

* 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 # 18000

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: Pullen Custom Homes, Inc. Date: 7-11-07

Address: 149-H Lagan Ct. Angier NC Phone: 639-9500

Directions to job site from Lillington: Take 240 toward Angier, Turn Left on Harnett Central Rd. Go 1/2 mile to Right @ Bryan Keith Meadows

Subdivision: Bryan Keith Meadows Lot: _____

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

Total Project Cost: 193,000 Description of Proposed Work: New Home

General Contractor Information

Heated SF _____ Crawl Space Building Construction Cost 193,000
Unheated SF _____ Slab () Acres Disturbed _____ Stories 2

William E. Pullen 919-291-7301
Building Contractor's Company Name Telephone

1617 Farm Lake Dr. Holly Springs NC 27540 51723
Address License #

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

Electrical Permit Information

Description of Work New Residential Electrical Cost \$ 5,000.00
TS Pole: Yes No () Underground Overhead ()

Permanent Service: Underground Overhead () Service Size: 200 Amps

Lighthouse Electric, Inc. 919-894-7186
Electrical Contractor's Company Name Telephone

2400 Bailey's Crossroads Rd., Coats, NC 27521 32882-L
Address License #

James Fallan
Signature of Officer(s) of Corporation

Mechanical Permit Information

Description of Work HVAC
Number of Units 2 Type System Heat Pump Mechanical Cost \$ 8,500

Barkley Arnold (919) 557-3454
Mechanical Contractor's Company Name Telephone

P.O. Box 65 Fuquay-Varina NC 27526 18460
Address License #

Barkley Arnold
Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work New Residential
Number of Baths _____ Plumbing Cost \$ 2,000.00

Priority Plumbing Contractors 919-639-7200
Plumbing Contractor's Company Name Telephone

P.O. Box 264 Willow Springs, N.C. 27592 18550 P-1
Address License #

Stephen A. Jaffe
Signature of Officer(s) of Corporation

Insulation Permit Information Residential Other () Not Required ()

Insulation, Inc. 1212 Home Ct Raleigh, NC 27603 919-773-5313
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 _____

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.

Bill Felle / President
Signature of Owner/Contractor/Officer(s) of Corporation

7-11-07
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: Pullen Custom Homes, Inc.

Sign/Title: Bill Pullen / President

Date: 7-11-07

Plan Box Number D-7

Job Name PULLED

Date: 7-12-07

Required Inspections for SFA/SFD

Appl. # 0750018000
Valuation \$175,553
Sq. Feet 2702

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