

* 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: St + K Homes Date: 2-19-07
Address: 4609 Forest Highland Dr. ? Phone: 919-625-0703
Directions to job site from Lillington: 27 W 102 on 24 102 on Cameron Hill Rd. 102 on Yorkshire Dr.
Subdivision: Yorkshire Plantation Lot: 140
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 2486 Crawl Space Building Construction Cost \$ 107,200
Unheated SF 36 Slab () Acres Disturbed _____ Stories 2
Steve Jernigan Telephone 919-625-0363
Building Contractor's Company Name _____
4609 Forest Highland Dr. License # 53365
Address _____

Signature of Owner/Contractor/Officer(s) of Corporation - Must sign back of form & workers comp
Electrical Permit Information
Description of Work New Electrical Cost \$ _____
TS Pole: Yes (X) No () Underground (X) Overhead ()
Permanent Service: Underground (X) Overhead () Service Size: 200 Amps
Wester & Pace Telephone 919-499-5389
Electrical Contractor's Company Name _____
546 Leslie Dr. Sanford, NC License # 1200-76
Address _____
Signature of Officer(s) of Corporation William Wester

Mechanical Permit Information
Description of Work New
Number of Units _____ Type System Heat Pump Mechanical Cost \$ _____
Jacksons Heating + Air Telephone 910-891-5410
Mechanical Contractor's Company Name _____
PO Box 82 Benson, NC License # 23670
Address _____
Signature of Officer(s) of Corporation David Jackson

Plumbing Permit Information
Description of Work New
Number of Baths _____ Plumbing Cost \$ _____
LR Glover Plumbing Inc. Telephone 910-820-0026
Plumbing Contractor's Company Name _____
PO Box 764 Benson, NC 27504 License # 07958
Address _____
Signature of Officer(s) of Corporation Lee Glover

Insulation Permit Information Residential () Other () Not Required ()
Blown Rite Insulation 3737 Climber Rd. Fayetteville, NC 28317 Telephone 910-483-8191
Insulation Contractor's Company Name & Address _____

Sprinkler System Information - Commercial

_____ Sprinkler Contractor's Company Name	_____ Telephone
_____ Contact Person	
_____ Address	_____ License #
_____ Signature of Officer(s) of Corporation	

Fire Alarm System Information - Commercial

_____ Fire Alarm Contractor's Company Name	_____ Telephone
_____ Contact Person	
_____ Address	_____ License #
_____ Signature of Officer(s) of Corporation	

Driveway Access

NC Department of Transportation Driveway Access/Permit? Yes ___ No ___

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.

_____ Signature of Owner/Contractor/Officer(s) of Corporation	_____ Date
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**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: SK Homes

By/Title: [Signature]

Date: 2/14/07

Plan Box Number D-4

Job Name S & K CONST

Date: 2-19-07

Required Inspections for SFA/SFD

Appl. # 0750016875
Valuation #200,178
Sq. Feet 3681

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