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

Application

0750016742

Harnett County Central Permitting PO 80x 65 Lillington, NC 27546 Telephone Number 910-893-7525 www.hamett.org Application for Building and Trade Permit

Owner's Name: CIL + BELKY STEADALKN Date: 26 TAVI CT Address: 1305 BCINE PATCH LN CALIECH Phone: 919 - 395- 1815 ANDRESON CREEK RD. Directions to job site from Lillington: NC 210 WAST. TC T.P. LEMUGL DLACK KD Subdivision: CATW & ST Lot: Construction Type: (Please Check) Building Use: (Please Check) Moved House Y Residential Commercial Addition Renovation Modular Other Mutti-Family Total Project Cost: 100000 Description of Proposed Work: General Contractor Information Heated SF 2611 Crawl Space M Building Construction Cost \$ _ Unheated SF452 Slab () Stories 2 Acres Disturbed ____, O Co____ THE QUEST DEVELOPMENT CO. OF DUNN ENC, 910-237-1853 **Building Contractor's Company Name** Telephone P.c. 2121 DINN NC 28335 60521 Apdgess 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 (d) Overheard () Permanent Service: Underground M Overhead () Service Size: GLEB SESSONS ELECTRIC 910-567-5630 Electrical Contractor's Company Name Telephone WINGIE LANG ANTLY VI WLE Address 1 Assente Signature of Officer(s) of Corporation **Mechanical Parmit Information** Description of Work Number of Units Type System HEAT WAL Mechanical Cost \$ ITAMOM HEATING AND A/C 910-897-5501 Mechanical Contractor's Company Name Telephone 724 TULLINGTON RD. DUAN N.L. 28334 7164 Address License # Gent Edward Signature of Officer(s) of Corporation Plumbing Pornit information Description of Work STRIGN STANLAY PLUMING LLC. Plumbing Contractor's Company Name Telephone PARKACTOWN RD. FORKOHM 27254 2287 Address Signature of Officer(s) of Corporation Insulation Permit Information Residential () Other () Not Required ()

INSULATION

Insulation Contractor's Company Name & Address FAIRTTEYILLE

1643 OLD HILMINGTON HNY

910-486-8855

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.hamett.org Application for Building and Trade Permit

Owner's Name: CIL+ SECKY STEADAKN	Date: 20 IAW CT
Address: 1305 BLINE PATCH LN PALIECH	MC_ Phone: 919-395-1915
Directions to job site from Lillington: NC 210 W45	IT. TO ANDRESON CEBEK RD.
T.P. LEMUEL BLACK KD, CAT	FWEST ON RIGHT
Subdivision: AATWEST	Lot: 1 V
Construction Type: (Please Check) Build Y New Moved House Y R Renovation Addition Other M	ling Use: (Please Check) esidential Commercial odular Multi-Family
Total Project Cost: 160000 Description of Propos	
	actor Information
Unheated SF 462 Slab () Acres	ing Construction Cost \$stories _ z
THE QUEST DEVELOPMENT CO. OF DUNN ENC.	
Building Contractor's Company Name	Telephone
P.C. 2121 DVNN NC 28335	605 Z I License #
Apdress	License #
Signature of Owner/Contractor/Officer(s) of Corporatio	n - Must sign back of form & workers comp
Electrical Per	mit Information
Description of Work TS Pole: Yes M No () Underground M Overh	Electrical Cost \$
Permanent Service: Underground (*) Overhead ()	Service Size: 200 Amps
GLEG SESSONS ELECTRIC	
Electrical Contractor's Company Name	Telephone
189 MARIE LANG ATTEYVILLE	
Address Session	License #
Signature of Officer(s) of Corporation	
Description of Work	rmit Information
Meanth as a fit to the	
Number of Units Z Type System _ H & A*	
	ר סיינו Mechanical Cost \$
Number of Units Type System	
TMDM HEATING AND AIC Mechanical Contractor's Company Name 724 TURLINGTON RD. DUNN NO	「Puki ² Mechanical Cost \$ 910 - 89 7 - 550 (
Mechanical Contractor's Company Name	Telephone Mechanical Cost \$
Mechanical Contractor's Company Name 724 TVELINGTON RO. DUNN N.C. Address Kenthauran	下 Pv 水() Mechanical Cost \$ 910 - 897 - 5501 Telephone - 28334 17164
Mechanical Contractor's Company Name 724 TVLLINGTON RD. DUNN N.C. Address Kend Schause Signature of Officer(s) of Corporation	<u> 910 - 897 - 5501</u> Telephone 2833Ч <u>1716</u> 4 License #
Mechanical Contractor's Company Name 724 TVLLINGTON RD. DUNN N.C. Address Signature of Officer(s) of Corporation Description of Work	下 Pv 水() Mechanical Cost \$ 910 - 897 - 5501 Telephone - 28334 17164
Mechanical Contractor's Company Name 724 TVLLINGTON RD. DUNN N.C. Address Signature of Officer(s) of Corporation Plumbing Perm	Telephone 28334 17164 License #
Mechanical Contractor's Company Name 724 TVLLINGTON RD. DUNN N.C. Address Signature of Officer(s) of Corporation Description of Work Number of Baths 2-	Puki Mechanical Cost \$ 910 - 897 - 5501 Telephone 28334 17164 License # License #
Mechanical Contractor's Company Name 724 TVLLINGTON RD. DUNN N.C. Address Signature of Officer(s) of Corporation Description of Work Number of Baths 2	Telephone Plumbing Cost \$
Mechanical Contractor's Company Name 724 TUZLINGTON RD. DUNN NO Address Signature of Officer(s) of Corporation Description of Work Number of Baths Plumbing Contractor's Company Name	Purily Mechanical Cost \$ 910 - 897 - 5501 Telephone 28334 17164 License # License #
Mechanical Contractor's Company Name 724 TUZLINGTON RD. DUNN NO Address Signature of Officer(s) of Corporation Plumbing Perm Description of Work Number of Baths Plumbing Contractor's Company Name Illy O Charatt-Duna Am Duna Address Address	Purily Mechanical Cost \$
Mechanical Contractor's Company Name 724 TVZLINGTON RD. DUNN NO Address Signature of Officer(s) of Corporation Plumbing Perm Plumbing Contractor's Company Name	Purily Mechanical Cost \$
Mechanical Contractor's Company Name 724 TUZLINGTON RD. DUNN NO Address Signature of Officer(s) of Corporation Description of Work Number of Baths Plumbing Contractor's Company Name Illy O Mantt-Dun Am Duna Address Signature of Officer(s) of Corporation Insulation Permit Information Resident	Purily Mechanical Cost \$
Mechanical Contractor's Company Name 724 TVZLINGTON RD. DUNN NO Address Signature of Officer(s) of Corporation Plumbing Perm Plumbing Contractor's Company Name	Purily Mechanical Cost \$

Application	#

	obs must fill out this portion or System Information
Sprinkler Contractor's Company Name	Contact & Telephone
Address	License #
	m System Information
Fire Alarm Contractor's Company Name	Contact & Telephone License #
Signature of Officer(s) of Corporation <u>Driveway Access</u> - NC Department of Tra	ansportation 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?
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?
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 <u>any</u> 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.

Signature Owner/Contractor/Officer(s) of Corporation

≥ 26 JAN 07

Application	#
4.5	

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

The undersign	ned applicant for Building Permit #	being the:
	General Contractor Owner	
	Officer/Agent of the Contractor or Owner	
	nfirm under penalties of perjury that the personorth in the permit:	n(s), firm(s) or corporation(s) performing
	Has/have three (3) or more employees and l compensation insurance to cover them.	has/have obtained workers'
X	Has/have one (1) or more subcontractors(s) compensation insurance to cover them.	and has/have obtained workers'
	Has/have one (1) or more subcontractors(s) workers' compensation insurance covering the contractors of the contractor of the contractors of the contractors of the contractors of the contractor of the contractors of the	who has/have their own policy of hemselves.
	Has/have not more than two (2) employees a	and no subcontractors.
Department is insurance prior	on the project for which this permit is sought it is sought it is sough the permit may require certificates or to issuance of the permit and at any time during carrying out the work.	f coverage of worker's compensation
Firm Name:	THE QUEST DEVELOPMENT CO.	OF DINN INC.
Sign/Title:	PRESIT	DENT
Date:	22 500 07	