*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 # 08 5 00 19 16 0

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.hamett.org/permits

Application for Residential Building and Trades Permit

DOC Homes TOC	Date:
Owner's Name: RRC Homes, Inc.	Phone: 910-423-3555
Site Address: 197 Tactical Drive Directions to job site from Lillington: 210 South	2 0055 Elliott Ruidge Rd +
Directions to job site from Lillington:	Tactical Orive into
Elementary School and 1917	on their give
Guen Oaks Subdivision	Lot:
Subdivision: Gwen Oaks	LUI
	Construction #BedroomsStab ()
- IOP HOS EINIGNAG	actor Information
RBC Homes, Inc.	410-423-3555
Building Contractor's Company Name	Telephone <u>55806</u>
5511 Ramsey Sty Ste, 100, Fay, NC 28311	License #
Address	Must sign & fill out second page
Signature of Owner/Contractor/Officer(s) of Corporation	on:
<u> Libertivali y</u>	rmit information ice Size: ADD Amps TPole: yes/no
Description of Work	912.113.1456
SANDY LIDLE LLCO IN	Telephone
454 WHTEHEND RA FAY, N.C.	18312 10006U
Address Kthing	License #
Signature of Officer(s) of Corporation	O Bernit information
Mechanicanua	C Permit Information
Description of Work Heating & Air Installa	910-858-7300
Mechanical Contractor's Company Name	Telephone
P.O. Box 747, Parkton, NC 28371	16536
Address)	License #
Signature of Officer(s) of Corporation	
	rmit Information
Description of Work	# Baths
Plumbing Inc. Plumbing Contractor's Company Name	Telephone
406 DeHaviland Drive Fay, N. C. 2831	
Address	License #
Towner Do.	•
Signature of Officer(s) of Corporation	M. 6
	mit information 6, 27663 919-772-9060
Insulating Inc. 11212 Hums Ct., Raleigh, N Insulation Contractor's Company Name & Address	719-772 4000 Telephone
insulation Contractor's Company Hame witteress	i olopiioiio

	Applying to Ruild Their Own Home				
	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 reques				
	1. Do you own the land on which this building will be constructed? no				
	2. Have you hired or intend to hire an individual to superintend and manage construction of the project?				
	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?				
	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?				
	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. EXPIRED PERMIT FEES - 6 Months to 2 years permit re-issue fee is \$150.00. After 2 years re-issue fee is as per current fee schedule.				
	11/04/10				
	Signature of Owner/Gentractor/Officer(s) of Corporation Date				
	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.				
t	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.				
(Company or Name: RRC Homes, Inc.				
S	Sign w/Title: President Date: 11/4/10				

Plan Box Number E-4

Job Name Gwer Onks

Date: _/(-\lambda-//)

Required Inspections for SFA/SFD

Appl. # 08-5-19160 Valuation \$ 130.073 Sq. Feet 2002

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	
40	R*Plumb. Under Slab
40	Four Trade Rough In
40	Four Trade Rough In> 2500
40	Three Trade Rough In
	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	
60	One Trade Final
999	One Trade Final > 2500
	Envir. Operations Permit