

* Each section below to be filled out by whoever performing work. Must be owner or licensed contractor. Address, company name & phone must match information on license.

Application # 19481

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: Dart Builders Inc Date: 2-21-08
Address: PO Box 655 Holly Springs NC 27540 Phone: 919-524-2915
Directions to job site from Lillington: 401 N to Rawl Club Rd Take Right then take 1st left into Entrance & take first right
Subdivision: Magnolia Crest Lot: 24

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

Total Project Cost: 250,000 Description of Proposed Work: _____

General Contractor Information

Heated SF 2330 Crawl Space () Building Construction Cost \$ _____
Unheated SF 530 Slab () Acres Disturbed .5 Stories 1
Building Contractor's Company Name Dart Builders Inc Telephone 919-524-2915
Address PO Box 655 Holly Springs NC 27540 License # 61053
Signature of Owner/Contractor/Officer(s) of Corporation _____

Electrical Permit Information

Description of Work New Residential Electrical Cost \$ 12,000
TS Pole: Yes () No () Underground () Overhead ()
Permanent Service: Underground () Overhead () Service Size: 200 Amps
Electrical Contractor's Company Name Eagle Electrical Services Telephone 910-980-3760
Address 7633 Sherrill Bassett Rd License # 18800-L
Signature of Officer(s) of Corporation Edward A. Deamer

Mechanical Permit Information

Description of Work New Construction HVAC Mechanical Cost \$ 12,000
Number of Units 2 Type System _____
Air Control Telephone 910-980-1209
Mechanical Contractor's Company Name 6623 Sherrill Bassett Rd License # 21319
Address _____
Signature of Officer(s) of Corporation _____

Plumbing Permit Information

Description of Work _____ Plumbing Cost \$ 12,000
Number of Baths 2.5 Telephone _____
Plumbing Contractor's Company Name Ray Wagner License # _____
Address _____
Signature of Officer(s) of Corporation _____

Insulation Permit Information

Residential () Other () Not Required ()
Insulation Contractor's Company Name Insulation Inc Address Raleigh NC Telephone 919-369-9000

Application # _____

Sprinkler System Information

Sprinkler Contractor's Company Name _____ Telephone _____
Contact Person _____
Address _____ License # _____
Signature of Officer(s) of Corporation _____

Fire Alarm System Information

Fire Alarm Contractor's Company Name _____ Telephone _____
Contact Person _____
Address _____ License # _____
Signature of Officer(s) of Corporation _____

Driveway Access

NC Department of Transportation Driveway Access/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, 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

2-21-08

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: Dail Builders Inc
Sign/Title: [Signature]
Date: 2-21-07

Plan Box Number A-6

Job Name DAIL BUILDERS

Date: 2-21-08

Required Inspections for SFA/SFD

Appl. # 0850019481

Valuation \$209,468

Sq. Feet 3224

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