

\* 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 #

18394

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: TERHUNE HOMES, LLC Date: 9/27/07

Site Address: LOT #9 TAYLOR POINTE Phone: 919-559-1499

Directions to job site from Lillington: HWY 401 N. HWY 42 E.  
LEFT ON TRAVELOE, RT ON SELBY CT.

Subdivision: TAYLOR POINTE Lot: 9

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

Total Project Cost: 80,000 Description of Proposed Work: NEW CONSTRUCTION

Heated SF 1178 Unheated SF \_\_\_\_\_ Finished Rec Room? \_\_\_\_\_ Crawl Space ( ) Slab ( )

**General Contractor Information** Building Cost \$ 80,000

TERHUNE HOMES, LLC 919-559-1499  
Building Contractor's Company Name Telephone

1021 HAZELTON LN, FUQUAY-VARINA NC 27526 55458  
Address License #

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

**Electrical Permit Information** Elec Cost \$ 3,800

Description of Work NEW Service Size: 200 Amps #TPoles 1

AVENUE ELECTRIC 919-971-0653  
Electrical Contractor's Company Name Telephone

P.O. BOX 390 ANGLER, NC 27501 9601-U  
Address License #

[Signature]  
Signature of Officer(s) of Corporation

**Mechanical Permit Information** Mech Cost \$ 3,600

Description of Work NEW # Units 1

HVAC SPECIALISTS 919-552-9549  
Mechanical Contractor's Company Name Telephone

5843 COKEESBURG RD, FUQUAY-VARINA, NC 22035  
Address License #

[Signature]  
Signature of Officer(s) of Corporation

**Plumbing Permit Information** Plumb Cost \$ \_\_\_\_\_

Description of Work NEW # Baths \_\_\_\_\_

AVENUE PLUMBING 919-639-2023  
Plumbing Contractor's Company Name Telephone

P.O. BOX 390 ANGLER, NC 27501 10886  
Address License #

[Signature]  
Signature of Officer(s) of Corporation

**Insulation Permit Information**

INSULATING INC. 919-772-9000  
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**

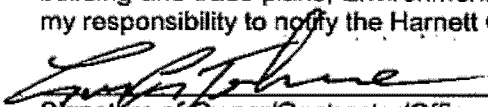
Please answer the following questions then see a Permit Technician to determine if you qualify for permit under Owners Exemption.

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.

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

9/27/07  
\_\_\_\_\_  
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: TERHUNE HOMES, LLC

Sign/Title: [Signature] / PRESIDENT

Date: 9/27/07

✓ 2✓

Plan Box Number C-7

Job Name TERHUNE

Date: 9-27-07

Required Inspections for SFA/SFD

Appl. # 0750018394  
Valuation \$76,536  
Sq. Feet 1178

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 checked="" type="checkbox"/>	R* Bldg. Slab Insp.
30-999	<input checked="" type="checkbox"/>	R* Elec. Under Slab
30-999	<input checked="" type="checkbox"/>	R*Plumb. Under Slab
40	<input checked="" type="checkbox"/>	Four Trade Rough In
40	<input checked="" type="checkbox"/>	Four Trade Rough In > 2500
40	<input checked="" type="checkbox"/>	Three Trade Rough In
40	<input checked="" type="checkbox"/>	Three Trade Rough In > 2500
40	<input checked="" type="checkbox"/>	Two Trade Rough In
40	<input checked="" type="checkbox"/>	Two Trade Rough In > 2500
40	<input checked="" type="checkbox"/>	One Trade Rough In
40	<input checked="" type="checkbox"/>	One Trade Rough In > 2500
50	<input checked="" type="checkbox"/>	R* Insulation
60	<input checked="" type="checkbox"/>	Four Trade Final
60	<input checked="" type="checkbox"/>	Four Trade Final > 2500
60	<input checked="" type="checkbox"/>	Three Trade Final
60	<input checked="" type="checkbox"/>	Three Trade Final > 2500
60	<input checked="" type="checkbox"/>	Two Trade Final
60	<input checked="" type="checkbox"/>	Two Trade Final > 2500
60	<input checked="" type="checkbox"/>	One Trade Final
60	<input checked="" type="checkbox"/>	One Trade Final > 2500
999	<input checked="" type="checkbox"/>	Envir. Operations Permit