* 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 #_	07-	500	16657	

Harnett County Central Permitting PO Box 65 Lillington, NC 27546 Phone 910-893-7525 Fax 910-893-2793 www.harnett.org

Application for Residential Building and Trades Permit Owner's Name: Date: Site Address: 114 NP Phone: Directions to job site from Lillington: Subdivision: Description of Proposed Work: Simple #Bedrooms:_ Heated SF 1315 Unheated SF Sch Finished Rec Room? 00 Crawl Space (Slab () General Contractor Information Stancil Builders 919-639-207 **Building Contractor's Company Name** Telephone 466 Stancil Rd., Angier, NC 27501 034533 License # Must sign & fill out second page Ignature of Owner/Contractor/Officer(s) of Corporation **Electrical Permit Information** Description of Work <u>New Resi</u> dential Service Size: 200 _Amps TPole: ves/no Stancil-Owen Electrical <u>91</u>9-639-2073 Electrical Contractor's Company Name Telephone NC 27501 Angier 13075-L Address License # Signature of Office (s) of Corporation **Mechanical Permit Information** Description of Work ___Residential JC's Heating & Air 919-552-6258 Mechanical Contractor's Company Name Telephone 1589 Wade Stephenson Rd Molly Springs, NC 12655-H3 Address License # Signature of Officer(s) of Corporation Plumbing Permit Information Description of Work Residential _# Baths Barnes Plumbing, Inc. 919-639-0935 Plumbing Contractor's Company Name Telephone PO Box 1207, Angier, NC 27501 P17735 Address License # Signature of Officer(s) of Corporation **Insulation Permit Information** Insulating, Inc., 1212 Home Ct., Raleigh, NC 919-772-9000 Insulation Contractor's Company Name & Address Telephone 27603

Application #	-
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Homeowners Applying to Build Their Own F Please answer the following questions then see a Permit Technician to determine if you qualify for Questionnaire per G.S. 87-14 Regulations as to issue of Building Permit	or permit under Owners Exemption.
1. Do you own the land on which this building will be constructed?	yesno
2. Have you hired or intend to hire an individual to superintend and mana project?	age construction of the 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 codone?	onstruction work to be yes no
5. Do you intend to personally occupy the building for at least 12 consect completion of construction and do you understand that if you do not do presumption under law that you fraudulently secured the permit?	o, it creates the
	yesno
I hereby certify that I have the authority to make necessary application, that the and that the construction will conform to the regulations in the Bullding, Elementarical codes, and the Harnett County Zoning Ordinance. I state the inficontractors is correct as known to me and if any changes occur including listed number of bedrooms, building and trade plans, Environmental Health permit changes, I certify it is my responsibility to notify the Harnett County Central Peany and all changes.	ectrical, Plumbing and ormation on the above d contractors, site plan, anges or proposed use
Signature of Owner/Contractor/Officer(s) of Corporation Date	
Affidavit for Worker's Compensation N.C.G.S. The undersigned applicant being the:	5. 87-14
X General Contractor Owner Officer/Agent of the C	ontractor or Owner
Do hereby confirm under penalties of perjury that the person(s), firm(s) or corposet forth in the permit:	pration(s) performing the work
X Has three (3) or more employees and has obtained workers' compensat	on insurance to cover them.
Has one (1) or more subcontractors(s) and has obtained workers' competition.	ensation insurance to cover
X Has one (1) or more subcontractors(s) who has their own policy of working themselves.	ers' compensation insurance
Has no more than two (2) employees and no subcontractors.	
While working on the project for which this permit is sought it is understood that Department issuing the permit may require certificates of coverage of worker's to issuance of the permit and at any time during the permitted work from any processing out the work.	compensation insurance prior
Company or Name: Stancil Byilders, Int.	· · · · · · · · · · · · · · · · · · ·
Sign wattle: Presidentate	:
Page 2 of 2	9/07

Plan Box Number AA-6

Job Name <u>S TANCIL</u>

Date: <u>3 - 31 - 08</u>

Required Inspections for SFA/SFD

Appl. # 0750016657 Valuation \$ 108,30

Sequence	Sq. Feet_
10	R* Bldg. Footing
10-30	R* Elec. Temp Service Pole
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
50	One Trade Final
50	One Trade Final > 2500
)99	Envir. Operations Permit
	- Lammong t ettillt