\* 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.

ation #	
	ation#

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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** Development In Date: 11-6-07 Owner's Name: Directions to job site from Lillington: to Will Lucius Rd Subdivision: ('AT) INA OA Construction Type: (Please Check) Building Use: (Please Check) \_\_ Moved House \_\_ Commercial Residential Modular \_\_ Multi-Family Renovation \_\_ Addition \_\_ Other Total Project Cost: \_\_\_\_\_ Description of Proposed Work: Kes, dental Construction Heated SF 1717 Unheated SF 616 Finished Rec Room? NA Crawl Space ( ) Slab ( & **General Contractor Information** Building Cost \$ ELK RIJSE a FSouthyrw Building Contractor's Company Name 910-323-4301 Telephone 53688 Fayetteville 29305 Must sign second page & fill out third page Signature of Owner/Contractor/Officer(s) of Corporation **Electrical Permit Information** Elec Cost \$ Service Size: 200 Amps #TPoles / 16/11/28348 Address Signature of Officer(s) of Corporation Mechanical Permit Information Mech Cost \$ Description of Work *9/0- 4/15-60*9 Telephone Mechanical Contractor's Company Name Address Signature of Officer(s) of Corporation Plumbing Permit Information Plumb Cost \$ Earlise Jones Plumb Plumbing Contractor's Company Name PU, BOX 6477 Fey, NC 28306 License# nature of Officer(s) of Corporation **Insulation Permit Information** Cunberland Insulation 4205 Clinton Re 910-484-718
Insulation Contractor's Company Name & Address Fey, NC 28312 Telephone

	Application #	
l e e e e e e e e e e e e e e e e e e e	os must fill out this portion System Information	
Sprinkler Contractor's Company Name	Contact & Telephone	<del></del>
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 Trans	nsportation Driveway Access/Permit? Yes	No
Homeowners Applyi Please answer the following questions then see a Permit To Questionnaire per G.S. 87-14 Regulations as  1. Do you own the land on which this buil	s to Issue of Building Permits (Memo availat	ole upon request)
2. Have you hired or intend to hire an indithe project?	ividual to superintend and manage co yes	nstruction of no
3. Do you intend to directly control & supe	ervise construction activities? yes	no
4. Do you intend to schedule, contract, or be done?	directly pay for all phases of construction directly pay for all phases of construction yes	ction work to
5. Do you intend to personally occupy the following completion of construction and d creates the presumption under law that you	lo you understand that if you do not do ou fraudulently secured the permit?	nonths o so, it no
Sign & date		
I hereby certify that I have the authority to make and that the construction will conform to the re	necessary application, that the application is gulations in the Building, Electrical, Plumb	correct ing and

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 <u>any</u> 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

Application	#	

## 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 confirment the work set forth	m under penalties of perjury that the person(s), firm(s in the permit:	) or corporation(s) performing		
	Has/have three (3) or more employees and has/have o compensation insurance to cover them.	btained workers'		
	Has/have one (1) or more subcontractors(s) and has/haccompensation insurance to cover them.	ave obtained workers'		
	Has/have one (1) or more subcontractors(s) who has/h workers' compensation insurance covering themselves	ave their own policy of		
	Has/have not more than two (2) employees and no sub	ocontractors.		
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:	an Development, INC			
Sign/Title:	Jelim Marily aure			
Date:	0-07			

Plan Box Number AA-10

Job Name RAM DEVELOP

Date: 11-6-07

Required Inspections for SFA/SFD

Appl. # 07500 1883 2 Valuation \$ 147, 160 Sq. Feet 2265

## 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