

* 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 # 17401

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: Waldschmidt, Donna & Robert Date: 20070711
Address: _____ Phone: (910) 308-0377

Directions to job site from Lillington: Old 421 3.5 miles west @ Turn on
Brae Drive .30 miles on @ Lot 11

Subdivision: ROSS, MCRAE, BRAE Lot: 11

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: _____

General Contractor Information

Heated SF _____ Crawl Space Building Construction Cost \$ 220,000
Unheated SF _____ Slab () _____ Acres Disturbed 2.5 Stories 2

Robert Waldschmidt
Building Contractor's Company Name Telephone _____

Address _____ License # _____

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

Electrical Permit Information

Description of Work Electrical Work Electrical Cost \$ 14,000.00

TS Pole: Yes No () Underground Overhead ()
Permanent Service: Underground Overhead () Service Size: 400 Amps

Pioneer Electric & Maintenance Co., Inc.
Electrical Contractor's Company Name Telephone 919-499-7767

80 Mill Thomas Rd Lillington NC 27546 21643-V
Address License #

[Signature]
Signature of Officer(s) of Corporation

Mechanical Permit Information

Description of Work HVAC / new construction Mechanical Cost \$ 12,375.00
Number of Units 2 Type System Heat Pump

J.C.'s Heating & Air Conditioning, Inc.
Mechanical Contractor's Company Name Telephone 919-552-6258

1539 Wade Stephenson Rd Holly Springs NC, 27540 1265543
Address License #

[Signature]
Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work New Res. Const. Plumbing Cost \$ 13,000.00
Number of Baths 5

CFL PLUMBING
Plumbing Contractor's Company Name Telephone 919-612-2102

2501 Cedar Forest Way, Suite 302, Rd, NC 27557 12557
Address License #

[Signature]
Signature of Officer(s) of Corporation

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

Robert C Waldschmidt (910) 308-0377
Insulation Contractor's Company Name & Address Telephone

Commercial Jobs must fill out this portion
Sprinkler System Information

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

Fire Alarm System Information

| | |
|---|------------------------------|
| _____ Fire Alarm Contractor's Company Name | _____ Contact & Telephone |
| _____ Address | _____ License # |
| _____ Signature of Officer(s) of Corporation | |

Driveway Access - NC Department of Transportation Driveway Access/Permit? Yes No

Homeowners Applying to Build Their Own Home

Please answer the following questions then see a Permit Technician to determine if you qualify for permit under Owners Exemption.

Questionnaire per G.S. 87-14 Regulations as to Issue of Building Permits (Memo available upon request)

1. Do you own the land on which this building will be constructed? yes ___ no
2. Have you hired or intend to hire an individual to superintend and manage construction of the project? ___ yes no
3. Do you intend to directly control & supervise construction activities? yes ___ no
4. Do you intend to schedule, contract, or directly pay for all phases of construction work to be done? yes ___ no
5. Do you intend to personally occupy the building for at least 12 consecutive months following completion of construction and do you understand that if you do not do so, it creates the presumption under law that you fraudulently secured the permit? yes ___ no

Sign & date 20070711

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 20070712
Date

**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: Robert L Waddschmidt

Sign/Title: [Signature]

Date: 12 Jul 07

Plan Box Number G-2

Job Name WALDSCHMIDT

Date: 7-16-07

Required Inspections for SFA/SFD

Appl. # 0750017701

Valuation \$ 286,719

Sq. Feet 4413

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 checked="" type="checkbox"/> | Open Floor |
| 30-999 | <input type="checkbox"/> | R* Bldg. Slab Insp. |
| 30-999 | <input type="checkbox"/> | R* Elec. Under Slab |
| 30-999 | <input 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 |