

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 # 18754  
Harnett County Central Permitting  
PO Box 65 Lillington, NC 27546  
Telephone Number 910-893-7525 www.harnett.org

**Application for Building and Trade Permit**

Owner's Name: Raynor Builders Inc. Date: 10-25-07

Address: 360 N Raleigh St Angier N.C. 27501 Phone: 639-3012

Directions to job site from Lillington: 401 N 7 miles - TL on Chalybeate Rd. Sub on left 1/4 mile.

Subdivision: Dexterfield Lot: 46

Construction Type: (Please Check)

New  Moved House  
 Renovation  Addition  Other

Building Use: (Please Check)

Residential  Commercial  
 Modular  Multi-Family

Total Project Cost: 150,000 Description of Proposed Work: SFD

**General Contractor Information**

Heated SF 2336 Crawl Space   
Unheated SF      Slab

Building Construction Cost \$ 150,000.00  
Acres Disturbed 1/4 Stories 1.5

Raynor Builders Inc.  
Building Contractor's Company Name

639-3012  
Telephone

301 N Raleigh St. Angier N.C. 27501  
Address

40079  
License #

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

**Electrical Permit Information**

Description of Work      Electrical Cost \$     

TS Pole: Yes  No  Underground  Overhead

Permanent Service: Underground  Overhead  Service Size: 200 Amps

Mabry's Electrical Service  
Electrical Contractor's Company Name

639-4837  
Telephone

Angier N.C.  
Address

150777 L  
License #

[Signature]  
Signature of Officer(s) of Corporation

**Mechanical Permit Information**

Description of Work      Mechanical Cost \$     

Number of Units 2 Type System split

JCS Heating & Air Mechanical Contractor's Company Name Heat Pump 557-3053

Holly Springs N.C. Telephone 126554-3

[Signature] Address      License #     

Signature of Officer(s) of Corporation

**Plumbing Permit Information**

Description of Work      Plumbing Cost \$     

Number of Baths 2

Barnes Plumbing Plumbing Contractor's Company Name 639-3401

Angier N.C. Telephone 17735

[Signature] Address      License #     

Signature of Officer(s) of Corporation

**Insulation Permit Information**

Residential  Other  Not Required

Jatum Insulation Insulation Contractor's Company Name GARNER N.C.

     Address      Telephone

**Sprinkler System Information**

|   |                    |
|---|--------------------|
| _____<br>Sprinkler Contractor's Company Name    | _____<br>Telephone |
| _____<br>Contact Person                         |                    |
| _____<br>Address                                | _____<br>License # |
| _____<br>Signature of Officer(s) of Corporation |                    |

**Fire Alarm System Information**

|   |                    |
|---|--------------------|
| _____<br>Fire Alarm Contractor's Company Name   | _____<br>Telephone |
| _____<br>Contact Person                         |                    |
| _____<br>Address                                | _____<br>License # |
| _____<br>Signature of Officer(s) of Corporation |                    |

**Driveway Access**

NC Department of Transportation Driveway Access/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, 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 10-25-07

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

The undersigned applicant for Building Permit # \_\_\_\_\_ being the:

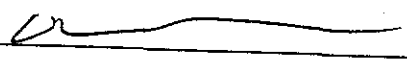
- General Contractor
- Owner
- Officer/Agent of the Contractor or Owner

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: RAYNOC BUILDERS INC.

Sign/Title: OWNER 

Date: 10-25-07

Plan Box Number G-4

Job Name RAYNOR

Date: 11-8-07

Required Inspections for SFA/SFD

Appl. # 0750018756  
Valuation \$ 181,119  
Sq. Feet 2756

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