\* 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 # M. KMITE

Harnett County Central Permitting PO Box 65 Lillington, NC 27546

Telephone Number 910-893-7525 www.harnett.org Application for Building and Trade Permit AHUE Phone: 919-868-1472 Address: 285 Wheeler Drive. Towards Directions to job site from Lillington: Subdivision: Construction Type: (Please Check) Building Use: (Please Check) Moved House New Residential Commercial Renovation Addition Other Modular Multi-Family Total Project Cost: 140,000 Description of Proposed Work: **General Contractor Information** Heated SF 1858 Crawl Space 4 Building Construction Cost \$ 125,000.00 Unheated SF6 G3Slab () Acres Disturbed 1/8 Ac-Stories Athe Building **Building Contractor's Company Name** Telephone Address Signature of Owner/Contractor/Officer(s) of Corporation - Must sign back of form & workers comp **Electrical Permit Information** Description of Work New Harn Electrical Cost \$ -4500 100 TS Pole: Yes No () Underground N Overhead () Permanent Service: Underground () Overhead ( ) Service Size: *919-639* · 2073 STANGE OWERS ELECTING Electrical Contractor's Company Name Telephone 466 STANCIL RD ANGLER N.C. 27501 Address\_ Signature of Officer(s) of Corporation **Mechanical Permit Information** Description of Work Wew Hom-Number of Units Mechanical Cost \$ 6000,00 Type System FIC. 919552.6258 J.C. HEATING + AIR GOLD. INC Mechanical Contractor's Company Name Telephone 1359 WADE STEVENSON RD. HOLLY SPRINGS **Address** Signature of Officer(s) of Corporation Plumbing Permit Information Description of Work Plumbing Cost \$\_\_\_\_\_\_\_ 6000000 Number of Baths \_\_\_\_ BARNS PLUMBING INC. 919 639 0935 Plumbing Contractor's Company Name Telephone Ra Box 1207 Angles N.C. 27501 Address Signature of Officer(s) of Corporation Insulation Permit Information Residential (7 Other () Not Required () 919-661-0999

JUC

Insulation Contractor's Company Name & Address

Telephone

Application #_	

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

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The undersigned	applicant for Building Permit #being the:		
_X	General Contractor Owner Officer/Agent of the Contractor or Owner		
Do hereby confi the work set forth	rm under penalties of perjury that the person(s), firm(s) or corporation(s) performing 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 issuinsurance prior t	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 o issuance of the permit and at any time during the permitted work from any person, on carrying out the work.		
Firm Name: $$	AHUE Building COIP, LLC		
Sign/Title:	Mad FUL member manager		
Date: 5	16/07		

Plan Box Number <u>C-5</u>

Job Name VAHUE BUILDES
CORP

Date: 5-17-07

Required Inspections for SFA/SFD

Appl. # 0750017544 Valuation \$156,581 Sq. Feet 2410 9

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	•
<del> </del>	R* Bldg. Slab Insp. R* Elec. Under Slab
30-999	
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
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