

\* 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 #

17495

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: SCOTT LEE HOMES, INC.

Date: \_\_\_\_\_

Address: 114 Adrian Street

Phone: 9195532085

Directions to job site from Lillington: 210 TWDS ANGLER LEFT ON TO 55HWY 42 THRU FUQUAY LEFT ONTO TRUELOVE RD SUB IS ON RIGHT

Subdivision: JONATHAN RIDGE Lot: 25

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

Total Project Cost: \_\_\_\_\_ Description of Proposed Work: New Construction

**General Contractor Information**

Heated SF 3378 Crawl Space (X) Building Construction Cost \$ 175,000.00  
Unheated SF 66 Slab ( ) Acres Disturbed 66 Stories 2

SCOTT LEE HOMES, INC 919 553 2085  
Building Contractor's Company Name Telephone  
PO BOX 748 CLAYTON, NC 27520 33181  
Address License #

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

**Electrical Permit Information**

Description of Work ELECTRICAL Electrical Cost \$ \_\_\_\_\_  
TS Pole: Yes (X) No ( ) Underground (X) Overhead ( )  
Permanent Service: Underground (X) Overhead ( ) Service Size: 200 Amps

JEFF WILLIS ELECTRIC, INC. 919 550 4700  
Electrical Contractor's Company Name Telephone  
5805 CORNWALLIS RD GARNER 27529 15644  
Address License #

Signature of Officer(s) of Corporation

**Mechanical Permit Information**

Description of Work HEATING AND AIR HVAC Mechanical Cost \$ \_\_\_\_\_  
Number of Units 2 Type System HEAT PUMP  
STEPHENSON HEATING & AIR, INC. 919 329 0686  
Mechanical Contractor's Company Name Telephone

343 SHIPWASH DR GARNER NC 27529 18644  
Address License #

Signature of Officer(s) of Corporation

**Plumbing Permit Information**

Description of Work PLUMBING Plumbing Cost \$ \_\_\_\_\_  
Number of Baths 2.5  
C.C. Select Plumbing 919 625-0163  
Plumbing Contractor's Company Name Telephone

421 Watters Rd Clayton N.C 27520 25464  
Address License #

Signature of Officer(s) of Corporation

**Insulation Permit Information** Residential ( ) Other ( ) Not Required ( )

TriCity Insulation 1901 Herring Ave Wilson NC 27896 18008497204  
Insulation Contractor's Company Name & Address Telephone

**Sprinkler System Information - Commercial**

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

**Fire Alarm System Information - Commercial**

_____ 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 \_\_\_

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.

_____ Signature of Owner/Contractor/Officer(s) of Corporation	_____ Date
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5-4-07

**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: Scott Lee Homes, Inc.  
Sign/Title: Gene J. Wall Assistant Secretary  
Date: \_\_\_\_\_

Plan Box Number AA 12

Job Name Scott Lee

Date: 5-4-07

Required Inspections for SFA/SFD

Appl. # 07-517495  
Valuation 223372  
Sq. Feet 2438

Sequence

10	<input checked="" type="checkbox"/>	R* Bldg. Footing
10-30		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		R* Bldg. Slab Insp.
30-999		R* Elec. Under Slab
30-999		R*Plumb. Under Slab
40		Four Trade Rough In
40	<input checked="" type="checkbox"/>	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	<input checked="" type="checkbox"/>	R* Insulation
60		Four Trade Final
60	<input checked="" type="checkbox"/>	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	<input checked="" type="checkbox"/>	Envir. Operations Permit

**A. Settlement Statement**

U.S. Department of Housing and Urban Development

HUD-1 (3/86) OMB No. 2502-02

<b>B. Type of Loan</b>			<b>6. File Number</b>	<b>7. Loan Number</b>	<b>8. Mortgage Insurance Case Number</b>
1. <input type="checkbox"/> FHA	2. <input type="checkbox"/> FmHA	3. <input checked="" type="checkbox"/> Conv. Unins.	2006-777	123112	
4. <input type="checkbox"/> VA	5. <input type="checkbox"/> Conv. Ins.				

**C. Note:** This form is furnished to give you a statement of actual settlement costs. Amounts paid to and by the settlement agent are shown. Items marked "(p.o.c)" were paid outside the closing; they are shown here for informational purposes and are not included in the totals.

<b>D. Name and Address of Borrower</b>	<b>E. Name and Address of Seller</b>	<b>F. Name and Address of Lender</b>
Scott Lee Homes, Inc. 106 S. Lombard Street Clayton, NC 27520	HTB Properties, Inc. 2191 Keith Hills Road Lillington, NC 27546	Four Oaks Bank & Trust Company P.O. Box 247 Clayton, NC 27528

<b>G. Property Location</b>	<b>H. Settlement Agent</b>	<b>I. Settlement Date</b>
Lots 1-4, 19-28, Jonathan Ridge, Phase I 12031400 2203 - 29000 1203 467.76 <i>MSM</i>	Kristoff Law Offices, P.A. Place of Settlement 444 E. Main Street P.O. Box 495 Clayton, NC 27520	07/27/06

<b>J. Summary of Borrower's Transaction</b>		<b>K. Summary of Seller's Transaction</b>	
<b>100. Gross Amount Due From Borrower</b>		<b>400. Gross Amount Due To Seller</b>	
101. Contract sales price	406,000.00	401. Contract sales price	406,000.00
102. Personal property		402. Personal property	
103. Settlement charges to borrower (line 1400)	6,421.60	403.	
104.		404.	
105.		405.	
<b>Adjustments for items paid by seller in advance</b>		<b>Adjustments for items paid by seller in advance</b>	
106. City/town taxes to		406. City/town taxes to	
107. County taxes 07/28/06 to 12/31/06 9.07	127.01	407. County taxes 07/28/06 to 12/31/06	127.01
108. Assessments to		408. Assessments to	
109.		409.	
110.		410.	
111.		411.	
112.		412.	
<b>120. Gross Amount Due From Borrower</b>	<b>412,548.61</b>	<b>420. Gross Amount Due To Seller</b>	<b>406,127.01</b>
<b>200. Amounts Paid By Or in Behalf Of Borrower</b>		<b>500. Reductions in Amount Due To Seller</b>	
201. Deposit or earnest money	14,000.00	501. Excess deposit (see instructions)	14,000.00
202. Principal amount of new loan(s)		502. Settlement charges to seller (line 1400)	16,154.00
203. Existing loan(s) taken subject to		503. Existing loan(s) taken subject to	
204. Construction Loan Draw	406,000.00	504. Payoff of first mortgage loan Willie Mae Wells	140,000.00
205.		505. Payoff of second mortgage loan New Century Bank	112,000.00
206.		506.	
207.		507.	
208.		508.	
209.		509.	
<b>Adjustments for items unpaid by seller</b>		<b>Adjustments for items unpaid by seller</b>	
210. City/town taxes to		510. City/town taxes to	
211. County taxes to		511. County taxes to	
212. Assessments to		512. Assessments to	
213.		513.	
214.		514.	
215.		515. 2006 County Taxes	295.21
216.		516.	
217.		517.	
218.		518.	
219.		519.	
<b>220. Total Paid By/For Borrower</b>	<b>420,000.00</b>	<b>520. Total Reduction Amount Due To Seller</b>	<b>282,449.21</b>
<b>300. Cash At Settlement From/To Borrower</b>		<b>600. Cash At Settlement To/From Seller</b>	
301. Gross amount due from borrower (line 120)	412,548.61	601. Gross amount due to seller (line 420)	406,127.01
302. Less amounts paid by/for borrower (line 220)	( 420,000.00)	602. Less reductions in amt. due seller (line 520)	( 282,449.21)
303. Cash <input type="checkbox"/> From <input checked="" type="checkbox"/> To Borrower	7,451.39	603. Cash <input checked="" type="checkbox"/> To <input type="checkbox"/> From Seller	123,677.79