

07 500 18945

**Application for Building and Trade Permit**

Owner's Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Directions to job site: \_\_\_\_\_

Subdivision: Riverstone Lot: \_\_\_\_\_  
Construction Type: (Please Check) Building Use: (Please Check)  
 New  Residential  
 Renovation  Modular  
 Addition  Commercial  
 Moved House  Multi-Family  
 Other  
Description of Proposed Work: New SFP  
Total Project Cost: \_\_\_\_\_

**Building Permit Information**

Heated SF \_\_\_\_\_ Crawl Space ( ) Building Construction Cost \$ \_\_\_\_\_  
Unheated SF \_\_\_\_\_ Slab ( ) Acres Disturbed \_\_\_\_\_ Stories \_\_\_\_\_  
Sher-Lock Homes DM, Inc 919-369-4345 cell  
Building Contractor's Company Name Telephone 21035  
4805 Christian Chapel Church Rd License # \_\_\_\_\_  
Address New Hill, NC 27562  
[Signature]  
Signature of Officer(s) of Corporation

**Electrical Permit Information**

Description of Work \_\_\_\_\_ Electrical Cost \$ \_\_\_\_\_  
TS Pole: Yes ( ) No ( ) Underground ( ) Overhead ( )  
Permanent Service: Underground ( ) Overhead ( ) Service Size: \_\_\_\_\_ Amps  
Holly Springs Electrical 919-552-3640  
Electrical Contractor's Company Name Telephone 2019-5P-SFD  
8000 Buckhorn Duncan Rd License # \_\_\_\_\_  
Address Holly Springs, NC 27540  
[Signature]  
Signature of Officer(s) of Corporation

**Mechanical Permit Information**

Description of Work \_\_\_\_\_ Mechanical Cost \$ \_\_\_\_\_  
Number of Units \_\_\_\_\_ Type System \_\_\_\_\_  
Stephens Heating & Air 919-329-0686  
Mechanical Contractor's Company Name Telephone 18644  
343 Shipwash DR Garner 27529 License # \_\_\_\_\_  
Address \_\_\_\_\_  
[Signature]  
Signature of Officer(s) of Corporation

**Plumbing Permit Information**

Description of Work \_\_\_\_\_ Plumbing Cost \$ \_\_\_\_\_  
Number of Baths \_\_\_\_\_  
Gilbert Plumbing 910-467-6361  
Plumbing Contractor's Company Name Telephone 10929  
1638 Timothy Rd Dunn 28334 License # \_\_\_\_\_  
Address [Signature]  
Signature of Officer(s) of Corporation

**Insulation Permit Information**

Residential  Other ( ) Not Required ( )  
Eastern Insulation \_\_\_\_\_ Telephone \_\_\_\_\_  
Insulation Contractor's Company Name Address \_\_\_\_\_



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

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

- 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: Sher-Lock Homes DM Inc  
By/Title: Dan Mc President  
Date: 7-2-08

WHAT IS THE BOX #??

Plan Box Number EL6

Job Name K MAC CUSTOM HOMES

Date: 2-8-08

Required Inspections for SFA/SFD

Appl. # 0750018945  
Valuation \$130,000  
Sq. Feet 2001

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 checked="" type="checkbox"/> | Four Trade Rough In         |
| 40     | <input 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 checked="" type="checkbox"/> | Four Trade Final            |
| 60     | <input 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    |