

* 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 # _____
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: WM Kent Pierce Inc Date: 8/20/07

Address: PO BOX 42535 FAYETTEVILLE NC 28309 Phone: 910-424-1294

Directions to job site from Lillington: NC 27 to Laurel Valley

sp to Rainwood Place - lot on right

Subdivision: Laurel Valley Lot: 12

Construction Type: (Please Check)

New Moved House
 Renovation Addition Other

Building Use: (Please Check)

Residential Commercial
 Modular Multi-Family

Total Project Cost: 146,300 Description of Proposed Work: new construct

General Contractor Information

Heated SF 2412 Crawl Space

Unheated SF 572 Slab

Building Construction Cost \$ 123,100.00

Acres Disturbed .36 Stories 2

WM KENT PIERCE INC

910-424-1294

Building Contractor's Company Name

Telephone

PO BOX 42535 FAYETTEVILLE NC 28309

29733

Address

License #

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

Electrical Permit Information

Description of Work new construct Electrical Cost \$ 3210.00

TS Pole: Yes No Underground Overhead

Permanent Service: Underground Overhead Service Size: 200 Amps

JRN ELECTRIC

910-424-0264

Electrical Contractor's Company Name

Telephone

2753 LAKE UPCHURCH DR PARKTON NC 28371

09132

Address

License #

[Signature]
Signature of Officer(s) of Corporation

Mechanical Permit Information

Description of Work new construct
Number of Units 2 Type System heat pump Mechanical Cost \$ 6150.00

JONES & JONES HEATING AND AIR

910-424-7702

Mechanical Contractor's Company Name

Telephone

5217 MARRACCO DRIVE HOPE MILLS NC 28348

11814

Address

License #

[Signature]
Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work new construct
Number of Baths 2 1/2 Plumbing Cost \$ 6050.00

LARRY LEE PLUMBING

910-424-1766

Plumbing Contractor's Company Name

Telephone

6417 BAROUR LAKE RD FAYETTEVILLE NC 28306

05274

Address

License #

[Signature]
Signature of Officer(s) of Corporation

Insulation Permit Information Residential Other Not Required

CUMBERLAND INSULATION FAYETTEVILLE NC

910-484-7118

Insulation Contractor's Company Name & Address

Telephone

Application # _____

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.

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

8/29/07

Date

Application # _____

**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: WM KENT PIERCE INC

Sign/Title: *W. Kent Pierce - President*

Date: 8/20/07

CRAWL

Thompson

Plan Box Number 08

Job Name Kent Pierce

Date: 8-23-07

Required Inspections for SFA/SFD

Appl. # 07-50818314
Valuation \$193940
Sq. Feet 2985

Sequence

10	<input checked="" type="checkbox"/>	R* Bldg. Footing
10-30		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	<input checked="" type="checkbox"/>	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	<input checked="" type="checkbox"/>	R* Insulation
60		Four Trade Final
60	<input checked="" type="checkbox"/>	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	<input checked="" type="checkbox"/>	Envir. Operations Permit