

* Each section below to be filled out by whoever performing work. Must be owner or licensed contractor. Address, company name & phone must match information on license.

Application # 17669

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: Home Co Builders Date: 5-30-07

Address: PO Box 727 Dunn NC 28335 Phone: 892-4345

Directions to job site from Lillington: 27 w/ (R) on Haver (TD) on wellstone (R) on Fair Burn

Subdivision: Persimmon Hill Lot: 72

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

Total Project Cost: _____ Description of Proposed Work: _____

General Contractor Information

Heated SF 2224 Crawl Space () Building Construction Cost \$ 91,200
Unheated SF 576 Slab (X) Acres Disturbed _____ Stories 2

Cumberland Homes Telephone 910 892-4345

Building Contractor's Company Name Telephone 59493

Address PO Box 727 Dunn, NC 28335 License # _____

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

Electrical Permit Information

Description of Work New Electrical Cost \$ _____

TS Pole: Yes (X) No () Underground (X) Overhead ()
Permanent Service: Underground (X) Overhead () Service Size: 200 Amps

Wester & Pace Telephone 919-499-5389

Electrical Contractor's Company Name Telephone 1200-76

Address 546 Leslie Dr. Sanford, NC License # _____

Signature of Officer(s) of Corporation
William Wester

Mechanical Permit Information

Description of Work New
Number of Units 1 Type System Heat Pump Mechanical Cost \$ _____

Jacksons Heating + Air Telephone 910-891-5410

Mechanical Contractor's Company Name Telephone 23670

Address PO Box 82 Benson, NC License # _____

Signature of Officer(s) of Corporation
David Jackson

Plumbing Permit Information

Description of Work New
Number of Baths 2 1/2 Plumbing Cost \$ _____

Clower Contract Plumbing Telephone 910-892-1612

Plumbing Contractor's Company Name Telephone 23160

Address PO Box 726 Coats, NC License # _____

Signature of Officer(s) of Corporation
Shawn Clower

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

TRI CITY Insulation 418 Person St. Fay. NC Telephone 910 486-8855

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

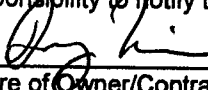
License #

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

5-30-07

Date

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

The undersigned applicant for Building Permit # _____ being the:

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: _____ Home Co Builders

By/Title: _____ Harry Morris

Date: _____ 5-30-07

Plan Box Number AA-1

Job Name CUMBERLAND Homes

Date: 6-4-07

Required Inspections for SFA/SFD

Appl. # 0750017669
Valuation \$181,920
Sq. Feet 2808

Sequence

10	<input checked="" type="checkbox"/>	R* Bldg. Footing
10-30	<input checked="" type="checkbox"/>	R* Elec. Temp Service Pole
20	<input checked="" type="checkbox"/>	R* Building Foundation
20	<input checked="" type="checkbox"/>	Address Confirmation
30-999	<input type="checkbox"/>	Open Floor
30-999	<input checked="" type="checkbox"/>	R* Bldg. Slab Insp.
30-999	<input type="checkbox"/>	R* Elec. Under Slab
30-999	<input checked="" type="checkbox"/>	R*Plumb. Under Slab
40	<input type="checkbox"/>	Four Trade Rough In
40	<input checked="" type="checkbox"/>	Four Trade Rough In > 2500
40	<input type="checkbox"/>	Three Trade Rough In
40	<input type="checkbox"/>	Three Trade Rough In > 2500
40	<input type="checkbox"/>	Two Trade Rough In
40	<input type="checkbox"/>	Two Trade Rough In > 2500
40	<input type="checkbox"/>	One Trade Rough In
40	<input type="checkbox"/>	One Trade Rough In > 2500
50	<input checked="" type="checkbox"/>	R* Insulation
60	<input type="checkbox"/>	Four Trade Final
60	<input checked="" type="checkbox"/>	Four Trade Final > 2500
60	<input type="checkbox"/>	Three Trade Final
60	<input type="checkbox"/>	Three Trade Final > 2500
60	<input type="checkbox"/>	Two Trade Final
60	<input type="checkbox"/>	Two Trade Final > 2500
60	<input type="checkbox"/>	One Trade Final
60	<input type="checkbox"/>	One Trade Final > 2500
999	<input checked="" type="checkbox"/>	Envir. Operations Permit