

**Application for Building and Trade Permit**

Owner's Name: Whitewater Builders Date: 8-06-07  
Address: 1055 Tilghman Rd Dunn, NC 28334 Phone: (919) 427-8464  
Directions to job site: \_\_\_\_\_

Subdivision: Cane Mill Estates Lot: # 11  
Construction Type: (Please Check)  New  Renovation  Addition  Moved House  Other \_\_\_\_\_  
Building Use: (Please Check)  Residential  Modular  Commercial  Multi-Family

Description of Proposed Work: \_\_\_\_\_  
Total Project Cost: 350,000.00  
House 2950 Garage 590 4 Bedrooms 3 1/2 Baths

Blind Cost \$ \_\_\_\_\_  
Address: 1055 Tilghman Rd Dunn, NC 28334 Telephone: 919-5591-4860 (M) (919) 427-8464  
License # 48607  
Signature of Officer(s) of Corporation: [Signature]

**Electrical Permit Information**

Description of Work: Wiring New Loads Electrical Cost \$ \_\_\_\_\_  
TS Pole: Yes ( ) No ( ) Underground ( ) Overhead ( )  
Permanent Service: Underground ( ) Overhead ( ) Service Size: 200 Amps  
Electrical Contractor's Company Name: Beasley's Heating & Repair Serv Telephone: 919-894-3139  
Address: 143 McNair Rd Benson NC 27504 License #: 20256-1  
Signature of Officer(s) of Corporation: Johnny H. Beasley

**Mechanical Permit Information**

Description of Work: Install HVAC  
Number of Units: 2 Type System: Heat Pumps Mechanical Cost \$ \_\_\_\_\_  
Mechanical Contractor's Company Name: Beasley's Heating & A/C, Inc. Telephone: 919-894-4248  
Address: 57 W.C. Beasley Ln Coats, N.C. 27521 License #: 9497  
Signature of Officer(s) of Corporation: R. Brent Beasley

**Plumbing Permit Information**

Description of Work: NEW Plumbing  
Number of Baths: 2 1/2 Plumbing Cost \$ \_\_\_\_\_  
Plumbing Contractor's Company Name: Steven Stanley Plumbing Telephone: 919-894-1884  
Address: 1257 Banner Elk Rd License #: 20013  
Signature of Officer(s) of Corporation: Steve A. Stanley

**Insulation Permit Information**

Residential ( ) Other ( ) Not Required ( )  
Insulation Contractor's Company Name: Tatum Insulation Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

**Commercial Jobs must fill out this portion**  
**Sprinkler System Information**

\_\_\_\_\_  
Sprinkler Contractor's Company Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Signature of Officer(s) of Corporation

\_\_\_\_\_  
Contact & Telephone

\_\_\_\_\_  
License #

**Fire Alarm System Information**

\_\_\_\_\_  
Fire Alarm Contractor's Company Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Signature of Officer(s) of Corporation

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

**Homeowners Applying to Build Their Own Home**

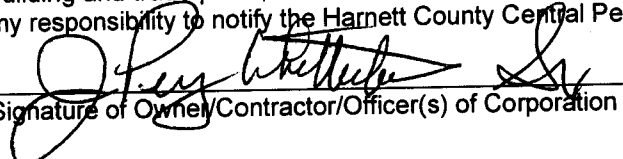
Please answer the following questions then see a Permit Technician to determine if you qualify for permit under Owners Exemption.

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.

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

8-06-07  
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: Whitenton Builders Enterprises LLC

Sign/Title: J. Perry Watters Presi

Date: 8-06-07

Plan Box Number I-3

Job Name WHITTENTON

Date: 8-7-07

Required Inspections for SFA/SFD

Appl. # 0750018138  
Valuation \$223,502  
Sq. Feet 3440

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

HARNETT COUNTY PUBLIC UTILITIES

8/16/07, 9:44:46

CUSTOMER SERVICE APPLICATION

USER ID JDAVIS

**NAME** WHITTENTON BUILDERS  
**ADDRESS** 1055 TILGHMAN RD  
 DUNN NC 28334

**CUSTOMER ID** 19973  
**OLD ACCOUNT NUMBER**  
 012401052

EXEMPT TAX **NO** PENALTY **NO**  
 CASH ONLY **NO**

**SERVICE ADDRESS** 321 PLANTERS LN  
**CYCLE/ROUTE** 09 20  
**LOCATION ID** 85265  
 02

INITIATION DATE 8/16/07  
 JURISDICTION HARNETT COUNTY  
 INSIDE UNITS 1.00  
 SOCIAL SECURITY NUMBER  
 DOING BUSINESS AS  
 ALT CUSTOMER ID 2

CLASS RESIDENTIAL  
 SECTION EAST CENTRAL  
 DRIVERS LIC NUMBER

WATER METERED METERED RATE UNITS 1.00  
 METER NUMBER CME011

**SERVICE ORDERS**

161675 TO TURN ON

WA REQUEST DATE 8/16/07

**MISC. INFORMATION**

OLD ACC # 01240105200  
 WORK PHONE 9108945591  
 EMPLOYER BUILDER  
 EMPADDRESS DUNN

7/30/01  
 7/30/01

*Released per Jaime  
 SD was put back on hold  
 due to leaks per Tim  
 but OK to issue*