APP#08-50019555

Harnett County Central Permitting PO Box 65 Lillington, NC 27546 Telephone Number 910-893-4759

Application for Building and Trade 1	Permit 1/10x0
Owner's Name: H&H Constructors, Inc.	Date://
Address: 2919 Breezewood Ave., Ste. 400 Fayetteville, NC 28303	Phone: 910-486-4864
Directions to job site:	
241	
Subdivision: FOREST OAKS	
Type Construction: (Please Check)	Building Use: (Please Check)
New (x) Renovation () Addition ()	Residential (x) Modular ()
Moved House () Other ()	
Description of Proposed Work:	Commercial () Multi-Family ()
Total Project Cost:	
Building Permit Information	114/2800
Heated 1995 Crawl Space & Building Constru	action Cost \$ //4/28
Unheated 35 Slab () Acres Disturbed 0.98	6 Stories 2
H&H CONSTRUCTORS, INC. 2919 BREEZEWOOD AVE., STE.4	00 FAYETTEVILLE, NC 28303
Building Contractor's Company Name	Address
Raren L Owens 31554 u	<u>910-486-4864</u>
Signature of Officer(s) of Corporation License #	Telephone
	F
Electrical Permit Information	
Description of Work Electrical Cost S	<u></u>
S Pole: Yes() No() Underground() Overhead()	
Permanent Service: Underground () Overhead () Service Size: _	Amps
TEN Electric Corp. 910.487.	Koro
1 & N Electric Carp.	
electrical Contractor's Company Name Telephone	A-A
4341 Swindon Dr., Fay., NC 28312	25333 a
address 7	License #
500 M	
200	
Signature of Officer(s) of Corporation	
Mechanical Permit information	
Description of Work Type System Mechal	nical Cost \$
lumber of Units Type System Wedital	
	176-1537
Mechanical Contractor's Company Name Telepho	one
0 a A-V 1040 Canfied NO. 27331-1068	02680
P.D. DOX 1008, BUILDING NO. 1001	License #
ddress	Flocues #
asselanary	
ignature of Officer(a) of Corporation	
Plumbing Permit Information	
Description of Work	
lumber of Baths Plumbing Cost \$	<u> </u>
- All all and The Marine are	426.5272
lumbing Contractor's Company Name Telepho	1901/z
3511 Farm Circle Kd. Fay, NC 28306	18773
ddress	License #
Signature of Officer(s) of Corporation	
Insulation Permit Information Residential () Other	() Not Required ()
Tri City Insulation-418 Person St., Fay, NC	28301 910-486 8855
Company Name & Address	Telephone
nsulation Contractor's Company Name & Address	Cicpiterio

Sprinkler Syst	tem Information
Sprinkler Contractor's Company Name	Address
Contact Person	
Contact reison	Telephone
License Number	
Fire Alarm Sys	tem Information
Alarm Contractor's Company Name	Address
Contact Person	Contact Person's Signature
	Contact Person's Signature
License Number	
License Number	Telephone
Drivewa	v Access
NC Department of Transportation Driveway Access/P	Permit? Yes No.
	'ermit'? Yes No
Thombs, see C. d. (71)	
I hereby certify that I have the authority to make necesthat the construction will conform to the regulations in	ssary application, that the application is correct and
codes, and the Harnett County Zoning Ordinance. I st	tate the information on the above contractors is
correct as known to me and if any changes occur in the	e above contractors I certify it is my responsibility to
notify the Harnett County Inspections Division of any	changes.
A DA	,
Karen L Uwens	
Signature of Owner/Contractor/Officer(s) of Corporati	ion Date

Application	#		

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

The undersigne	led applicant for Building Permit # bei	ng the:
<u> </u>	General Contractor Owner Officer/Agent of the Contractor or Owner	
	nfirm under penalties of perjury that the persoត្(s), firm(s) or rith in the permit:	corporation(s) performing
X	Has/have three (3) or more employees and has/have obtain compensation insurance to cover them.	ed workers'
	Has/have one (1) or more subcontractors(s) and has/have o compensation insurance to cover them.	btained workers'
<u>X</u>	Has/have one (1) or more subcontractors(s) who has/have to workers' compensation insurance covering themselves.	heir own policy of
X	_ Has/have not more than two (2) employees and no subcontr	actors.
Department iss insurance prior	on the project for which this permit is sought it is understood the suing the permit may require certificates of coverage of to issuance of the permit and at any time during the permitten carrying out the work.	worker's compensation
Firm Name:	Htt H Constructors, Inc.	iner
Date: //	1808	

Plan Box Number 6-5

Job Name H. ≠ H. CONST

Date: __//-20-08

Required Inspections for SFA/SFD

Appl. #_0\$500 19555 Valuation <u># 157,55</u>7 Sq. Feet 2425

Sequence

10	R* Bldg. Footing
10-30	R* Flee Town Samilar D. (
20	R* Elec. Temp Service Pole
20	R* Building Foundation
30-999	Address Confirmation
30-999	Open Floor
30-999	R* Bldg. Slab Insp.
30-999	R* Elec. Under Slab
40	R*Plumb. Under Slab
40	Four Trade Rough In
10	Four Trade Rough In> 2500
40	The Trade Rough In
40	Three Trade Rough In> 2500
	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 > 2500
60	
999	One Trade Final > 2500
	Envir. Operations Permit