Harnett County Central Permitting PO Box 65 Lillington, NC 27546 910-893-4759 www.harnett.org

1800L

Owner's Name: Keith Bullock Builders Two. Date: 8 1707		
Owner's Name: Keith Bullock Builde	- NC 2750/ Phone: 715-427-4628	
Address: 702 predock of Ange	- NE 27507 A Lange Pl - 4028	
left on Dextertild Or, - take	ion left on challenge Ed turn	
left on Dexterfield Or take		
subdivision: Dexterfield	Lot: 49	
Construction Type: (Please Check)	Building Use: (Please Check)	
New	Residential	
Renovation	Modular	
Addition	Commercial	
Moved House	Multi-Family	
Other		
Other Description of Proposed Work: Single Fa Total Project Cost: (2500)	w(y	
Total Project Cost: 105,000		
Buildina	Permit Information	
Heated SF /930 Crawl Space (Permit Information Building Construction Cost \$ Acres Disturbed	
Unheated SF 480 Slab (4)	Acres Disturbed . 5 Stories /	
Keith Bullock Builders, Inc.	919-638-7424/ 427-4628	
Building Contractor's Company Name	Telephone	
72 overlook ct. Amer Ni 2750	47504	
Address	License #	
Single of Charles of Conserving		
Signature of Officer(s) of Corporation	and the second of the second o	
. Electrical	Permit Information	
Description of Work New	Electrical Cost \$	
TS Pole: Yes (4) No () Underground (4)	Overheard ()	
Permanent Service: Underground () Overhe	ead () Service Size: Amos	
Rex Dean Electrical	919-552-4282	
Electrical Contractor's Company Name	NC Telephone 5748	
8039 Kennelver and Willow Springer	License #	
Address Rex Dean Signature of Officer(s) of Corporation	riceuse #	
Signature of Officer(s) of Corporation		
Signature of Officer(s) or Corporation		
Mechanica	al Permit Information	
Description of Work New		
Number of Units Type System _	Mechanical Cost \$	
Yours Electric INC.	639-2297	
Mechanical Contractor's Company Name	Telephone H04469	
PO BOX 398 Agier NC	License #	
Address Tellhour	Cicelise #	
Signature of Officer(s) of Corporation	 -	
Signature of smooth of the contraction		
, , Plumbing	Permit Information	
Description of Work New		
Number of Baths	Plumbing Cost \$	
WEW Plumber Co, INC.	638-0195	
Plumbing Contractor's Company Name	Telephone	
PO Box 1004 Angree, NC	14087	
Address	License #	
Signature of Officer(s) of Corporation		
Signature of Oliforday of Corporation		
Insulation Permit Information		
Residential (/) Other () Not Required ()		
Insulative In:	Address Telephone	
Insulation Contractor's Company Name	Address Telephone	

Sprinkler System Information

Sprinkler Contractor's Company Name	Telephone
Contact Person	
Address	License #
Signature of Officer(s) of Corporation Fire Alarm S	ystem Information
Fire Alarm Contractor's Company Name	Telephone
Contact Person	
Address	License #
Signature of Officer(s) of Corporation Drivey	vay Access
NC Department of Transportation Driveway Acces	s/Permit? Yes No
I hereby certify that I have the authority to make correct and that the construction will conform Plumbing and Mechanical codes, and the Har information on the above contractors is correct as above contractors I certify it is pay responsibility to of any changes.	to the regulations in the Building, Electrical, method County Zoning Ordinance. I state the sknown to me and if any changes occur in the protections Division Section 1970
Signature of Owner/Contractor/Officer(s) of Corpo.	ration 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	er
Do hereby confirm under penalties of perjury that performing the work set forth in the permit:	the person(s), firm(s) or corporation(s)
Has/have three (3) or more employees compensation insurance to cover them	
Has/have one (1) or more subcontract compensation insurance to cover them	ors(s) and has/have obtained workers' n.
Has/have one (1) or more subcontraction workers' compensation insurance covers	ors(s) who has/have their own policy of ering themselves.
Has/have not more than two (2) emplo	yees and no subcontractors.
While working on the project for which this permit is Permitting Department issuing the permit may requ compensation insurance prior to issuance of the permit from any person, firm or corporation carrying out the working the permit from any person, firm or corporation carrying out the working the permit is permit in the permit from any person, firm or corporation carrying out the working the permit is permit is permit is permit in the permit in the permit is permit in the permit is permit in the permit in the permit in the permit is permit in the permi	ire certificates of coverage of worker's and at any time during the permitted work rk.
Firm Name: Leth Bullock Builders,	LVC.
By/Title: President	
Date: 8-17-07	

Crawl

Plan Box Number 3

Job Name Bullock

Date: 8-20-07

Required Inspections for SFA/SFD

Appl. # 07-50018 004 Valuation 158985 Sq. Feet 2447

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 > 2500
60	Two Trade Final > 2500
60	One Trade Final > 2500
60	One Trade Final > 2500
999	_ _ _ _
	Envir. Operations Permit