\*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.

	<b>.</b>
Ann	olication # <u>07500 17445</u>
performing work. Must be owner discontractor. Address, company none must match information on Harnett County Central Permittir PO Box 65 Lillington, NC 27546 Telephone Number 910-893-7525 www.harr Application for Building and Trade	nett.org • <u>Permit</u>
Owner's Name: H&H CONSTRUCTION : DEVELOPMENT	Date: 6.5.07
Address: D. C. Box 909	Phone: 9/0 8/1 2/20
- 10 010 TT 100 KING (	IER, LEFT ONTO TRIPP ROAD,
LIFT ONTO SCUEPDENONG LANE, LEFT ONTO SWEET	TONDY CHAS I CELL ON HOUSE
Subdivision: THE PLANTATION AT THE VINEYARD GROWN	Lot:
Construction Type: (Please Check)  New Moved House  Building Use: (Please Check)  Residential	e Check) Commercial Multi-Family
Total Project Cost: #1(8)000, Description of Proposed Work:  General Contractor Informati  Building Construction  Building Construction	300°
Unheated SF 732 Slab () Acres Disturbed	<u>0.50</u> _Stories
	<u>43 5358</u>
Building Contractor's Company Name  Telephone	61353
P. O. BOX 909 ELWIN, NC 28339	License #
Address	
Signature of Owner/Contractor/Officer(s) of Corporation - Must sign back	ck of form & workers comp
Description of Work UIRNS FOR NOW CONSTRUCTION   Electrical Co	
TS Pole: Yes (V No ( ) Underground ( ) Overhead ( ) Service Size	e: <u>2<i>0</i>0</u> Amps
WHITE & COMPANY 410 8	397-6525
Electrical Contractor's Company Name	22927-11
Address PO Box 427	License #
Signature of Officer(s) of Corporation  Mechanical Permit Informat	tion
- CALL HAR END AND CONKERNOTION	)
Number of Units Type System	n = 091 = 5501
5+M Heating and HC Telephone	<u> </u>
Mechanical Contractor's Company Name Telephone	17164
Address	License #
Signature of Officer(s) of Corporation	ion
Plumbing Permit morning	
Piumping C	820-0026
Plumbing Contractor's Company Name Telephone  10. Box 764 Benson, N.C. 27500	
Address D N	License #
Signature of Officer(s) of Corporation  Insulation Permit Information Residential W C	Other ( ) Not Required ( )
Telerry Insulation & Building 48 Proson St. FA	4 NC 2861 910-486-8955
Insulation Contractor's Company Name & Address	Telephone 10/06

•	Application #		
. Commercial Job Sprinkler	s must fill out this portion System Information		
Sprinkler Contractor's Company Name	Contact & Telephone		
Address	License #		
Signature of Officer(s) of Corporation  Fire Alarm	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	ansportation Driveway Access/Permit?	Yes	No
Please answer the following questions then see a Permit			
Questionnaire per G.S. 87-14 Regulations a			
1. Do you own the land on which this bu			no
2. Have you hired or intend to hire an intend to hire an intended	<del></del>	yes	
3. Do you intend to directly control & sup			
4. Do you intend to schedule, contract, obe done?	or directly pay for all phases of c —	onstructi yes	ion work to no
5. Do you intend to personally occupy the following completion of construction and creates the presumption under law that the second control of the following complete the presumption under law that the following control of the following completion of construction and control of the following control of	an voli lingeistand mat ii yoo o	O HOL GO	onths so, it no
Sign & date			
I hereby certify that I have the authority to make and that the construction will conform to the Mechanical codes, and the Harnett County Zo contractors is correct as known to me and if are building and trade plans, Environmental Health my responsibility to notify the Harnett County Count	ining Ordinance. I state the information of changes occur including listed contraction permit changes or proposed use changen the information of any an entral Permitting Department of any and an increase of the information	on on the ractors, sit	above e plan, tify it is
	6-5-01		_
Signature of Owner/Contractor/Officer(s) of Con	poration Date		

Application	#
1 1	<del>-</del>

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

The undersigne	d applicant for Building Permit # being the:
	_ General Contractor
	Owner Officer/Agent of the Contractor or Owner
Do hereby con the work set for	firm under penalties of perjury that the person(s), firm(s) or corporation(s) performing th 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.
Department is insurance prio	on the project for which this permit is sought it is understood that the Central Permitting ssuing the permit may require certificates of coverage of worker's compensation r to issuance of the permit and at any time during the permitted work from any person, ation carrying out the work.
Firm Name:	H&H Custon HONES, INC.
Sign/Title:	Hot H Custon Hones, INC.  Posa Whon Pressour
Date:	-5-07

	1	
Plan Box Number		6

Job Name N+H Date: 6-19-07

## Required Inspections for SFA/SFD

Appl. # 0,7-5-17445 Valuation # 191666 Sq. Feet 2950

### 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