

\* 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 # \_\_\_\_\_

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

**Application for Residential Building and Trades Permit**

Owner's Name: BOONIE HOMES, INC. Date: 4/9/08  
Site Address: 116 LONNIE BETTS DRIVE Phone: (919) 552-5139  
Directions to job site from Lillington: TAKE 401 N. TO CHRISTIAN LIGHT AD. TL  
GO TO HWY 42 TL - TL ON LONNIE BETTS DR NEXT  
TO DORRAN JUNCTION - LOT IS IN COL DE SAC  
Subdivision: AUSTIN FARMS Lot: 6  
Description of Proposed Work: CONSTRUCT SINGLE FAMILY DWELLING Bedrooms: 3  
Heated SF 2111 Unheated SF 821 Finished Rec Room? YES Crawl Space (Y) Slab ( )

**General Contractor Information**

BOONIE HOMES, INC. (919) 552-5139  
Building Contractor's Company Name Telephone  
6432 WHITTEN RD. FURQUAN-VARINA, NC 27526 65505  
Address License #

[Signature] Must sign & fill out second page  
Signature of Owner/Contractor/Officer(s) of Corporation

**Electrical Permit Information**

Description of Work NEW RESIDENCE Service Size: 200 Amps TPole: yes / no  
CAVIN NEAL SEARS ELECT. SERV. (919) 552-5858  
Electrical Contractor's Company Name Telephone  
4900 ALLAN BROOKE DR. FURQUAN NC 27526 14526-L  
Address License #

Cavin Neal Sears  
Signature of Officer(s) of Corporation

**Mechanical/HVAC Permit Information**

Description of Work NEW RESIDENCE  
J.L.'s HEATING & A/C (919) 552-6258  
Mechanical Contractor's Company Name Telephone  
1539 WADE STEPHENSON RD. HOUSS SPRINGS NC 27540 12655  
Address License #

Jimmy Carroll  
Signature of Officer(s) of Corporation

**Plumbing Permit Information**

Description of Work NEW RESIDENCE # Baths 2  
ROHM PLUMB & HTG (919) 833-9702  
Plumbing Contractor's Company Name Telephone  
701 E. SIX FORKS RD. RALEIGH NC 27609 967  
Address License #

Jeffrey L. Jiles  
Signature of Officer(s) of Corporation

**Insulation Permit Information**

INSULATING INC. 1212 HOME CO. RALEIGH, NC 27603 (919) 772-9000  
Insulation Contractor's Company Name & Address Telephone

**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)

- 1. 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 Hamett 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 Hamett County Central Permitting Department of any and all changes.

  
Signature of Owner/Contractor/Officer(s) of Corporation

4/2/08  
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.

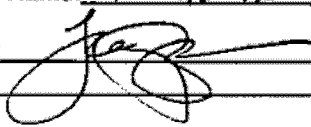
Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them.

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.

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: BOONE HOMES, INC.

Sign w/Title:  PRESIDENT    Date: 4/2/08

Plan Box Number I-5

Job Name BOONE HOMES

Date: 4-8-08

Required Inspections for SFA/SFD

Appl. # 0850019837  
Valuation \$190,301  
Sq. Feet 2929

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