* Accidentation 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 # 02508 12012

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: Stephenson Builders	Trc. Date: 2-23-07
Address: 84 SWEET SAMANTAN	Ch. F.V. H. 27526 Phone: 639-3862
Directions to job site from Lillington: 401 To	MAN FURRY TIME / EST D
CHAINSTONE RV. THAT	LEFT INTO PERFUEIGNO
Subdivision: DEXTRESO	Lot: 39
Construction Type: (Please Check) New Moved House Renovation Addition Other	Building Use: (Please Check) Residential Commercial Modular Multi-Family
Total Project Cost/SQ MD Description of I	
Constal	Contractor Information
Heated SF 200 Crawl Space (*) Unheated SF /30 Slab ()	Building Construction Cost \$
Stephenson Builders Inc. Building Contractor's Company Name	1039.2862 (427-8654) PHIC Telephone
Address / Raleigh St. Angrer	License #
Signature of Owner Contractor/Officer(s) of Corp	oration — Must sign back of form & workers comp
Description of Work	al Permit Information Electrical Cost \$ 3500
TS Pole: Yes Mo () Underground () Permanent Service: Underground () Overhead	Overnearor :
Kex Dean Electric	919-552-6258
Electrical Contractor's Company Name	Telephone
Address Name bee Rd. Willow S	pny 2759 5748 License #
Signature/of Officer(s) of Corporation	
Description of Work Mechanic	al Permit Information
Number of Units Type System &	Mechanical Cost \$_5000
Mechanical Contractor's Company Name	919-552-4258 Telephone
1580 ande Steplenen Rd. Hally Address	12455 H-3 License #
Signedure of Officer(s) of Corporation	
Plumbine	Permit Information
Description of Work Number of Baths 3	Plumbing Cost \$ 4000 9
WW Plumbing Inc.	919-639-0195
Plumbing Contractor's Company Name	Telephone
Address 1004 Angler 27501	<u>14087</u> License #
Signature of Officer(s) of Corporation	
Insulation Permit Information 1	Residential () Other () Not Required ()
	Pale in Nr. 27 (18 9/9-77) - 9000

Application i	<i>‡</i>	

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

The undersigned applicant for Building Permit #		
	General Contractor	
	Owner	
	Officer/Agent of the Contractor or Owner	
Do hereby confi the work set fort	irm under penalties of perjury that the person(s), firm(s) or corporation(s) performing h 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:	Skeplenson Builders Inc	
Sign/Title:	Met for.	
Date:	3-23-07	

Plan Box Number / - /

Job Name STEPHENSON

Date: 3 - 26 -07

Required Inspections for SFA/SFD

Appl. # 0750017017 Valuation \$160,091 Sq. Feet 2464

Sequence

10 10-30	R* Bldg. Footing 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