* 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 # 07-506175/04

Harnett County Central Permitting
PO Box 85 Lillington, NC 27546

Application for Residential Building and Trades Permit		
Owner's Name: DECCI Builders, Inc. Date: 2-22-08		
Sito Address 1005 Call and 3		
Directions to job site from Lillington: (1)5 (1)1		
then turn into Consessary round estate of		
Thomas raid, sid on right		
Subdivision: Cohestary Pack TIT		
Description of Proposed Mark VQ and Co.		
Heated SF 1533 Unheated SF 1159 Finished Rec Room? Crawl Space (1.81sb.()		
General Contractor Information Crawl Space (4-Stab ()		
Stancil Buildord To-		
Telephone Telephone		
Addess 466 Stancil Rd., Angier, NC 27501 034533		
License #		
Signature of Owner/Contractor/Officer(s) of Corporation Must sign & fill out second page		
Residential Service Size: 200 Amps Their was the		
Electrical, Inc. 919-639-2073		
Telephone 13075 I		
AZQUESS 13013-11		
License #		
Signature of Office (s) of Corporation		
Mechanical Permit Information		
Description of Work Residential		
JC's Heating & Air 919-552-6258 Mechanical Contractor's Company Name Telephone		
Telephone 1589 Wade Stephenson Rd., Folly Springs, NC 12655-H3		
License #		
Signature of Office(s) of Opporation		
Description of Work Residential		
A Date		
Barnes Plumbing, Inc. 919-639-0935 Plumbing Contractor's Company Name Talenhors		
PO Box 1207, Angier, NC 27501		
Address		
License #		
Signature of Officer(s) of Corporation		
Insulation Permit Information		
Insulating Inc. 1212 Home Ct., Raleigh, NC 919-772-9000 Insulation Contractor's Company Name & Address 27603 Telephone		
27603 Telephone		

Page 1 of 2

9/07

	t .	
Please answer the following question Questionnaire per G.S. 87-14	wners Applying to Build Their then see a Permit Technician to determine if you regulations as to Issue of Building	Own Home ou qualify for permit under Owners Exemption. Permits (Memo available upon request
1. Do you own the land on wi	ich this building will be constructed	? yes no
Have you hired or intend to project?	hire an individual to superintend a	nd manage construction of the
3. Do you intend to directly co	nrol & supervise construction activ	ities? yes no
4. Do you intend to schedule, done?	contract, or directly pay for all phas	es of construction work to be no
	occupy the building for at least 12 do you understand that if you do no fraudulently secured the permit?	consecutive months following of do so, it creates the
		yesno
Mechanical codes, and the Harne contractors is correct as known to number of bedrooms, building and changes, I certify it is my responsiany and all changes.	thority to make necessary application, near to the regulations in the Bulld of County Zoning Ordinarice. I state me and if any changes occur including trade plans, Environmental Health perbillity to notify the Harnett County Can	ing, Electrical, Plumbing and the information on the above gillsted contractors, site plan.
Signature of Owner/Contractor/Off	cer(s) of Corporation Date	
Affidavit f	or Worker's Compensation N.	
The undersigned applicant being the	e:	C.G.S. 87-14
X General Contractor	OwnerOfficer/Agent of	the Contractor or Owner
Do hereby confirm under penaities set forth in the permit:	of perjury that the person(s), firm(s) or	corporation(s) performing the work
X Has three (3) or more emplo	ees and has obtained workers' compe	ensation insurance to cover them.
Has one (1) or more subcon	ractors(s) and has obtained workers' c	ompensation insurance to cover
X Has one (1) or more subcontrovering themselves.	ractors(s) who has their own policy of v	vorkers' compensation insurance
Has no more than two (2) en	ployees and no subcontractors.	
Vhile working on the project for while parametrissuing the parametrissuing the parametrisment.	ch this permit is sought it is understood equire certificates of coverage of work time during the permitted work from an	that the Central Permitting er's compensation insurance prior by person, firm or corporation
ompany or Name: Stanc	il Builders, Inf.	
ign with the: floor	President	nte: <u>2-00</u> -08
	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
/	Page 2 of 2	

Plan Box Number <u>AA-7</u>

Job Name STANC, L

Date: 2 - 21 - 08

Required Inspections for SFA/SFD

Appl. # 0750017564Valuation \$156,581Sq. Feet 2410

Sequence

•	
10	n+nu. c. d
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
	The second second