

Plan Box Number F-7

Job Name RAM

Date: 8-30-07

Required Inspections for SFA/SFD

Appl. # 0750018373

Valuation 147,810

Sq. Feet 2275

Sequence

10	<u>✓</u>	R* Bldg. Footing
10-30	<u>✓</u>	R* Elec. Temp Service Pole
20	<u>✓</u>	R* Building Foundation
20	<u>✓</u>	Address Confirmation
30-999		Open Floor
30-999	<u>✓</u>	R* Bldg. Slab Insp.
30-999		R* Elec. Under Slab
30-999	<u>✓</u>	R* Plumb. Under Slab
40	<u>✓</u>	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	<u>✓</u>	R* Insulation
60	<u>✓</u>	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	<u>✓</u>	One Trade Final > 2500
999	<u>✓</u>	Envir. Operations Permit

* Each section below to be filled out by who ever performing work. Must be owner or licensed contractor. Address, company name & phone must match information on license.

Application # 18373

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: 306 Carolina Oaks Cir. Phone: 910-323-4301

Directions to job site from Lillington: 401 South to Elliott Bridge Rd to Will Lucas Rd Sub on right

Subdivision: Carolina Oaks Lot: 16

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 1697 Unheated SF 591 Finished Rec Room? Crawl Space () Slab ()

General Contractor Information

Building Cost \$ _____

Elk Ridge at Southview

910-323-4301

Building Contractor's Company Name

Telephone

100-4 Bradford Ave Fayetteville NC 28301

36961U

Address

License #

William Maully

Must sign second page & fill out third page

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

Electrical Permit Information

Elec Cost \$ _____

Description of Work New Const. Service Size: _____ Amps #TPoles _____

ALLMAN ELECTRIC CORP

485-8617

Electrical Contractor's Company Name

Telephone

345 WILKES Rd. Fayetteville

6136U

Address

License #

James David Beard

Signature of Officer(s) of Corporation

Mechanical Permit Information

Mech Cost \$ _____

Description of Work New Constr. # Units 1

TRAVIS AIR Heating + Cooling

910-322-2500

Mechanical Contractor's Company Name

Telephone

2247 Wade - Stedman NC 28291

28330

Address

License #

Richard

Signature of Officer(s) of Corporation

Plumbing Permit Information

Plumb Cost \$ _____

Description of Work New Constr. # Baths 2

Vence Johnson Plumbing Co. Inc.

910-424-6712

Plumbing Contractor's Company Name

Telephone

3242 MidPine Drive Fayetteville, N.C. 28306

7756P1

Address

License #

William R. Buford

Signature of Officer(s) of Corporation

Insulation Permit Information

Blow-Rite Insulation Co

483-8191

Insulation Contractor's Company Name & Address

Telephone

3737 Clinton Rd. Fayetteville, N.C. 28301

Don Willen

Commercial Jobs must fill out this portion	
<u>Sprinkler System Information</u>	
Sprinkler Contractor's Company Name	Contact & Telephone
Address	License #
Signature of Officer(s) of Corporation	
<u>Fire Alarm System Information</u>	
Fire Alarm Contractor's Company Name	Contact & Telephone
Address	License #
Signature of Officer(s) of Corporation	
<u>Driveway Access</u> - 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.

William McCallister
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: William McNeill President

Date: 8-30-07