

* 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 # 0750017241

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: CMA Builders, LLC - Chris Adams Date: 4/26/07
Address: 5780 McArthur Rd Broadway NC 27505 Phone: (910) 893-8858
Directions to job site from Lillington: Hwy 210 N Take a RT on Sheriff Johnson Rd
Take LT on Old Buies Creek Rd Take LT on Viola Lane, lot on Left
Subdivision: Sandy Grove III Lot: 16

Construction Type: (Please Check) Building Use: (Please Check)
 New Moved House Residential Commercial
 Renovation Addition Other Modular Multi-Family

Total Project Cost: 110,000 Description of Proposed Work: 3BR/2BA New Construction

General Contractor Information
Heated SF 1248 Crawl Space () Building Construction Cost \$ 90,000
Unheated SF 336 Slab () Acres Disturbed _____ Stories 1
CMA Builders LLC (910) 893-8858
Building Contractor's Company Name Telephone
5780 McArthur Rd Broadway NC 27505 60052
Address License #

Chris Adams
Signature of Owner/Contractor/Officer(s) of Corporation - Must sign back of form & workers comp

Electrical Permit Information
Description of Work Residential Electric Electrical Cost \$ 3,000
TS Pole: Yes () No () Underground () Overhead ()
Permanent Service: Underground () Overhead () Service Size: _____ Amps
Jonathan Beasley Electrical Contractors (910) 984-6051
Electrical Contractor's Company Name Telephone
191 Fred McLeod Lane Coats NC 27521 26739
Address License #

Jonathan Beasley
Signature of Officer(s) of Corporation
Mechanical Permit Information
Description of Work Residential Heating & Air Unit
Number of Units 1 Type System Heat Pump Mechanical Cost \$ 1,500
B&J Heating & Air Service, Inc (910) 893-9057
Mechanical Contractor's Company Name Telephone
12 Mitchell Rd Lillington NC 27546 20380
Address License #

Ben Thomas
Signature of Officer(s) of Corporation
Plumbing Permit Information
Description of Work Residential Plumbing
Number of Baths 2 Plumbing Cost \$ 1,500
RL Holland Plumbing
Plumbing Contractor's Company Name Telephone
PO Box 472 Angier NC 27501 11687
Address License #

RL Holland
Signature of Officer(s) of Corporation
Insulation Permit Information Residential () Other () Not Required ()
Tric City Insulating Inc 1-800-408-1012
Insulation Contractor's Company Name & Address Telephone

Commercial Jobs must fill out this portion

Sprinkler System Information

Sprinkler Contractor's Company Name

Address

Signature of Officer(s) of Corporation

Contact & Telephone

License #

Fire Alarm System Information

Fire Alarm Contractor's Company Name

Address

Signature of Officer(s) of Corporation

Contact & Telephone

License #

Driveway Access - NC Department of Transportation Driveway Access/Permit? Yes No

Homeowners Applying to Build Their Own Home

Please answer the following questions then see a Permit Technician to determine if you qualify for permit under Owners Exemption.

Questionnaire per G.S. 87-14 Regulations as to Issue of Building Permits (Memo available upon request)

1. Do you own the land on which this building will be constructed? ___ yes ___ no
2. Have you hired or intend to hire an individual to superintend and manage construction of the project? ___ yes ___ no
3. Do you intend to directly control & supervise construction activities? ___ yes ___ no
4. Do you intend to schedule, contract, or directly pay for all phases of construction work to be done? ___ yes ___ no
5. Do you intend to personally occupy the building for at least 12 consecutive months following completion of construction and do you understand that if you do not do so, it creates the presumption under law that you fraudulently secured the permit? ___ yes ___ no

Sign & date

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 Department of any and all changes.

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

4/26/07
Date

**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 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: CMA Builders, LLC

Sign/Title: Christy M. Adam, Owner

Date: 4/26/07

Plan Box Number D-3

Job Name CMA

Date: 4-30-07

Required Inspections for SFA/SFD

Appl. # 0750017241
Valuation \$102,915
Sq. Feet 1584

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 checked="" type="checkbox"/>	Four Trade Rough In
40	<input 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 checked="" type="checkbox"/>	Four Trade Final
60	<input 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