* 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 # 0750018535

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 Date: 10-03-07 Owner's Name: terorises Woods Subdivision Phone: 910 -303-1967 10 South Directions to job site from Lillington: H Subdivision Construction Type: (Please Check) Building Use: (Please Check) **Moved House** ✓ Residential Commercial Renovation _ Addition Other Modular Multi-Family Total Project Cost: 130,000 Description of Proposed Work: 5+ant to Finish Heated SF 1501 Unheated SF 80% Finished Rec Room? Crawl Space (Slab () General Contractor Information Building Cost \$ 110,000 910 - 893 -CONSTATION **Building Contractor's Company Name** Telephone Front St Address Must sign second page & fill out third page Signature of Owner/Contractor/Officer(s) of Corporation Description of Work Rough 11 - Trim out Service Size: 200 Amps # Amps #TPoles Tayis Dawson Electrical Contractor's Company Name Telephone Fuguer Varina, NC 27526 136 Thornburg LA Signature of Officer(s) of Corporation Mechanical Permit Information Mech Cost \$ 5,200 # Units 910-897-5501 Heating + Air Mechanical Contractor's Company Name Telephone Turlington Road, Dunn NC Address License # Signature of Officer(s) of Corporation Plumbing Permit Information Plumb Cost \$ 4,500 910-891-Telephone Address License # Manel Signature of Officer(s) of Corporation **Insulation Permit Information**

Insulation Contractor's Company Name & Address

Telephone

	Application #	·		
	s must fill out this portion 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 <u>Driveway Access</u> - NC Department of Transportation Driveway Access/Permit? Yes				
Homeowners Applyir Please answer the following questions then see a Permit Ter	ng to Build Their Own Home chnician to determine if you qualify for permit under Owne	ers Exemption.		
Questionnaire per G.S. 87-14 Regulations as	to Issue of Building Permits (Memo available	e upon request)		
1. Do you own the land on which this build	ding will be constructed? yes	no		
2. Have you hired or intend to hire an individue the project?	vidual to superintend and manage con yes			
Do you intend to directly control & supervise construction activities? yes no				
4. Do you intend to schedule, contract, or be done?	directly pay for all phases of construct	tion work to		
5. Do you intend to personally occupy the following completion of construction and decreates the presumption under law that you	o you understand that if you do not do	onths so, it		
	yes	no		
Sign & date				
I hereby certify that I have the authority to make reand that the construction will conform to the regmechanical codes, and the Harnett County Zonin contractors is correct as known to me and if any coulding and trade plans, Environmental Health permy responsibility to notify the Harnett County Centre.	gulations in the Building, Electrical, Plumbir g Ordinance. I state the information on the changes occur including listed contractors, site rmit changes or proposed use changes, I cert	ng and above e plan, ify it is		

Date

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

Application	#	

Affidavit for Worker's Compensation N.C.G.S. 87-14

The undersigned ap	plicant for Building Permit #	being the:
	neral Contractor	*
	icer/Agent of the Contractor or Owner	
Do hereby confirm the work set forth in	under penalties of perjury that the pers the permit:	son(s), firm(s) or corporation(s) performing
	as/have three (3) or more employees an mpensation insurance to cover them.	d has/have obtained workers
	as/have one (1) or more subcontractors(mpensation insurance to cover them.	s) and has/have obtained workers'
	ns/have one (1) or more subcontractors(orkers' compensation insurance covering	
Ha	s/have not more than two (2) employee	s and no subcontractors.
Department issuing insurance prior to is	the permit may require certificates	it is understood that the Central Permitting of coverage of worker's compensation uring the permitted work from any person,
Firm Name:	`	
Sign/Title:	Worm	
Date:	•	

Plan Box Number F-9

Job Name MILTON ENTERPRISE

Date: 10-3-07

Required Inspections for SFA/SFD

Appl. # 0750018535 Valuation \$ 127, 409 Sq. Feet 1961

Sequence

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