



Application # 07-50016644
 Harnett County Central Permitting
 PO Box 85 Lillington, NC 27546
 Telephone Number 810-893-7525 www.harnett.org

Application for Building and Trade Permit

Owner's Name: Raynor Builders Inc. Date: 2-27-07
 Address: 301 N Raleigh St Angier NC 27501 Phone: 639-3012
 Directions to job site from Lillington: 210 EAST L ON JAMES NORRIS RD.
Sub is 1 mile on right.

Subdivision: AUTUMN POINT Lot: 8

Construction Type: (Please Check)
 New Moved House
 Renovation Addition Other

Building Use: (Please Check)
 Residential Commercial
 Modular Multi-Family

Total Project Cost: _____ Description of Proposed Work: SFD

General Contractor Information

Heated SF 1491 Crawl Space
 Unheated SF 488 Slab ()
 Building Construction Cost \$ 125,000
 Acres Disturbed _____ Stories 1
Raynor Builders Inc. 639-3012
 Building Contractor's Company Name Telephone
301 N Raleigh St Angier NC 27501 License # 40079
 Address

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

Electrical Permit Information

Description of Work _____ Electrical Cost \$ _____
 TS Pole: Yes No () Underground Overhead ()
 Permanent Service: Underground Overhead () Service Size: 200 Amps
Stancil's Owen Electrical, Inc. 639-2073
 Electrical Contractor's Company Name Telephone
Angier N.C. License # 13075-L
 Address

Signature of Officer(s) of Corporation

Mechanical Permit Information

Description of Work _____ Mechanical Cost \$ _____
 Number of Units 2 Type System split
J.C. Heating & Air heat pump Mechanical Cost \$ 557-3053
 Mechanical Contractor's Company Name Telephone
Holly Springs N.C. License # 126554-3
 Address

Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work _____ Plumbing Cost \$ _____
 Number of Baths 2
Barnes Plumbing 639-3401
 Plumbing Contractor's Company Name Telephone
Angier N.C. License # 17735
 Address

Signature of Officer(s) of Corporation

Insulation Permit Information

Residential Other () Not Required ()
Jatum Insulation Stanger N.C.
 Insulation Contractor's Company Name Address 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.

Craig Byrd
Signature of Owner/Contractor/Officer(s) of Corporation

3-9-07
Date

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

The undersigned applicant for Building Permit # 07-50016644 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: Raynor Builders Inc.

Sign/Title: Craig Byrd

Date: 3-9-07

Plan Box Number AA-4

Job Name RAYNOR BUILDERS

Date: 2-28-07

Required Inspections for SFA/SFD

Appl. # 0750016644
Valuation \$147,421
Sq. Feet 2269

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 checked="" type="checkbox"/>	One Trade Final > 2500
999	<input type="checkbox"/>	Envir. Operations Permit

10644

6/06/07, 11:00:02

HARNETT COUNTY PUBLIC UTILITIES
CUSTOMER SERVICE APPLICATION

USER ID JBROCK

NAME RAYNOR BUILDERS INC
ADDRESS 360 N RALEIGH ST
ANGIER NC 27501

CUSTOMER ID 21669
OLD ACCOUNT NUMBER
066011650

EXEMPT TAX NO PENALTY NO
CASH ONLY NO

SERVICE ADDRESS 181 TOPSAIL DR
CYCLE/ROUTE 01 04

LOCATION ID 86366
04

INITIATION DATE 6/06/07
JURISDICTION HARNETT COUNTY
INSIDE UNITS 1.00
SOCIAL SECURITY NUMBER
DOING BUSINESS AS
ALT CUSTOMER ID 2

CLASS RESIDENTIAL
SECTION NORTHEAST
DRIVERS LIC NUMBER

WATER METERED METERED RATE
METER NUMBER AUT008 UNITS 1.00

SERVICE ORDERS

155032 TO TURN ON

WA REQUEST DATE 6/06/07

MISC. INFORMATION

OLD ACC # 06601165000
WORK PHONE 9196392011

7/30/01
7/30/01