

18372

* 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
Phone 910-893-7525 Fax 910-893-2793 www.harnett.org
Application for Building and Trades Permit

Owner's Name: RAM Development INC Date: _____

Site Address: 86 Carolina Oaks Cir Phone: 910-323-4301

Directions to job site from Lillington: 401 S. to Elliott Bridge Rd. to

Willowus Rd Sub on right

Subdivision: Carolina Oaks Lot: 4

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

Total Project Cost: _____ Description of Proposed Work: Residential Home

Heated SF 1644 Unheated SF 396 Finished Rec Room? N/A Crawl Space () Slab

General Contractor Information Building Cost \$ _____
Building Contractor's Company Name: EIK Ridgecat Southview Telephone: 910-323-4301

Address: 100-4 Bradford Ave Fayetteville NC 28301 License #: 3696 U

Signature of Owner/Contractor/Officer(s) of Corporation: William Howell Must sign second page & fill out third page

Electrical Permit Information Elec Cost \$ _____
Description of Work: New Const. Service Size: _____ Amps #TPoles _____

Electrical Contractor's Company Name: ALLMAN ELECTRIC CORP Telephone: 485-8617

Address: 345 Wilkes Rd Fayetteville License #: 6136 U

Signature of Officer(s) of Corporation: James West Byrd

Mechanical Permit Information Mech Cost \$ _____
Description of Work: New Constr. # Units: 1

Mechanical Contractor's Company Name: TRAVIS AIR Heating + Cooling Telephone: 910-322-2500

Address: 2247 Wade - Stedman NC 28221 License #: 28330

Signature of Officer(s) of Corporation: Kevin

Plumbing Permit Information Plumb Cost \$ _____
Description of Work: New Constr. # Baths: 2

Plumbing Contractor's Company Name: Vence Johnson Plumbing Co. Inc. Telephone: 910-424-6712

Address: 3242 Midline Drive Fayetteville, N.C. 28306 License #: 7756 P1

Signature of Officer(s) of Corporation: William Bonnell

Insulation Permit Information Telephone: 483-8191

Insulation Contractor's Company Name & Address: Born-Rite Insulation Co.

Address: 3737 Clinton Rd. Fayetteville, N.C. 28301
Signature: Don Williams

All Attach

All Attach

**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.

Allen McCall

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

8-30-07

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: Ran Development Inc

Sign/Title: Allen Meull p President

Date: 8-30-07

Plan Box Number F-7

Job Name RAM

Date: 8-30-07

Required Inspections for SFA/SFD

Appl. # 0750018372

Valuation \$132,542

Sq. Feet 2040

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 checked="" type="checkbox"/>	Four Trade Rough In
40	<input 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 checked="" type="checkbox"/>	One Trade Rough In > 2500
50	<input type="checkbox"/>	R* Insulation
60	<input checked="" type="checkbox"/>	Four Trade Final
60	<input 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



Ram Development

100-4 Bradford Ave.
Fayetteville, NC 28305
910-323-4301 Fax 910-323-1471

February 06, 2008

To Whom It May Concern:

We are changing the following contractor(s) for permit # 07-50018372

Address 86 Carolina Oaks Circle.

Electrical – From Allman Electric to Julian Rain

Mechanical – From _____ to _____

Plumbing – From Vance Johnson Plumbing to Earlis Jones Plumbing

Please see attached revised Application for Building and trade permit.

Thank you,

Patricia Oliphant
Construction Coordinator

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Directions to job site from Lillington: S. 401-D Elliff/Bridge Rd
to Willowus Rd

Subdivision: Carolina Oaks Lot: 4

Construction Type: (Please Check)

New Moved House
 Renovation Addition Other

Building Use: (Please Check)

Residential Commercial
 Modular Multi-Family

Total Project Cost: _____ Description of Proposed Work: _____

Heated SF _____ Unheated SF _____ Finished Rec Room? _____ Crawl Space () Slab ()
General Contractor Information Building Cost \$ _____

Building Contractor's Company Name _____ Telephone _____

Address _____ License # _____

Signature of Owner/Contractor/Officer(s) of Corporation _____ Must sign second page & fill out third page

Electrical Permit Information Elec Cost \$ _____
Description of Work Electrical Service Size: 200 Amps #TPoles 2

Julian Bain Electrical Contractor 818-4125
Electrical Contractor's Company Name Telephone

2772 School Road Hope Mills, NC 28348 59816
Address License #

Julian Bain
Signature of Officer(s) of Corporation

Mechanical Permit Information Mech Cost \$ _____

Description of Work HVAC # Units _____

Julian Bain 910-425-6008
Mechanical Contractor's Company Name Telephone

1839 The Woodland Road Hope Mills, NC 184207-43
Address License #

Julian Bain
Signature of Officer(s) of Corporation

Plumbing Permit Information Plumb Cost \$ _____

Description of Work Plumbing # Baths _____

Earlise Jours Plumbing
Plumbing Contractor's Company Name Telephone

PO Box 64777 Fayetteville NC 28304 41610
Address License #

Earlise Jours
Signature of Officer(s) of Corporation

Insulation Permit Information

Insulation Contractor's Company Name & Address _____ Telephone _____