* Æach section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address, company name & phorne must match information on license.

Application # 07.500 18766

Harnett County Central Permitting

PO Box 65 Lillington, NC 27546 910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Application for Residential Building and Trades Permit Owner's Name: HUSTIN Construction and Development, 11C. Site Address: 96 Robert Branch circle Phone: Directions to job site from Lillington: HWV 401 Subdivision on Right (MILL Branch) Subdivision: MILL BRANCH Lot: 22 Description of Proposed Work: <u>NEW HOME</u> #Bedrooms: 3 Heated SF 2500 Unheated SF ____ Finished Rec Room? ____ Crawl Space M Slab () General Contractor Information . 919-417-1747 Telephone **Building Contractor's Company Name** Holly Springs NC 27540 · 1807 Farm Lake Drive Must sign & fill out second page Signature of Owner/Contractor/Officer(s) of Corporation **Electrical Permit Information** Description of Work ____ Service Size: Amps TPole: yes/no Electrical Contractor's Company Name Telephone Address License # Signature of Officer(s) of Corporation **Mechanical Permit information** Description of Work ____ Mechanical Contractor's Company Name Telephone Address License # Signature of Officer(s) of Corporation **Plumbing Permit Information** Description of Work _____ # Baths_____ Plumbing Contractor's Company Name Telephone Address License # Signature of Officer(s) of Corporation **Insulation Permit Information** Insulation Contractor's Company Name & Address Telephone

Application	#

Homeowners Applying to Build Their Own Home Please answer the tollowing questions then see a Permit Technician to determine if you quality 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
Have you hired or intend to hire an individual to superintend and manage construction of the project? yesno
Do you intend to directly control & supervise construction activities?yes no
Do you intend to schedule, contract, or directly pay for all phases of construction work to be 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
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
Doffing offaid Coth member. Austin Construction and Divelopment, 110, 4-2-08
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
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:
Do hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work
Do hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:
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
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
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 provering 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.
Do hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:

Harnett County Central Permitting PO Box 65 Lillington, NC 27546 Telephone Number 910-893-4759

A Application for Building and Trade Permit
Owner's Name: #1/51 in Const + Dr.J. 11C. Date: /1-29-07
Address: Job Wecreek Circle Holly Source 27 Phone: 919-654-5213
Directions to job site. Hry 401 North of Lillington, MILL Branch 2 miles on Rich
Left on Robert Branch Circles lot 22 of Right
Subdivision: MILL Branch Lat 22
New X Residential Modular
A. E. Alle
- Odiniorda)
Moved House Multi-Family Other
Description of Proposed Work:New Home
Total Project Cost: 250,000.00
Total 1 Toject Cost
Building Permit Information
Heated SF < 750 Crawl Space (X) Building Construction Cost \$ 250 Ab
Unheated SF 958Slab () Acres Disturbed Stories / 4
K+ K Haddeson Ruilders Two. 910-893-1012
Building Contractor's Company Name Telephone Telephone 7/888
4119 1840pN/ Flywy Vacin N.C. 27524 4/888
Address #
Turk on
Signature of Officer(s) of Corporation
Electrical Permit Information
Description of Work Wiring of New Const. Electrical Cost \$ 9 600.
(3 Pole: res (4 No () Underground () Overheard ()
Permanent Service: Underground (4) Overhead () Service Size: 200 Amps
Agtaick + Brigess Auc. 910-873-5774
Electrical Contractor's Company Name 1309 North April 1.16 to 2954(1491)
Address License #
Som Strike
Signature of Officer(s) of Corporation
December of West, (Co. L A. Mechanical Permit Information
Description of Work Heat + Air Number of Units 2 Type System electric Mechanical Cost \$ 1,000.55
Number of Units Type System electric Mechanical Cost \$ 1, 500.5
Mechanical Contractor's Company Name Telephone
Mechanical Contractor's Company Name 15-38 Whole Storbondow Roll 1745 H >
Address License #
710 11 50cc N.C. 2 2000
Signature of Officer(s) of Corporation
Plumbing Permit Information
Description of Work ALM bing
Number of Baths 25 8A/25 Plumbing Cost \$ 6,000
Kon Was 910-293-8797
Plumbing Contractor's Company Name Telephone
PO BOY 124 BUIS CIRCK NC 2306 8252
Address License #
Kenneth Wort
Signature of Officer(s) of Corporation
ر ۱۳۰۲ بر میروسی است از ۱۳۰۰ بر ۱۳۰۰ ب
Insulation Permit Information
Residential (*) Other (*) Not Required (*)
INSULATION INC. 1212 Home Ct RALIGIANCE 9/9-7/2-9000
nsulation Contractor's Company Name Address 27/203 Telephone
× 1602

Sprinkler System Information

Sprinkler Contractor's Company Name	Telephone
Contact Person	
Address	License #
Signature of Officer(s) of Corporation	mhana la fanna a st
rire Alarm Sy	stem Information
Fire Alarm Contractor's Company Name	Telephone
Contact Person	
Address	License #
Signature of Officer(s) of Corporation	
<u>Drivew</u>	ay Access
NC Department of Transportation Driveway Access	/Permit? Yes No /
I hereby certify that I have the authority to make correct and that the construction will conform to Plumbing and Mechanical codes, and the Harninformation on the above contractors is correct aincluding listed contractors, site plan, building another changes or proposed use changes, I certify it is not central Permitting Division of any and all changes.	the regulations in the Building, Electrical, ett County Zoning Ordinance. I state the as known to me and if any changes occur to trade plans. Environmental Health permit
Signature of Owner/Contractor/Officer(s) of Corpora	tion Date

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

The undersigned	d applicant for Building Permit # being the:	
	Contractor Owner Officer/Agent of the Contractor or Owner	
Do hereby con performing the w	firm under penalties of perjury that the person(s), firm(s) or corporation(s) ork 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.	
X	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:	Austin Construction and Development Lic.	
	Bobbic DAvid AUSTIM	
Date:	11-29-07	

Plan Box Number £-2

Job Name AUSTIN CONST.

Date: 10-30-07

Required Inspections for SFA/SFD

Appl. # 075061876-6 Valuation#200, 762 Sq. Feet 3090

Sequence

10	
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