

Rec + added 12-18-07

Application # 0750018942

\* 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.

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: Beth & Jeremy McLamb Date: 12-18-07  
Address: 2684 Fairground Rd. Coats NC Phone: 910 897 7144

Directions to job site from Lillington: Go through Coats on highway 27 1/2 miles right Fairground Rd on left Corner Fairground & Tilghman Rd.

Subdivision: \_\_\_\_\_ Lot: \_\_\_\_\_

Construction Type: (Please Check)  New  Moved House  Renovation  Addition  Other  
Building Use: (Please Check)  Residential  Commercial  Modular  Multi-Family

Total Project Cost: 255,000 Description of Proposed Work: Single Family Home

**General Contractor Information**

Heated SF 2738 Crawl Space  Building Construction Cost \$ 255,000  
Unheated SF 982 Slab ( ) Acres Disturbed 1 Stories 1 1/2  
Birn Builders LLC Telephone 919 894-5741 Mobil 919 524-5852  
Building Contractor's Company Name Telephone 50541  
6187 NC 27 E Coats NC License # \_\_\_\_\_  
Address

Danny Pallard  
Signature of Owner/Contractor/Officer(s) of Corporation - Must sign back of form & workers comp

**Electrical Permit Information**

Description of Work Total Electric Electrical Cost \$ 4500.00  
TS Pole: Yes  No ( ) Underground  Overhead ( )  
Permanent Service: Underground  Overhead ( ) Service Size: 200 Amps  
Jonathan Beasley Electric Const. Telephone 910 984 6051  
Electrical Contractor's Company Name Telephone  
191 Fred McLeod Lane Coats NC 27521 License # 26739  
Address

Jonathan Beasley  
Signature of Officer(s) of Corporation

**Mechanical Permit Information**

Description of Work HVAC Duct & Units  
Number of Units 1 Type System Heat Pump Mechanical Cost \$ 8000.00  
Beasley's Heating & Air Telephone 919 894 4248  
Mechanical Contractor's Company Name Telephone  
57 WC Beasley Lane Coats NC 27521 License # 9497  
Address

Dave Beasley  
Signature of Officer(s) of Corporation

**Plumbing Permit Information**

Description of Work Rough in & Finish  
Number of Baths 2 1/2 Plumbing Cost \$ 7500.00  
1st Choice Plumbing Telephone 910 897 4458  
Plumbing Contractor's Company Name Telephone  
1140 Turlington Rd Dunn NC 28334 License # 22705  
Address

Larry Avery  
Signature of Officer(s) of Corporation

**Insulation Permit Information** Residential  Other ( ) Not Required ( )

Morzingo Insulating Inc Telephone 919 965 8893  
Insulation Contractor's Company Name & Address Telephone

**Commercial Jobs must fill out this portion  
Sprinkler System Information**

N/A  
 Sprinkler Contractor's Company Name \_\_\_\_\_ Contact & Telephone \_\_\_\_\_  
 Address \_\_\_\_\_ License # \_\_\_\_\_  
 Signature of Officer(s) of Corporation \_\_\_\_\_

**Fire Alarm System Information**

N/A  
 Fire Alarm Contractor's Company Name \_\_\_\_\_ Contact & Telephone \_\_\_\_\_  
 Address \_\_\_\_\_ License # \_\_\_\_\_  
 Signature of Officer(s) of Corporation \_\_\_\_\_

**Driveway Access** - NC Department of Transportation Driveway Access/Permit?      Yes      No

**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)

1. 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?      \_\_\_ 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

Sign & date \_\_\_\_\_

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.

Donny Pellard      12-18-07  
 Signature of Owner/Contractor/Officer(s) of Corporation      Date

**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.

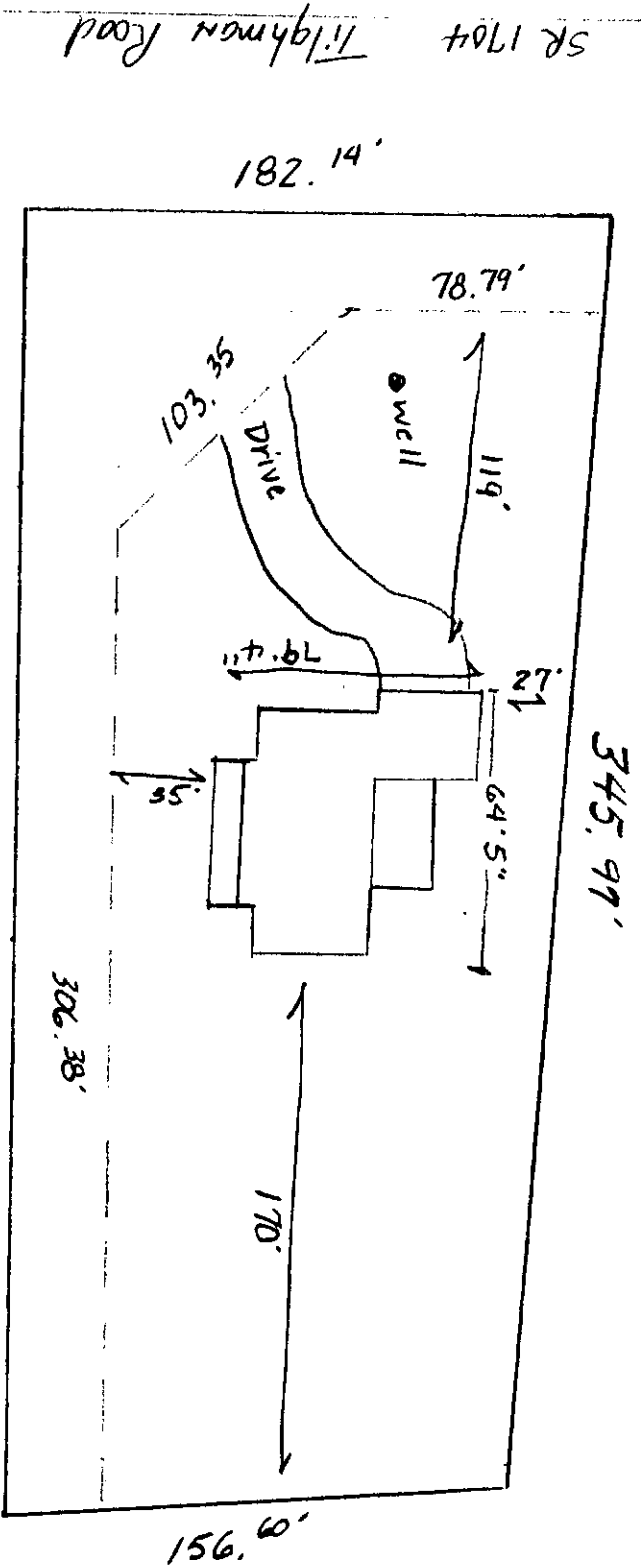
\_\_\_\_\_ Has/have not more than two (2) employees and no subcontractors.

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: Bim Builders LLC  
Sign/Title: Danny Pellard Owner  
Date: 12-18-07

Jeromy & Beth McLamb

SITE PLAN APPROVAL  
DISTRICT RA30 USE SFD  
#BEDROOMS 3  
Date 11/27/07 Zoning Administrator [Signature]



SR 1704 Tilghman Road

SR 1705 Fairground

1" = 60'

CRAWL

Plan Box Number C-6

Job Name Bim BUILDERS

Date: 12-18-07

Required Inspections for SFA/SFD

Appl. # 0750018942  
Valuation \$281,067  
Sq. Feet 4326

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	<input type="checkbox"/>	R* Bldg. Slab Insp.
30-999	<input type="checkbox"/>	R* Elec. Under Slab
30-999	<input type="checkbox"/>	R*Plumb. Under Slab
40	<input type="checkbox"/>	Four Trade Rough In
40	<input checked="" type="checkbox"/>	Four Trade Rough In > 2500
40	<input type="checkbox"/>	Three Trade Rough In
40	<input type="checkbox"/>	Three Trade Rough In > 2500
40	<input type="checkbox"/>	Two Trade Rough In
40	<input type="checkbox"/>	Two Trade Rough In > 2500
40	<input type="checkbox"/>	One Trade Rough In
40	<input type="checkbox"/>	One Trade Rough In > 2500
50	<input checked="" type="checkbox"/>	R* Insulation
60	<input type="checkbox"/>	Four Trade Final
60	<input checked="" type="checkbox"/>	Four Trade Final > 2500
60	<input type="checkbox"/>	Three Trade Final
60	<input type="checkbox"/>	Three Trade Final > 2500
60	<input type="checkbox"/>	Two Trade Final
60	<input type="checkbox"/>	Two Trade Final > 2500
60	<input type="checkbox"/>	One Trade Final
60	<input type="checkbox"/>	One Trade Final > 2500
999	<input checked="" type="checkbox"/>	Envir. Operations Permit