

\*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 # 17034  
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: Brian Johnson Builders Inc Date: 5/1/07  
Address: 635 Chisenhall Rd Angier NC Phone: 427 2976  
Directions to job site from Lillington: 401 Toward Fuquay Varina T/L on Chalybeate Rd T/L into Dexterfield T/R Brandamoor Ct T/L on  
Subdivision: Sweet samantha lot on left Dexterfield Lot: 35  
Construction Type: (Please Check)  New  Moved House  Renovation  Addition  Other  
Building Use: (Please Check)  Residential  Commercial  Multi-Family  Modular  
Total Project Cost: 155,000 Description of Proposed Work: New House

**Building Permit Information**

Heated SF 1855 Crawl Space  Building Construction Cost \$ 115,000  
Unheated SF      Slab  Acres Disturbed .02 Stories 1 1/2  
Brian Johnson Builders Inc Telephone 427 2976  
Building Contractor's Company Name Address 635 Chisenhall Rd Angier License # 41348  
Signature of Officer(s) of Corporation [Signature]

**Electrical Permit Information**

Description of Work Wire New House Electrical Cost \$ 5500  
TS Pole: Yes  No  Underground  Overhead   
Permanent Service: Underground  Overhead  Service Size: 200 Amps  
Ref Dean Electrical 552 4282  
Electrical Contractor's Company Name Telephone 57482  
Address 5037 Kennebec Rd Willow Springs NC License #  
Signature of Officer(s) of Corporation Ref Dean

**Mechanical Permit Information**

Description of Work Heat + Air for New House Mechanical Cost \$ 4500  
Number of Units 2 Type System Heat Pump  
JC's Heating & Air Conditioning Service 552 3053  
Mechanical Contractor's Company Name Telephone 12655  
Address 1539 Holly Springs NC License #  
Signature of Officer(s) of Corporation Jim Cannell

**Plumbing Permit Information**

Description of Work Plumbing New House Plumbing Cost \$ 5200  
Number of Baths 2  
w+w Plumbing Co Inc 639 0195  
Plumbing Contractor's Company Name Telephone 14087  
Address PO Box 1239 Angier NC License #  
Signature of Officer(s) of Corporation Ronnie Wells

**Insulation Permit Information**

Residential  Other  Not Required   
Insulation Contractor's Company Name 1212 Homet Rakigh NC Telephone 772 9000  
Insulating Inc Address      Telephone

**Sprinkler System Information**

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

**Fire Alarm System Information**

_____ 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   P  

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.

_____ 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:

  P   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.

  P   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:   Brian Johnson Builders Inc  

Sign/Title:   [Signature] President  

Date:   5/1/07

Plan Box Number I-5

Job Name JOHNSON

Date: 5-2-07

Required Inspections for SFA/SFD

Appl. # 0750017034  
Valuation \$150,279  
Sq. Feet ~~251,300~~  
2313 ✓

Sequence

10	<u>✓</u>	R* Bldg. Footing
10-30	<u>✓</u>	R* Elec. Temp Service Pole
20	<u>✓</u>	R* Building Foundation
20	<u>✓</u>	Address Confirmation
30-999	<u>✓</u>	Open Floor
30-999		R* Bldg. Slab Insp.
30-999		R* Elec. Under Slab
30-999		R*Plumb. Under Slab
40	<u>✓</u>	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	<u>✓</u>	R* Insulation
60	<u>✓</u>	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	<u>✓</u>	Envir. Operations Permit