

Harnett County Central Permitting
PO Box 85 Lillington, NC 27546
Telephone Number 910-893-4730

Application for Building and Trade Permit

Owner's Name: LARRY FRANCIS Date: 3/12/07
Address: P.O. Box 300 FURQUAY - VARINA, NC Phone: 552-9007
Directions to job site: 401 N, LEFT ON CHRISTIAN LIGHT RD, LEFT
ON COKEBURY, LEFT ON WADE STEPHENSON, LEFT INTO S/D

Subdivision: FIELDSTONE FARMS Lot: 16
Construction Type: (Please Check) Building Use: (Please Check)
 New Residential
 Renovation Modular
 Addition Commercial
 Moved House Multi-Family
 Other
Description of Proposed Work: CONSTRUCT NEW RESIDENCE
Total Project Cost: 350,000

Building Permit Information

Heated SF Crawl Space Building Construction Cost \$ 350,000
Unheated SF Slab Acres Disturbed 1 Stories 1 1/2
LARRY S FRANCIS, ALM. Telephone: 919-552-8007
Building Contractor's Company Name
P.O. Box 300 FURQUAY - VARINA, NC Telephone: 36346
Address License #
Land & Found, Inc
Signature of Officer(s) of Corporation

Electrical Permit Information

Description of Work: WIRE NEW RESIDENCE Electrical Cost \$ 10,000.00
YS Pole: Yes No Underground Overhead
Permanent Service: Underground Overhead Service Size: 400 Amps
HAIR ELECTRICAL Telephone: 422-5871
Electrical Contractor's Company Name Telephone: 22027
FURQUAY - VARINA, NC License #
Address
Mike Hair
Signature of Officer(s) of Corporation

Mechanical Permit Information

Description of Work: INSTALL A/C SYSTEM Mechanical Cost \$ 20,000
Number of Units: 1 Type System: INFINITY Telephone: 552-5182
GEM SERVICE CO. Telephone: 08892
Mechanical Contractor's Company Name License #
2207 DURHAM DR RALEIGH 27602
Address
Kandy Dickens
Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work: PLUMBING INSTALLATION Plumbing Cost \$ 10,000
Number of Baths: 3 1/2 Telephone: 657-1504
CAMDEN PLUMBING Telephone: 18903
Plumbing Contractor's Company Name License #
P.O. Box 1355 FURQUAY - VARINA
Address
[Signature]
Signature of Officer(s) of Corporation

Insulation Permit Information

Residential Other Not Required
INSULATION INC. Address: RALEIGH, NC Telephone: 772-9000
Insulation Contractor's Company Name

n/a

Sprinkler System Information

Sprinkler Contractor's Company Name _____

Telephone _____

Contact Person _____

Address _____

License # _____

Signature of Officer(s) of Corporation _____

Fire Alarm System Information

n/a

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 Division of any and all changes.

Lawrence J. Brown

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

3/12/07

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: LARRY S FRANCIS, BUILDER

By/Title: Larry S Francis, PRES

Date: 3/12/07

Plan Box Number I-1

Job Name LARRY FRANKES

Date: 3-13-07

Required Inspections for SFA/SFD

Appl. # 075001688

Valuation \$173,930

Sq. Feet 2677

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