\* 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	#	
Application	''	 

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

Owner's Name: NoodShire Partners LLC Site Address: 144 SonOra Drive Phone: 48-003  Directions to job site from Lillington: Hwy 27 w to Nursen Rd.  Nursen Rd to Lemule Black. Subdivision first left.  Subdivision: WoodShire Lot: 23 Lot: 23 Lot: 23 Lot: 24 Lot: 24 Lot: 25 Lot: 25 Lot: 25 Lot: 26 Lot: 26 Lot: 26 Lot: 26 Lot: 27 Lot: 27 Lot: 27 Lot: 27 Lot: 28 Lot: 27 Lot: 28	Application for Residential Building and Trades Permit	
Directions to job site from Lillington: Hwy 27 w to Nursen Rd.  Nursen RJ to Lemule Black. Subdivision first left.  Subdivision: WoodShire  Description of Proposed Work: #Bedrooms: 3  Heated SF 222 Unheated SF 57 Finished Rec Room? Yes Crawl Space () Slab & General Contractor Information  Caviness Land Dev. 481-0503  Building Contractor's Company Name  (39 Executive Place Address  Signature of Owner/Contractor/Officer(s) of Corporation  Description of Work Service Size: Amps TPole 25/10  Fig. Electrical Contractor's Company Name  Address  Signature of Officer(s) of Corporation  Description of Work Fay N C 28312 25333U  License #  Signature of Officer(s) of Corporation  Mechanical Permit Information  Description of Work Telephone  1910-B Pamalice Drive Fay, NC 28303  License #  Signature of Officer(s) of Corporation  Plumbing Permit Information	Owner's Name: Woodshire Partners LLC Date: 12/10/01	-
Subdivision: WoodShire	Site Address: 44 Sonora Drive Phone: 48-003	-
Subdivision: WoodShire	Directions to job site from Lillington: Hwy 27 w to Nurseny Rd.	-
Subdivision: WoodShire  Description of Proposed Work:  Heated SF 233 Unheated SF 57 Finished Rec Room? 48 Crawl Space () Slab & General Contractor Information  Caviness Land Dev. 481-0503  Building Contractor's Company Name  LOS Executive Place  Signature of Owner/Contractor/Officer(s) of Corporation  Description of Work Service Size:  Electrical Contractor's Company Name  Telephone  TEN Electric  Electrical Contractor's Company Name  Telephone  Telephone  Address  Signature of Officer(s) of Corporation  Mechanical Permit Information  Description of Work  Chacco  Mechanical Contractor's Company Name  1910-8 Pamalec Drive Fay, NC 28303  Electrical Permit Information  Description of Work  Chacco  Mechanical Contractor's Company Name  1910-8 Pamalec Drive Fay, NC 28303  License #  Signature of Officer(s) of Corporation  Plumbing Permit Information	Nursery Rd to Lemule Black. Subdivision first left.	_
Description of Proposed Work:  Heated SF 332 Unheated SF 551 Finished Rec Room? YES Crawl Space () Slab & General Contractor Information  Building Contractor's Company Name Telephone  Address  Signature of Owner/Contractor/Officer(s) of Corporation  Description of Work  Service Size:  Amps TPole: 10 / 10 / 10 / 10 / 10 / 10 / 10 / 10		_
Heated SF 200 Unheated SF 67 Finished Rec Room? 48 Crawl Space () Slab ()  Coviness Land Dev. 481-0503  Building Contractor's Company Name (39 Executive Place Address  Must sign & fill out second page  Signature of Owner/Contractor/Officer(s) of Corporation  Description of Work Service Size: Amps TPole: 69 / no  Telephone Telephone  Address  Signature of Officer(s) of Corporation  Description of Work Service Size: Amps TPole: 69 / no  Telephone Telephone  Address  Signature of Officer(s) of Corporation  Mechanical Permit Information  Description of Work Address  Signature of Officer(s) of Corporation  Mechanical Contractor's Company Name Telephone  1910 - B Pamalce Drive Fay, NC 28303  Address  Signature of Officer(s) of Corporation  Plumbing Permit Information  Plumbing Permit Information	Subdivision: Woodshire Lot: <u>a3</u>	<del>-</del>
General Contractor Information  ABI-0503  Building Contractor's Company Name  Lage Executive Place  Address  Signature of Owner/Contractor/Officer(s) of Corporation  Electrical Permit Information  Service Size:  Amps TPole Find Telephone  Telephone  Telephone  Telephone  Telephone  Telephone  Telephone  Telephone  Telephone  Mechanical Permit Information  Description of Work  Signature of Officer(s) of Corporation  Mechanical Permit Information  Description of Work  Chacco  Mechanical Contractor's Company Name  1910-B Panalce Drive Fay, NC 28303  Address  Signature of Officer(s) of Corporation  Plumbing Permit Information  Plumbing Permit Information	Description of Proposed Work:#Bedrooms:	
Building Contractor's Company Name    Cay   Executive   Place   Address	Heated SF 232 Unheated SF 57 Finished Rec Room? 45 Crawl Space ( General Contractor Information	) Slab <b>(</b> ∕)
Building Contractor's Company Name  (29 Executive Place  Address  Must sign & fill out second page  Signature of Owner/Contractor/Officer(s) of Corporation  Description of Work  Service Size:  Amps TPole (29)/no  487-5000  Telephone  Telephone  Address  Signature of Officer(s) of Corporation  Mechanical Permit Information  Description of Work  Chacco  Mechanical Contractor's Company Name  1910-B Pamalec Drive Fay, NC 28303  License #  Signature of Officer(s) of Corporation  Plumbing Permit Information  Plumbing Permit Information		_
Address    Must sign & fill out second page	Building Contractor's Company Name Telephone	=
Signature of Owner/Contractor/Officer(s) of Corporation    Description of Work		<u> </u>
Signature of Owner/Contractor/Officer(s) of Corporation    Description of Work	Address	
Description of Work Service Size: Amps TPole: 65/no  TEN Electric 487-5000  Electrical Contractor's Company Name Telephone  Address  Signature of Officer(s) of Corporation  Description of Work  Chacco  Mechanical Contractor's Company Name  1910-B Pamalec Drive Fay, NC 28303  Address  Signature of Officer(s) of Corporation  Plumbing Permit Information  Plumbing Permit Information  Plumbing Permit Information		
Electrical Contractor's Company Name  Address  Signature of Officer(s) of Corporation  Description of Work  Chacco  Mechanical Contractor's Company Name  1910 - B Pamalce Drive Fay, NC 28303  Address  Signature of Officer(s) of Corporation  Plumbing Permit Information  Plumbing Permit Information  Plumbing Permit Information	Electrical Permit Information	
Electrical Contractor's Company Name  Address  Signature of Officer(s) of Corporation  Description of Work  Chacco  Mechanical Contractor's Company Name  1910 - B Pamale Drive Fay, NC 28303  Address  Signature of Officer(s) of Corporation  Plumbing Permit Information  Plumbing Permit Information  Plumbing Permit Information	2000/10/01/01/01	
Signature of Officer(s) of Corporation  Mechanical Permit Information  Description of Work  Chacco  Mechanical Contractor's Company Name  1910 - B Panalce Drive Fay, NC 28303  Address  Signature of Officer(s) of Corporation  Plumbing Permit Information	Floatrical Contractor's Company Name  Telephone	_
Signature of Officer(s) of Corporation  Mechanical Permit Information  Description of Work  Chacco  Mechanical Contractor's Company Name  1910 - B Panalce Drive Fay, NC 28303  Address  Signature of Officer(s) of Corporation  Plumbing Permit Information	4711 Sunday De In. N.C. 28312 253331	1
Signature of Officer(s) of Corporation  Mechanical Permit Information  Description of Work  Chacco  Mechanical Contractor's Company Name  1910-B Pamalec Drive Fay, NC 28303  Address  Signature of Officer(s) of Corporation  Plumbing Permit Information	Address License #	
Mechanical Permit Information  Description of Work  Chacco  Mechanical Contractor's Company Name  1910 - B Panalce Drive Fay, NC 28303  Address  Signature of Officer(s) of Corporation  Plumbing Permit Information	* Ell	
Description of Work  Chacco  Mechanical Contractor's Company Name  1910 - B Panalce Drive Fay, NC 28303  Address  Signature of Officer(s) of Corporation  Plumbing Permit Information	Signature of Officer(s) of Corporation	
Chacco Mechanical Contractor's Company Name 1910 - B Pamalec Drive Fay, NC 28303 Address Signature of Officer(s) of Corporation Plumbing Permit Information		
Mechanical Contractor's Company Name  1910 - B Pamalee Drive Fay, NC 28303  Address  Signature of Officer(s) of Corporation  Plumbing Permit Information	40 4010	
1910-B Pamalee Drive Fay, NC 28303 Address Signature of Officer(s) of Corporation Plumbing Permit Information		- 
Address Signature of Officer(s) of Corporation Plumbing Permit Information		H 1-3
Plumbing Permit Information		
	Signature of Officer(s) of Corporation	
Description of Work # Baths #	Description of Work # Baths # Co. O. Co. D AG50	<del>-</del>
Plumbing Contractor's Company Name  Telephone	Glover Plumbing 919 846-09139	-
Plumbing Contractor's Company Name PO Box 724 Coats, NC 27521  23140	PO Box 724 Coats NC 27521 23140	
Address License #	lineman #	-
Shown Glover	Shown Glover	
Signature of Officer(s) of Corporation	Signature of Officer(s) of Corporation	
Cumberland Insulation Permit Information 484-7118	10 / 17	2
Insulation Contractor's Company Name & Address  Telephone	(M) 100 100 10 10 10 10 10 10 10 10 10 10 1	<b>∠</b>

Application	#	 <del></del>	

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	i)
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	
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.G.S. 87-14	
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:	
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	
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:	
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  Do hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work	
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  Do hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:	
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  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	
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  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	
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  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 covering 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.	
Affidavit for Worker's Compensation N.C.G.S. 87-14  The undersigned applicant being the:	

Plan Box Number AA-12

Job Name CAVINES

Date: 12 - 17-07

Required Inspections for SFA/SFD

Appl. # 0750017049Valuation 9190, 431Sq. Feet 2931

## 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	
30-999	R* Bldg. Slab Insp.
30-999	R* Elec. Under Slab
40	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	I wo Trade Rough In
40	Two Trade Rough In> 2500
40	One Trade Rough In
· · · · · · · · · · · · · · · · · · ·	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 > 2500
60	
60	Two Trade Final > 2500
60	One Trade Final
999	One Trade Final > 2500
	Envir. Operations Permit