\* 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. 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: Fullen Custon Homes, Inc. Date: 2/23/07
Address: 141-H   2000 (1)
Directions to job site from Lillington: Take 210 toward Angler, Turn
left as the line is a line in the state of the last
Subdivision: Bruph Keith Mechanic
Construction Times (Diames of
New Moved House V Residential
Renovation Addition Other Modular Commercial Commercial Multi-Family
Total Project Cost: 155,000 Description of Proposed Work: New Home
Building Construction Cost & 155 700
Unheated SF Slab () Acres Disturbed Stories 2
William E. Pullen 919-291-2201
Building Contractor's Company Name Telephone
1617 Farm Lake De Holly Spring NC 2781/2 51722
Address License #
_ William E. fulle
Signature of Owner/Contractor/Officer(s) of Corporation — Must sign back of form & workers comp
Paradiation (IV) Ala D Liectrical Permit Information
Description of Work New Presidential Electrical Cost \$ 5.000.00
TS Pole: Yes (No () Underground () Overhead ()  Permanent Service: Underground () Overhead () Service Size: 200 Amps
Lighthouse Electric Inc. 919-894-7186
Electrical Contractor's Company Name  Telephone  Telephone
Address License #
fours tollar
Signature of Officer(s) of Corporation
Description of Work New Residential Permit Information
Number of Units Type System Mechanical Cost \$_ 87,000.00
QUALITY AR SOLVED INC 919662 0869
Mechanical Contractor's Company Name Telephone
SZOR SAPRING FORM TO POL., N.C. 71603 13367
Address License #
formy Int I.P. OASING
ingnature of Officer(s) of Corporation
Description of Work New Residents
Number of Baths Plumbing Cost \$
A A A A A A A A A A A A A A A A A A A
Plumbing Contractor's Company Name  919 - 639 - 8200  Telephone
P.O. BOX 264 Willow Springs, N.L. 27592 18550 P-1
License #
Within H. Whire
ignature of Officer(s) (Corporation
Inscription Permit Information Residential Other () Not Required ()
1054104106. LOC. 1212 Home Ct Roleigh No 27402 919-772-5212
nsulation Contractor's Company Name & Address Telephone
<b>_</b>

Application #	!

Commercial Jo Sprinkle	bs must fill out this portion r System Information	
Sprinkler Contractor's Company Name	Contact & Tolombons	
	Contact & Telephone	
Address	License #	<del></del>
Signature of Officer(s) of Corporation  Fire Alarm	n System Information	
Fire Alarm Contractor's Company Name	Contact & Telephone	
Address	License #	
Signature of Officer(s) of Corporation <u>Driveway Access</u> - NC Department of Tra	insportation Driveway Access/Permit? Yes	No
Homeowners Apply	ing to Build Their Own Home	
Please answer the following questions then see a Permit T		
Questionnaire per G.S. 87-14 Regulations as		
1. Do you own the land on which this buil		
2. Have you hired or intend to hire an ind the project?	ividual to superintend and manage cor yes	
3. Do you intend to directly control & supe	ervise construction activities? yes	no
4. Do you intend to schedule, contract, or be done?	directly pay for all phases of construct	tion work to
5. Do you intend to personally occupy the following completion of construction and d creates the presumption under law that yo	lo you understand that if you do not do	onths so, it
	yes	no
Sign & date		
I hereby certify that I have the authority to make nand that the construction will conform to the reg Mechanical codes, and the Harnett County Zoning contractors is correct as known to me and if any c building and trade plans, Environmental Health per my responsibility to notify the Harnett County Central	gulations in the Building, Electrical, Plumbin g Ordinance. I state the information on the hanges occur including listed contractors, site mit changes or proposed use changes, I certi ral Permitting Department of any and all chang	g and above plan, for it is
Signature of Owner/Contractor/Officer(s) of Corpora	<u>2-26-07</u> ation Date	_

Application	#

## 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	
Do hereby con the work set fo		erson(s), firm(s) or corporation(s) performing
	Has/have three (3) or more employees a compensation insurance to cover them.	and has/have obtained workers'
	Has/have one (1) or more subcontractor compensation insurance to cover them.	s(s) and has/have obtained workers'
	Has/have one (1) or more subcontractor workers' compensation insurance coveri	s(s) who has/have their own policy of ng themselves.
	Has/have not more than two (2) employe	es and no subcontractors.
insurance prior	on the project for which this permit is sough	nt it is understood that the Central Permitting s of coverage of worker's compensation during the permitted work from any person,
Firm Name:	William E. Pallen	
Sign/Title:		
Date: 2	-23-07	

Plan Box Number D-2

Job Name PULLEN CONST.

Date: <u>2-26-07</u>

## Required Inspections for SFA/SFD

#/78,348 Valuation # /78,3 748 Sq. Feet 2745

## 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 Pough In 2500
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
50	One Trade Rough In > 2500 R* Insulation
60	
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
999	One Trade Final > 2500
	Envir. Operations Permit