

\* 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 #

18007

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: Serenity Built Homes Date: 8-23-07  
Address: P.O. Box 1417 Lillington N.C. 27546 Phone: 910-893-2462  
Directions to job site from Lillington: 27 to coats left on Hwy 55 towards Arisier turn Right on Syllas Hays then 2nd entrance into Hunter's Point turn Right Hous in euidrac  
Subdivision: Hunter's Point Lot: 24

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

Total Project Cost: 130,000.00 Description of Proposed Work: \_\_\_\_\_

**General Contractor Information**

Heated SF 1495 Crawl Space  Slab ( ) Building Construction Cost \$ 130,000.00  
Unheated SF 197 Acres Disturbed \_\_\_\_\_ Stories \_\_\_\_\_

Serenity Built Homes, Inc. 910-893-2462  
Building Contractor's Company Name Telephone  
P.O. Box 1417 Lillington N.C. 27546 63787  
Address License #

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

**Electrical Permit Information**

Description of Work New Const. Electrical Cost \$ \_\_\_\_\_  
TS Pole: Yes (x) No ( ) Underground ( ) Overhead ( )  
Permanent Service: Underground (x) Overhead ( ) Service Size: 200 Amps

Patrick C. Burgess 893-5774  
Electrical Contractor's Company Name Telephone  
1309 N Main St 49104  
Address License #

Patrick Burgess  
Signature of Officer(s) of Corporation

**Mechanical Permit Information**

Description of Work HVAC Mechanical Cost \$ 4000.00  
Number of Units \_\_\_\_\_ Type System \_\_\_\_\_

J+M Htg & Air, Inc. 910-897-5501  
Mechanical Contractor's Company Name Telephone  
724 Turlington Rd Durham, NC 27834 17164  
Address License #

Kent Johnson  
Signature of Officer(s) of Corporation

**Plumbing Permit Information**

Description of Work New Const Plumbing Cost \$ 5,500.00  
Number of Baths 2

Celery's Plumbing 919-894-1813  
Plumbing Contractor's Company Name Telephone  
8991 NC 27 east Benson NC 27504 17405  
Address License #

Dora Caldwell - Corp Sec.  
Signature of Officer(s) of Corporation

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

Insulation Inc.  
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.

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

8-23-07  
Date

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

The undersigned applicant for Building Permit # \_\_\_\_\_ being the:

- \_\_\_\_\_ General Contractor
- \_\_\_\_\_ Owner
- X   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.

  X   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: Serenity Built Homes, Inc

Sign/Title: Kan Rawson

Date: 8-23-07

Plan Box Number C-5

Job Name SERENITY

Date: 7-12-07

Required Inspections for SFA/SFD

Appl. # 0750018007

Valuation \$138,454

Sq. Feet 2131

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