\* 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

Application for Building and Trade Permit

Application # 0750017624

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546

Telephone Number 910-893-7525 www.harnett.org

Application		1 12 01
Owner's Name: Biltwel Homes	Inc.	Date: <u>6 · 12 - 01</u>
		Phone: 919 662-1010
Directions to job site from Lillington: 401 No Subdivision on Left "Dayterf	orth Take left	on Chalybeate Spring Re
Subdivision on Left "Daxterf	ild", Deutterfield	Dr. > Pt. on Bundmore, Rt
Subdivision: Dexterfield		_Lot: <u>57</u>
Continue Times (Places Check)	Building Use: (Please	Check)
✓ New Moved House	Residential Modular	Commercial Multi-Family
Renovation Addition Other		<del>_</del>
Total Project Cost: 150,000,000 Description of Genera	Proposed Work: 1501	la single raming smening
Heated SF 1800 Crawl Space ()	Building Construction	Cost \$ /25,000,000 Stories _///2
Unheated SFSlab ( )	Acres Disturbed	
Biltwel Homes Inc.  Building Contractor's Company Name	919462	-1010
		38071
720 Trebor Dr. Garner N	C 21527	License #
Address Willy Livis Selecta	1./a	
Signature Af Owner/Contractor/Officer(s) of Co	orgonation - Must sign back	of form & workers comp
Election of the state of the st	(Living Flectrical Cos	ts 3000,00
TS Pole: Yes ( No ( ) Underground ( ) Permanent Service: Underground ( ) Over	Overhead ( )	IN DO 240 VOITS
Permanent Service: Underground ( Over	head () Service Size:	PARSE 200 Amps
COOKS Electric of NUMC:	919 55 Telephone	7-3460
Electrical Contractor's Company Name	relephone	189107-L
P.O. BOX 999, Fuguar Varina N	CJ Bd6	
Address Cook		
Signature of Officer(s) of Corporation		_
Mecha	mical Permit Informatio	
Number of Units Type System	n <u>Electric</u> Med	hanical Cost \$ 6000 . O
Total Comfort Heating AC: Mechanical Contractor's Company Name	Inc. 911	9 553.0266
Mechanical Contractor's Company Name	Telep	ohone 15822
2840 N.C. 42 West Clayto	NNC 27520	
Address		
Signature of Officer(s) of Corporation		
	bing Permit Information	<u>n</u>
Description of Work New Home Insta Number of Baths 2	Plumbing Co	st \$ 6000.00
Rural Plumbing		9 833-9702
Plumbing Contractor's Company Name		phone
701 East Sixforks Rd., Ra	leigh NC 27609	967
Address .	6	License #
Muchan Broth		
Signature of Officer(s) of Corporation  Insulation Permit Information	tion Residential (Y Oth	er () Not Required ()
lasulating Tax.		
Insulation Contractor's Company Name & Ad	Idress	Telephone

	Application #	
Commercial Job Sprinkler	s must fill out this portion System Information	
Sprinkler Contractor's Company Name	Contact & Telephone	<del></del>
Address	License #	
Signature of Officer(s) of Corporation  Fire Alarm	System Information	
Fire Alarm Contractor's Company Name	Contact & Telephone	
Address	License #	<del></del>
Signature of Officer(s) of Corporation <u>Driveway Access</u> - NC Department of Tra	nsportation Driveway Access/Permit? Yes	No
Homeowners Apply Please answer the following questions then see a Permit To  Questionnaire per G.S. 87-14 Regulations as		
Do you own the land on which this built		
Have you hired or intend to hire an ind the project?	lividual to superintend and manage c	onstruction of
3. Do you intend to directly control & sup	ervise construction activities? ye	s no
4. Do you intend to schedule, contract, o be done?	r directly pay for all phases of constru yes	uction work to
5. Do you intend to personally occupy the following completion of construction and creates the presumption under law that ye	do you understand that if you do not (	months do so, it
Glodico illo procumpuoni anno 19	yes	s no
Sign & date	· · · · · · · · · · · · · · · · · · ·	
I hereby certify that I have the authority to make and that the construction will conform to the representation of the result of	egulations in the Building, Electrical, Pluning Ordinance. I state the information on the changes occur including listed contractors, bermit changes or proposed use changes, I contral Permitting Department of any and all changes.	he above site plan, certify it is

Application	#
Application	т

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

The undersigned a	applicant for Building Permit #	being the:
	General Contractor Owner	
	Officer/Agent of the Contractor or Own	
the work set forth	in the permit:	person(s), firm(s) or corporation(s) performing
	Has/have three (3) or more employee compensation insurance to cover the	s and has/have obtained workers' m.
	Has/have one (1) or more subcontrac compensation insurance to cover the	tors(s) and has/have obtained workers' m.
	Has/have one (1) or more subcontract workers' compensation insurance co	ctors(s) who has/have their own policy of vering themselves.
	Has/have not more than two (2) emp	loyees and no subcontractors.
Department issuinsurance prior to	ing the permit may require certific issuance of the permit and at any the corning out the work	ought it is understood that the Central Permitting cates of coverage of worker's compensation ime during the permitted work from any person,
Firm Name:	wiltwel Homes Inc	
Sign/Title:	Mitwel Homes Inc Carry a Lewis - Sec	utary
Date: <u>6.12-</u>	07 1	0

Plan Box Number 66

Job Name Biltwell Hons

Date: 6-18-07

Required Inspections for SFA/SFD

Appl. # 07-500 17624 Valuation 9153592 Sq. Feet 2364

## 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