA/SFD

Appl. # 0750016496
Valuation # ~~206,740~~ 178,672
Sq. Feet ~~3182~~ 2790

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	<u> / </u>	R* Bldg. Slab Insp.
30-999	<u> / </u>	R* Elec. Under Slab
30-999	<u> / </u>	R*Plumb. Under Slab
40	<u> / </u>	Four Trade Rough In
40	<u> / </u>	Four Trade Rough In > 2500
40	<u> / </u>	Three Trade Rough In
40	<u> / </u>	Three Trade Rough In > 2500
40	<u> / </u>	Two Trade Rough In
40	<u> / </u>	Two Trade Rough In > 2500
40	<u> / </u>	One Trade Rough In
40	<u> / </u>	One Trade Rough In > 2500
50	<u> / </u>	R* Insulation
60	<u> / </u>	Four Trade Final
60	<u> / </u>	Four Trade Final > 2500
60	<u> / </u>	Three Trade Final
60	<u> / </u>	Three Trade Final > 2500
60	<u> / </u>	Two Trade Final
60	<u> / </u>	Two Trade Final > 2500
60	<u> / </u>	One Trade Final
60	<u> / </u>	One Trade Final > 2500
999	<u> / </u>	Envir. Operations Permit