*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.

			07	50017753
ction below to be filled out by performing work. Must be owner d contractor. Address, company hone must match information on	Application # 0750017753 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: Banah	-	NC:	<u>-ما</u> :Date	10-07
111 - 172 LV ~ D	CNNING R	(0)	Phone: <u>4</u>	
mi i i and to inh oite from Lillin	oton 4216.	T-L 0 N Z / 5 M	les Pasto	OAts
T-RONHooges Chapel	· Imile T-R	on Neighbors -	SUB Imile	ONR.
Subdivision: BENNE	H Place	3	Lot:1	
		Building Use: (Please	Check)	
(Cilovation	use Other	✓ Residential Modular	Comme Multi-Fa	rcial ımily
Total Project Cost: 130,000	Description of General	Proposed Work:	on Cost \$ 40	070
Heated SF 1487 Crawl Space Unheated SF 322		Building Construction Acres Disturbed		ories 1 1/2
Building Contractor's Compan	ıv Name	Telephone	7524	F/ 500
173 WED DENNING Address	ug Rd. An	IGIEC N.C. 275	<u>01</u> _s	56520 License #
Signature of Owner/Contractor	or/Officer(s) of Co	rporation – Must sign bac ical Permit Informatio	k of form & worke	rs comp
Description of Work TS Pole: Yes ★ No () Use Permanent Service: Undergr	nderground 💢 ound 💢 Overh	Electrical Co Overhead () nead () Service Size	ost \$	
Mahrys Elect Electrical Contractor's Compa	any Name	Telephone		1507771
Angle C N.C.				License #
Johnny Malry				
Signature of Officer(s) of Colporation Mechanical Permit Information				
Description of Work Number of Units1	Type System	1 Heat Pung Me	echanical Cost	\$ 50000
Radford HVAS	nnany Name		ephone	
Mechanical Contractor's Cor				22024
Address	, , , ,			License #
Signature of Officer(s) of Co	ک rporation Plum	bing Permit Informati	ion	
Description of Work				೦ರಿ ಅ
Number of Baths2	Full		JOST \$	<u> </u>
C.1bert Plumb Plumbing Contractor's Com	pany Name	Te	lephone	
DUNN NIC			10	929 License#
Address				License #
Signature of Officer(s) of Co	rporation Permit Informat	tion Residential()O	Other () Not F	Required ()
Jaten Insu	mothel	Ideas		Talanhana

•	Application #		
Commercial Job Sprinkler	s must fill out this portion 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 <u>Driveway Access</u> - NC Department of Tra	insportation Driveway Access/Permit?	Yes	No
Homeowners Apply Please answer the following questions then see a Permit 1	ring to Build Their Own Home rechnician to determine if you qualify for permit	under Owne	ers Exemption.
Questionnaire per G.S. 87-14 Regulations a	s to Issue of Building Permits (Mem	io available	upon request
1. Do you own the land on which this bui	ilding will be constructed?	yes	no
2. Have you hired or intend to hire an income the project?	dividual to superintend and man —	age con yes	struction o
3. Do you intend to directly control & sup	pervise construction activities? _	yes	no
4. Do you intend to schedule, contract, of be done?	or directly pay for all phases of c —	construct yes	tion work to
5. Do you intend to personally occupy the following completion of construction and	do you understand that if you o	o not do	onths so, it
creates the presumption under law that y	ou fraudulefully secured the per	yes	no
Sign & date			
I hereby certify that I have the authority to make and that the construction will conform to the Mechanical codes, and the Harnett County Zor contractors is correct as known to me and if any	regulations in the Building, Electrication of the Communication of the C	on on the actors, sit	above e plan,

building and trade plans, Environmental Health permit changes or proposed use changes, I certify it my responsibility to notify the Harnett County Central Permitting Department of any and all changes.

Signature of Owner/Contractor/Officer(s) of Corporation

Date

Application #_	
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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 confi	rm under penalties of perjury that the per	rson(s), firm(s) or corporation(s) performing		
	Has/have three (3) or more employees at compensation insurance to cover them.	nd has/have obtained workers'		
	Has/have one (1) or more subcontractors compensation insurance to cover them.	s(s) and has/have obtained workers'		
	Has/have one (1) or more subcontractors workers' compensation insurance coveri	s(s) who has/have their own policy of ng themselves.		
	_ Has/have not more than two (2) employe	es 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:	Brunch Homes In	<u>o.</u>		
Sign/Title:	Crang Byed own	er		
Date:	6.10:07			

Plan Box Number <u>G-6</u>

Job Name BANAH HOMES

Date: 7-12-07

Required Inspections for SFA/SFD

Appl. # 0750017753Valuation # |39,559Sq. Feet 2148

Sequence

R* Bldg. Footing R* Elec. Temp Service Pole
R* Building Foundation
Address Confirmation
Open Floor
R* Bldg. Slab Insp.
R* Elec. Under Slab
R*Plumb. Under Slab
Four Trade Rough In
Four Trade Rough In> 2500
Three Trade Rough In
Three Trade Rough In> 2500
Two Trade Rough In
Two Trade Rough In> 2500
One Trade Rough In
One Trade Rough In > 2500
R* Insulation
Four Trade Final
Four Trade Final > 2500
Three Trade Final
Three Trade Final > 2500
Two Trade Final
Two Trade Final > 2500
One Trade Final
One Trade Final > 2500
Envir. Operations Permit