\* 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

## Application # 0750019604

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
Phone 910-893-7525 Fax 910-893-2793 www.hamett.org **Application for Building and Trades Permit** 

Owner's Name: Wywn Canstruction	Date: 10-18-07	
Site Address: 140 Sward Loop Broadway N/C 2305 Phone:	919 426 5560 Terry Gilbert	
Directions to job site from Lillington: 27 w		
Subdivision:	Lot:9	
Construction Type:       (Please Check)       Building Use:       (Please Check)         ✓ New       Moved House       ✓ Residential         Renovation       Addition       Other	heck) Commercial Multi-Family	
Total Project Cost: 108000 Description of Proposed Work: New A	tone	
Heated SF /164 Unheated SF O Finished Rec Room? MO General Contractor Information Building Cost	Crawl Space () Slab ( )	
Wyww Construction 919 52  Building Contractor's Company Name Telephone	-89257	
Address Address	License #	
Signature of Owner/Contractor/Officer(s) of Corporation	page & fill out third page	
Electrical Permit Information Elec Cost \$	Amps #TPoles <u>Ve 5</u>	
R.A. Jacksov Electric 919 730  Electrical Contractor's Company Name Telephone	125/	
414 Pine Dr Four Oaks NC 27524 Address	2/14/9 License #	
Signature of Officer(s) of Corporation		
Mechanical Permit Information Mech Cost \$_		
	#Units	
Stephensum #tc + Alm  Mechanical Contractor's Company Name  Telépho	one	
1051-B Honey cutt Rd. Bonsau N. C. 27504 Address		
Signature of Officer(s) of Corporation		
Plumbing Permit Information Plumb Cost \$_		
Description of Work New Construction	# Baths 2	
Plumbing Contractor's Company Name  Plumbing Contractor's Company Name  7/6  Telepho	9 556 6082	
310 Boardwelk Dr Youngsville NC 27595 Address		
R.D. White		
Signature of Officer(s) of Corporation Insulation Permit Information		
Tatom Dralation	(41 0999	
Insulation Contractor's Company Name & Address	Telephone	

Application #		
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)		
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?		
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		
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, number of bedrooms, 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  Date		
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant 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 three (3) or more employees and has obtained workers' compensation insurance to cover them.		
Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them.		
Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance covering themselves.		
Has no 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.

Company or Name: Wyww Construction

Sign w/Title: Superingedut

Date: 10-18-07

## Plan Box Number E-7

Job Name WYNN

Date: 10 - 4 - 07

## Required Inspections for SFA/SFD

Appl. # 07500/8604 Valuation # 88, 491 Sq. Feet 1362

## Sequence

10	R* Bldg. Footing
10-30	R* Elec. Temp Service Pole
20	R* Building Foundation
20	Address Confirmation
30-999	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	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	R* Insulation
60	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	One Trade Final > 2500
999	Envir. Operations Permit
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