\* 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

A	
Owner's Name: Premier Investments LLC	Date: 3/21/07
Address: 125 Mystic Lane, Lillington, NC	Phone: (9/9) 497-7770
Directions to job site from Lillington: North 421, LTF	t on Old US 421
Left on Mc Dougald Rd, 2 miles Ava's R.	idga on Left
Subdivision: Ava's Ridge	Lot: 7
Construction Type:       (Please Check)       Building Us         ✓ New       Moved House       ✓ Residen        Renovation       Addition       Other       Modular	tial Commercial
Total Project Cost: /// 000 Description of Proposed Wo	
Heated SF 1359 Crawl Space (9) Slab ( ) Building Co	Intermation Instruction Cost \$
Unheated SF 36 Acres Distu	rbed Stories /
Premier Investments LLC (91) Building Contractor's Company Name Tel	9)497-7770
Control of	opilara
PO Box 8466 Rocky Mount N.C. 27804	56656
Address	License #
Signature of Owner/Contractor/Officer(s) of Corporation - Mu	•
Description of Work NESI DENTINE ELECT. Ele	formation
TS Pole: Yes (/) No ( ) Underground (// Overhead (	)
Permanent Service: Underground (4) Overhead ( ) Ser	vice Size: <u>200</u> Amps
SMS ELECTRICAL SERVICES 91	19-796-5137
Electrical Contractor's Company Name Tele	ephone
102 Ms / alle Da En	· anni in com
602 M& Lellan DR. GARNER N.C.	19176-SP-SFD
Address (	1 <u>9176 - SP-SFD</u> License #
Address  Signature of Officer(s) of Corporation	1 <u>9176-5P-</u> SFD License #
Address  Signature of Officer(s) of Corporation  Mechanical Permit 1	License #
Signature of Officer(s) of Corporation  Description of Work New Heat If Africa Street	License # <u>nformation</u>
Signature of Officer(s) of Corporation  Description of Work New Heat It A/C Sustem  Number of Units Type System heat pum	License #  Information  Mechanical Cost \$
Signature of Officer(s) of Corporation  Description of Work New Heat If Africa Street	License #  Information  Mechanical Cost \$ 919 - 339 - 0686
Signature of Officer(s) of Corporation  Description of Work New Heat F A/C System  Number of Units I Type System heat pum  STEPHENSONS HEATENG AND AER ENC  Mechanical Contractor's Company Name  343 SHEPWASH DREVE GARNER NE	License #  Information  Mechanical Cost \$
Signature of Officer(s) of Corporation  Description of Work New Heat It A/C System  Number of Units Type System heat pum  STEPHENSONS HEATENG AND ALR ENC  Mechanical Contractor's Company Name	License #  Information  Mechanical Cost \$
Signature of Officer(s) of Corporation  Description of Work New Heat FA/C System  Number of Units 1 Type System heat pum  STEPHENSONS HEATENG AND AER ENC  Mechanical Contractor's Company Name  343 SHEALIASH DREVE GHENER NC	License #  Information  P Mechanical Cost \$
Signature of Officer(s) of Corporation  Description of Work New Heat HAIC Sustain  Number of Units 1 Type System heat pum  STEPHEN'SONS HEATENG AND AER ENC  Mechanical Contractor's Company Name  343 Shephash Dreve Ghener Ne  Signature of Officer(s) of Corporation	License #  Information  Mechanical Cost \$
Signature of Officer(s) of Corporation  Description of Work New Heat HAIC System  Number of Units 1 Type System heat pum  STEPHENSONS HEATENG AND AER ENC  Mechanical Contractor's Company Name  343 Shealash Dreve Ghener Ne  Address  Signature of Officer(s) of Corporation  Plumbing Permit In	License #  Information  Mechanical Cost \$
Signature of Officer(s) of Corporation  Description of Work New Heat I A/C System  Number of Units 1 Type System heat pum  STEPHENSONS HEATENG AND AER ENC  Mechanical Contractor's Company Name  343 SHEPWASH DREVE GHENER NC  Address  Signature of Officer(s) of Corporation  Plumbing Permit In  Description of Work Resedential Plumbins  Number of Baths 2 Plum  Plumbing Plumbins	License #  Information  Mechanical Cost \$
Signature of Officer(s) of Corporation  Description of Work New Heat FA/C system  Number of Units 1 Type System heat pum  STEPHENSONS HEATENG AND AER ENC  Mechanical Contractor's Company Name  343 Shepwash Dreve Ghener Ne  Address  Signature of Officer(s) of Corporation  Plumbing Permit In  Description of Work Resedential Plumbins  Number of Baths 2 Plum  Dann-Rite Plumbing Co. Inc.	Information  Mechanical Cost \$
Signature of Officer(s) of Corporation  Description of Work New Heat FA/C System  Number of Units 1 Type System heat pum  STEPHENSONS HEATENG AND AER ENC  Mechanical Contractor's Company Name  343 SHEPWASH DREVE GHENER NG  Address  Signature of Officer(s) of Corporation  Plumbing Permit In  Description of Work Researchial Plumbing  Number of Baths 2 Plum  DNAW-RITE PLUMGING Co. TAIC.  Plumbing Contractor's Company Name	License #  Information  Mechanical Cost \$
Signature of Officer(s) of Corporation  Description of Work New Heat HA/C System  Number of Units 1 Type System heat pum  STEPHENSONS HEATENG AND AER ENC  Mechanical Contractor's Company Name  343 Shepwash Dreve Ghener Ne  Address  Signature of Officer(s) of Corporation  Plumbing Permit In  Description of Work Resedential Plumbing  Number of Baths 2 Plum  Dunn-Rite Plumbing Co. Inc.  Plumbing Contractor's Company Name  P.O. Sox 577 Dunn, NC 28335	Information  Mechanical Cost \$
Signature of Officer(s) of Corporation  Description of Work New Heat FA/C System  Number of Units 1 Type System heat pum  STEPHENSONS HEATENG AND AER ENC  Mechanical Contractor's Company Name  343 SHEPWASH DREVE GHENER NG  Address  Signature of Officer(s) of Corporation  Plumbing Permit In  Description of Work Researchial Plumbing  Number of Baths 2 Plum  DNAW-RITE PLUMGING Co. TAIC.  Plumbing Contractor's Company Name	License #  Information  Mechanical Cost \$
Signature of Officer(s) of Corporation  Description of Work New Heat HA/C System  Number of Units Type System heat pum  STEPHENSONS HEATENG AND ARR INC  Mechanical Contractor's Company Name  343 SHEALASH DREVE GHENER NC  Address  Signature of Officer(s) of Corporation  Plumbing Permit In  Description of Work Resedential Plumbing  Number of Baths 2 Plum  DNN - RITE PLUMBING Co. INC.  Plumbing Contractor's Company Name  Po. Sox 577 None (28335)  Address  Signature of Officer(s) of Corporation	Information  Mechanical Cost \$
Signature of Officer(s) of Corporation  Description of Work New Heat FA/C Sustain Number of Units   Type System heat purm  SICPHENSONS HEATENG AND AER ENC Mechanical Contractor's Company Name  343 Shepuash Dreve Ghener Ne Address  Signature of Officer(s) of Corporation  Description of Work Residential Plumbing Number of Baths 2 Plum  Plumbing Contractor's Company Name  Po Sox 577 Now, No 28335  Address  Signature of Officer(s) of Corporation  Insulation Permit Information Residential	Information  Mechanical Cost \$
Signature of Officer(s) of Corporation  Description of Work New Heat HA/C System  Number of Units Type System heat pum  STEPHENSONS HEATENG AND ARR INC  Mechanical Contractor's Company Name  343 SHEALASH DREVE GHENER NC  Address  Signature of Officer(s) of Corporation  Plumbing Permit In  Description of Work Resedential Plumbing  Number of Baths 2 Plum  DNN - RITE PLUMBING Co. INC.  Plumbing Contractor's Company Name  Po. Sox 577 None (28335)  Address  Signature of Officer(s) of Corporation	Information  Mechanical Cost \$

•	Application #	n engandian in esseres sistematica bacatan di access		
	obs must fill out this portion or System Information	and the state of t		
Sprinkler Contractor's Company Name	Contact & Telephone	<del></del>		
Address	License #	<del></del>		
Signature of Officer(s) of Corporation Fire Alar	m 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 Transportation Driveway Access/Permit? Yes No				
,	ransportation Driveway Access/Permit? Yes	No		
Driveway Access - NC Department of Tr	ransportation Driveway Access/Permit? Yes  ying to Build Their Own Home  Technician to determine if you qualify for permit under Owne			
Driveway Access - NC Department of Tree Homeowners Apply Please answer the following questions then see a Permit	ying to Build Their Own Home	rs Exemption.		
Driveway Access - NC Department of Tree Homeowners Apply Please answer the following questions then see a Permit	ying to Build Their Own Home Technician to determine if you qualify for permit under Owne as to Issue of Building Permits (Memo available	rs Exemption.		
Homeowners Apply Please answer the following questions then see a Permit  Questionnaire per G.S. 87-14 Regulations at  1. Do you own the land on which this but  2. Have you hired or intend to hire an in	ying to Build Their Own Home Technician to determine if you qualify for permit under Owne as to Issue of Building Permits (Memo available	rs Exemption.  upon request		
Homeowners Apply Please answer the following questions then see a Permit  Questionnaire per G.S. 87-14 Regulations at  1. Do you own the land on which this but  2. Have you hired or intend to hire an intended project?	ying to Build Their Own Home Technician to determine if you qualify for permit under Owne as to Issue of Building Permits (Memo available tilding will be constructed? yes dividual to superintend and manage cons	rs Exemption.  upon request;  no  struction of no		
Homeowners Apply Please answer the following questions then see a Permit  Questionnaire per G.S. 87-14 Regulations at  1. Do you own the land on which this but  2. Have you hired or intend to hire an intended the project?  3. Do you intend to directly control & sup	ying to Build Their Own Home Technician to determine if you qualify for permit under Owne as to Issue of Building Permits (Memo available tilding will be constructed? yes dividual to superintend and manage cons yes pervise construction activities? yes or directly pay for all phases of construction	rs Exemption.  upon request  no  struction of no no		
Homeowners Apply Please answer the following questions then see a Permit  Questionnaire per G.S. 87-14 Regulations at  1. Do you own the land on which this but  2. Have you hired or intend to hire an inthe project?  3. Do you intend to directly control & sup  4. Do you intend to schedule, contract, obe done?  5. Do you intend to personally occupy the	ying to Build Their Own Home Technician to determine if you qualify for permit under Owne as to Issue of Building Permits (Memo available uilding will be constructed? yes dividual to superintend and manage cons yes pervise construction activities? yes or directly pay for all phases of constructi yes the building for at least 12 consecutive modo you understand that if you do not do se	rs Exemption.  upon request no struction of no no on work to 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 <u>any</u> 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

3/2//07

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

The undersigned	applicant for Building Permit # being the:
	General Contractor Owner
	Officer/Agent of the Contractor or Owner
Do hereby confi the work set fort	rm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the permit:
	Has/have three (3) or more employees and has/have obtained workers' compensation insurance to cover them.
ж <sup>а</sup> мбожов Монго <del>20</del> они на применения по	Has/have one (1) or more subcontractors(s) and has/have obtained workers' compensation insurance to cover them.
Macronina and Commission of the Commission of th	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.
Department iss insurance prior	n the project for which this permit is sought it is understood that the Central Permitting uing the permit may require certificates of coverage of worker's compensation to issuance of the permit and at any time during the permitted work from any person, on carrying out the work.
Firm Name:	Premier Investments LLC
Sign/Title:	In I Show owner
Date:	3/21/07

Plan Box Number E-4

Job Name REMIER

Date: 3-22

Required Inspections for SFA/SFD

Appl. # 07.50017174 Valuation \$128,255 Sq. Feet 1974

## 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 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