BI

* 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 # 0750016813

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: Dorry O Evens I	nc. Date: 4-10-07	
Address: 425 Indian Camp Rd.	Phone: 934-3784	
Directions to job site from Lillington: 210 To 55 furn it, Left on		
Silas Hayer Rd sub- on		
Subdivision: Hunters Point	Lot: 4	
Construction Type: (Please Check)	Building Use: (Please Check)	
✓ New Moved House Renovation Addition Other	ResidentialCommercialModularMulti-Family	
- -		
Total Project Cost: 68,880 Description of Pro	oposed Work: <u>wew residential</u>	
Heated SFCrawl Space (General Co	ontractor Information	
Unheated SFSlab ()	Building Construction Cost \$ 90,000 Acres Disturbed5 Stories /	
Daryl D Euros Inc. Building Contractor's Company Name	018-974-7804	
Building Contractor's Company Name	Telephone	
415 Taller Coma Rd Soil	HATE ald NC 27577 50249	
Address	License #	
Gardell. En		
Signature of Owner/Contractor/Officer(s) of Corpor	ration — Must sign back of form & workers comp	
Electrical Electrical	Permit Information	
Description of Work New Paridental TS Pole: Yes (Y No () Underground (Y O	Electrical Cost \$ _ 7,000	
Permanent Service: Underground (4) Overhead	I() Service Size: 200 Amps	
C+M Electric		
Electrical Contractor's Company Name	Telephone	
818 Purser Drive Suleigh N	•	
Address	5689-L License#	
Jul Brun		
Signature of Officer(s) of Corporation		
Mechanica	l Permit Information	
Description of Work <u>New Registential</u> Number of Units Type System <u>He</u>	+ A a Blockenical Coal C //	
Strate was Contact Ala	2) 0 0000	
Stephenson Heating & Air Mechanical Contractor's Company Name	3) 9-0686 Telephone	
343 Shipwish Drive		
Address / L		
but Alechanon	License #	
Signature of Officer(s) of Corporation		
Plumbina	Permit Information	
Description of Work <u>vew residential</u> Number of Baths 2		
	Plumbing Cost \$ 4500°	
Plumbing Contractor's Company Name	553-4723	
	Telephone	
3849 L: HIE Creek Church Rd. Address	<u> </u>	
Ricky Lordon	License #	
Signature of Officer(s) of Corporation		
Insulation Permit Information Residential (V Other () Not Required ()		
Tatur Fusulation	661-800999	
nsulation Contractor's Company Name & Address	Telephone	

•	Application #_ 0/300/6	
V/A Sprinkler System Information - Commercial		
Sprinkler Contractor's Company Name	Telephone	
Contact Person		
Address	License #	
Signature of Officer(s) of Corporation		
NIA Fire Alarm System	n Information - Commercial	
Fire Alarm Contractor's Company Name	Telephone	
Contact Person		
Address	License #	
Signature of Officer(s) of Corporation		
<u>Driv</u>	eway Access	
NC Department of Transportation Driveway Access	s/Permit? Yes 🗹 No	
Mechanical codes, and the Harnett County Zoning contractors is correct as known to me and if any contractors is correct as known to me and if any contractors is correct as known to me and if any contractors is correct as known to me and if any contractors is correct as known to me and if any contractors is correct as known to me and if any contractors is correct as known to me and if any contractors is contracted in the interest of the intere	recessary application, that the application is correct gulations in the Building, Electrical, Plumbing and g Ordinance. I state the information on the above hanges occur including listed contractors, site plan, mit changes or proposed use changes, I certify it is at Permitting Department of any and all changes.	

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

Application # 0750016823

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

rne 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 issurance prior to issuance of the permit and at any time during the permitted work from any person, irm or corporation carrying out the work.
irm Name: Durry D. Euros Inc.
ign/Title: President
ate: 4-9-07

Plan Box Number S -

Job Name DARRYL EVANS

Date: 4 - 12 - 07

Required Inspections for SFA/SFD

Appl. # 0750016823Valuation # 121.432Sq. Feet 1869

Sequence

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
60	One Trade Final
60	One Trade Final > 2500
999	Envir. Operations Permit
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