* 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 #	
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Harnett County Central Permitting PO Box 65 Lillington, NC 27546 910-893-7525 Fax 910-893-2793 www.harnett.org

Application for Residential B	uilding and Trades Pe	rmit
Owner's Name: Woodshire Partners L	_LC Date: _	19/10/01
Site Address: 1104 Sonora Drive	Phone: <u>481</u> -	0503
Directions to job site from Lillington: Hwy 27 w	to Nursery	Rd.
Nursery Rd to lemule Black.	Lemule B1	ack 1/2_
mile. Subdivision is on le	<i>ft.</i>	
Subdivision: Woodshire	Lot: _ _	
Description of Proposed Work:		ooms:_3
Heated SE 2274 Inheated SE 724 Finished R	ec Room? <u>YeS</u>	Crawl Space () Slab 🖔
General Contrac	481-0503	
Caviness Land Dev.	Telephone	105
Building Contractor's Company Name (39 Executive Place	Tolophiono	37 485
Address		License #
·	Must sign & fill out second	d page
Signature of Owner/Contractor/Officer(s) of Corporation Electrical Perm	it Information	
Description of WorkService	Size:Amps	TPole: ves/no
TEN Electric	487-5000	
	Telephone	2522211
Electrical Contractor's Company Name 4341 Swirdow Dr Fry	NC 28312	273554 License #
Address		2.0000
Signature of Officer(s) of Corporation		
Mechanical Per	mit Information	
Description of Work	400	A21P
Chacco	488- Telephone	0310
Mechanical Contractor's Company Name 1910 - B Pamalee Drive Fay,		2957PH1-3
Address // //	NC ZOS	License #
Signature of Officer(s) of Corporation		
	mit Information	ho.
Description of Work	# Bati	B-0959
Plumbing Contractor's Company Name	Telephone	20 0 10 1
PO Box 724 Coats, NC 29	7521 2	3140
Address		License #
Shawn Glover		
Signature of Officer(s) of Corporation Insulation Perm	nit Information	
Cumberland Insulation		484-7118
Insulation Contractor's Company Name & Address		Telephone

Application	#
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Homeowners Applying to Build Their Own Please answer the following questions then see a Permit Technician to determine if you quanguestionnaire per G.S. 87-14 Regulations as to Issue of Building Permit Per	rmits (Memo available upon request)	
1. Do you own the land on which this building will be constructed?	1	
2. Have you hired or intend to hire an individual to superintend and n project?		
3. Do you intend to directly control & supervise construction activities	1	
4. Do you intend to schedule, contract, or directly pay for all phases done?	of construction work to be yes no	
5. Do you intend to personally occupy the building for at least 12 corcompletion of construction and do you understand that if you do not opresumption under law that you fraudulently secured the permit?	nsecutive months following do so, it creates the 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		
Affidavit for Worker's Compensation N.C The undersigned applicant being the:	c.G.S. 87-14	
Signature of Owner/Contractor/Officer(s) of Corporation Affidavit for Worker's Compensation N.C	c.G.S. 87-14	
Affidavit for Worker's Compensation N.C The undersigned applicant being the:	the Contractor or Owner	
Affidavit for Worker's Compensation N.C The undersigned applicant being the: General Contractor Owner Officer/Agent of t Do hereby confirm under penalties of perjury that the person(s), firm(s) or c set forth in the permit: Has three (3) or more employees and has obtained workers' compe	the Contractor or Owner corporation(s) performing the work ensation insurance to cover them.	
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Plan Box Number AA- 2

Job Name CAYINESS

Date: 12-17-07

Required Inspections for SFA/SFD

Appl. # <u>6750019048</u>
Valuation <u>\$186,208</u>
Sq. Feet <u>2866</u>

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
	The state of the s