Harnett County Central Permitting PO Box 65 Lillington, NC 27546 910-893-4759 www.harnett.org

Application for Building and Trade Permit Owner's Name: U) LOUGE DEUR LOWING COFIC. Date: 4/3/08 Address: PLOCES OF 53786 Factoring MC 18308 Phone: 100 63 0 3 LOC
Directions to job sile: Ning IT US TO AUTOUS Lakerd TO LIPEREDE.
Subdivision: SUMULE Lot: 92 Construction Type: (Please Check) Building Use: (Please Check)
New Residential Addition Modular Commercial
— Moved House — Other Description of Proposed Work: Yew Road Sold Coust Voct (ON)
Total Project Cost: 44,000 Building Permit Information
Heated SF Crawl Space Building Construction Cost \$ Unheated SF Size Size () Weaver Development CO., Inc. Building Contractor's Company Name Building Construction Cost \$ Acres Disturbed 3 7 Stories 910-630-2100 Telephone
P.O. Box 53786, Favetteville, NC 28305 # 26962 Address License #
Signal of Officer(s) of Corporation Electrical Permit Information
Description of Work Install ElectricalElectrical Cost \$ TS Pole: Yes No () Underground () Overheard () Permanent Service: Underground () Overhead () Service Size: 200 Amps SECS Electric 919-718-1156
Electrical Contractor's Company Name 1206 Pendergraff Rd. Sanford, NC 27330 # 18002-L Address License #
Signature of Officer(s) of Corporation Mechanical Permit Information
Description of Work Install Heat Pump Number of Units Type System Heat Pump Mechanical Cost \$ Monty's HVAC 910-237-6011
Mechanical Contractor's Company Name 945 S. Parker Church Rd. Raeford, NC 28376 # 16828 Address License #
Signature of Officer(s) of Corporation
Plumbing Permit Information Description of Work Install Plumbing Number of Baths Plumbing Cost \$
H.F. Dorman Plumbing 910-483-7082 Plumbing Contractor's Company Name Telephone 4225 Final Approach Dr. Fayetteville, NC 28312 # 04132 P1 Address 7/7 License #
Signature of Officer(s) of Corporation Insulation Permit Information

Residential Other () Not Required ()
Tri-Cit Insulation
Insulation

418 Person St. 910-486-8855
Address Fayetteville, NC Telephone

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

The undersigned	applicant for Building Permit # being the:
	Contractor Owner Officer/Agent of the Contractor or Owner
	firm under penalties of perjury that the person(s), firm(s) or corporation(s) ork set forth in the permit:
(Marie Control of the Control of th	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.
X	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.
Permitting Depa compensation in	on the project for which this permit is sought it is understood that the Central artment issuing the permit may require certificates of coverage of worker's surance prior to issuance of the permit and at any time during the permitted work, firm or corporation carrying out the work.
Firm Name: We	aver Development CO., Inc.
By/Title: Doub	Mel Settall (Superasteut) 1/18
Date: 4/6	3/08

Application #	
Application #	

	os must fill out this portion System information	
Sprinkler Contractor's Company Name	Contact & Telephone	············
Address	License #	,555 d.)
Signature of Officer(s) of Corporation Fire Alarm	System Information	
Fire Alarm Contractor's Company Name	Contact & Telephone	
Address	License #	
Signature of Officer(s) of Corporation <u>Driveway Access</u> - NC Department of Tra	unsportation Driveway Access/Permit? Yes	No
Homeowners Apply Please answer the following questions then see a Permit T	ing to Build Their Own Home echnician to determine if you qualify for permit under Own	ners Exemption.
Questionnaire per G.S. 87-14 Regulations as	s to Issue of Building Permits (Memo availab	le upon request
1. Do you own the land on which this bui	Iding will be constructed? yes	no
2. Have you hired or intend to hire an ind the project?	- · · · · · · · · · · · · · · · · · · ·	nstruction of
3. Do you intend to directly control & sup	ervise construction activities? yes	no
4. Do you intend to schedule, contract, o be done?	r directly pay for all phases of construction yes	tion work to
5. Do you intend to personally occupy the following completion of construction and coreates the presumption under law that ye	do you understand that if you do not do	
	yes	no
Sign & date		
I hereby certify that I have the authority to make and that the construction will conform to the remechanical codes, and the Harnett County Zoni contractors is correct as known to me and if any building and trade plans, Environmental Health progressionsibility to notify the Harnett County Central County C	egulations in the Building, Electrical, Plumbing Ordinance. I state the information on the changes occur including listed contractors, site armit changes or proposed use changes. I certain the changes of proposed use changes are proposed use changes.	ng and above te plan, tifv it is

Plan Box Number AA-8

Job Name WEAVER

Date: 4-4-08

Required Inspections for SFA/SFD

Appl. #08 500 19807 Valuation \$ \68, 471 Sq. Feet 2593

Sequence