

* 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 # _____

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: _____ Date: _____

Address: _____ Phone: _____

Directions to job site from Lillington: Take Hwy 27 west to Tingen Rd. Turn left on Tingen. Go to Tingen place subdivision on left. Turn left, take 1st right, Lot down on right.

Subdivision: Tingen Place Lot: 69

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 2352 Crawl Space Building Construction Cost \$ 180000
Unheated SF 686 Slab () Acres Disturbed _____ Stories 2

Maida Construction Inc. 910-890-6792
Building Contractor's Company Name Telephone

34 Eagle Rd. Coats, N.C. 27521 60091
Address License #

Thomas J. Maida
Signature of Owner/Contractor/Officer(s) of Corporation – Must sign back of form & workers comp

Electrical Permit Information

Description of Work wire house Electrical Cost \$ 8,000.00
TS Pole: Yes No () Underground Overhead ()
Permanent Service: Underground Overhead () Service Size: 200 Amps

Maida Electric, L.L.C. (910) 897-6216
Electrical Contractor's Company Name Telephone

34 Eagle Rd. Coats, N.C. 27521 23491L
Address License #

Thomas J. Maida
Signature of Officer(s) of Corporation

Mechanical Permit Information

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

Warren Heating & Cooling, Inc. (910) 892-3197
Mechanical Contractor's Company Name Telephone

1001 Denim Dr., Erwin, N.C. 28739 03136 H-1, H-2, H-3
Address License #

Michael D. Whitwell
Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work _____
Number of Baths 2 1/2 Plumbing Cost \$ _____

Dunn-Rite Plumbing 919-279-7652
Plumbing Contractor's Company Name Telephone

P.O. Box 577 Dunn, N.C. 28335 27929
Address License #

Wesley Daily
Signature of Officer(s) of Corporation

Insulation Permit Information Residential Other () Not Required ()

Tatum Insulation II 519 Old Drug Store Bld, Garner N.C. 27529 919-661-0999
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.

Thomas J. Maude

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

1/19/07

 Date

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

The undersigned applicant for Building Permit # _____ being the:

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: Maida Construction Inc

By/Title: Thomas Maida / President

Date: 1/19/07

~~SLAB~~ CRAWL

Plan Box Number A-4

Job Name MAUDA

Date: 1-25-07

Required Inspections for SFA/SFD

Appl. # 0750016697
Valuation \$190,237
Sq. Feet 2928

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 type="checkbox"/>	Four Trade Rough In
40	<input checked="" 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 type="checkbox"/>	Four Trade Final
60	<input checked="" 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