\* 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 # 08 500 2001/
Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
Phone 910-893-7525 Fax 910-893-2793 www.harnett.org
Application for Building and Trades Permit

	Date: 5-21-08
Site Address: 16 Therps Ct. 5 a find NC 27336 Phone:	919 416 5560
Directions to job site from Lillington: 27 W. turn out Battalve	Lakes PV. Sabdivision
1 m.lo on loft	
Subdivision: Caneran Pines	Lot: 2
Construction Type:       (Please Check)       Building Use:       (Please Check)         New       Moved House       Residential         Renovation       Addition       Other	heck) Commercial Multi-Family
Total Project Cost: /Sous Description of Proposed Work: **	40me
Heated SF 1716 Unheated SF 930 Finished Rec Room? 160 General Contractor Information Building Cost	Crawl Space () Slab ()
WYNN Construction 919-52	F-1347
Building Contractor's Company Name  Telephone  1696 Hayes 2d- Creadner NC 27522	46295
Address	License #
Signature of Owner/Contractor/Officer(s) of Corporation  Electrical Permit Information Elec Cost \$	page & fill out third page
Description of Work New Construction Service Size: 200	
K.A. Jackson 919 7	30 1251
Electrical Contractor's Company Name Telephone	2
414 Pixe Dr. Four Oaks NC 27524 Address	2// 49 License #
RA Jackson	<del></del>
Signature of Officer(s) of Corporation <u>Mechanical Permit Information</u> Mech Cost \$_	
Description of Work New Courtry chica	# Units
Starbanson Hts + Ain 919	329 0686
Mechanical Contractor's Company Name Telepho	one
1051-B Honeyett Rd. B	18699
Address	License #
Signature Officer(\$) of Corporation  Plumbing Permit Information Plumb Cost \$	· ·
Description of Work New Canstruction	# Baths 2
Plumbing Contractor's Company Name  9100  Telepho	- <u>424-67/2</u> one
32 42 Mid Pin Ro. Forgette cille	07756-P1
Nonce Ochson Signature at Officer(s) of Corporation	License #
Tation Droughtion 579 Old Drug Stor Rd.	919-661 0999
Insulation Contractor's Company Name & Address	Telephone
Con the second	÷

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

THE MIDE SIGNE	so applicant for Building Perint # being the:
	_ General Contractor
	_Owner
	Officer/Agent of the Contractor or Owner
	firm under penalties of perjury that the person(s), firm(s) or corporation(s) performing th 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.
Department iss insurance prior	on the project for which this permit is sought it is understood that the Central Permitting suing the permit may require certificates of coverage of worker's compensation to issuance of the permit and at any time during the permitted work from any person, ion carrying out the work.
Firm Name: U	YOUN CONSTANCTION
Sign/Title:	The Sygnisted
Date:	28-08

Commercial Jo <u>Sprinkle</u>	obs must fill out this portion r System Information	
Sprinkler Contractor's Company Name	Contact & Telephone	<del></del>
Address	License #	<del></del>
Signature of Officer(s) of Corporation  Fire Alarr	m System Information	
Fire Alarm Contractor's Company Name	Contact & Telephone	<del></del>
Address	License #	<del></del>
Signature of Officer(s) of Corporation <u>Driveway Access</u> - NC Department of Tra	ansportation Driveway Access/Permit? Yes	No
Homeowners Anniv	ing to Build Their Own Howe	
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 Or	wners Exemption.
Questionnaire per G.S. 87-14 Regulations as	s to Issue of Building Permits (Memo availa	ble upon request)
1. Do you own the land on which this buil	Iding will be constructed? yes	no
2. Have you hired or intend to hire an ind the project?		onstruction of
3. Do you intend to directly control & sup-	ervise construction activities? yes	sno
4. Do you intend to schedule, contract, or be done?	r directly pay for all phases of constru-	
5. Do you intend to personally occupy the following completion of construction and d creates the presumption under law that you	lo you understand that if you do not do	nonths o so, it
	yes	no
Sign & date		
I hereby certify that I have the authority to make reand that the construction will conform to the reamed that the construction will conform to the reamed that the construction will conform to the reamed that the contractors is correct as known to me and if any contractors is correct as known to me and if any contractors is correct as known to me and if any contractors is correct as known to me and if any contractors is considered.	gulations in the Building, Electrical, Plumbi g Ordinance. I state the information on the changes occur including listed contractors, single frmit changes or proposed use changes. I can	ng and above te plan, tify it is
Signature of Owner/Contractor/Officer(s) of Corpor	5 31 98	

Plan Box Number AA-13

Job Name WVNN

Date: 9-17-08

Required Inspections for SFA/SFD

Appl. # 08 500 00 7 | Valuation # 153,008

Sq. Feet 2355

## 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	R*Plumb. Under Slab
40	Four Trade Rough In
40	Four Trade Rough In> 2500
10	Have Trade Rough In
40	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
<b>50</b>	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
60	One Trade Final > 2500
999	Envir. Operations Permit
	Citta. Operations remit