

* 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 #

20079

Harnett County Central Permitting

PO Box 65 Lillington, NC 27546

Phone 910-893-7525 Fax 910-893-2793 www.hamatt.org

Application for Residential Building and Trades Permit

SCANNED
5-15-08
DATE

Owner's Name: Silverado Homes LLC Date: 5-13-08

Site Address: _____ Phone: 892-4345

Directions to job site from Lillington: 27 W / (TB) on Hower (TL) on Trail Rider

Subdivision: Persimmon Hill Lot: 8

Description of Proposed Work: _____ #Bedrooms: 3

Heated SF 2498 Unheated SF 576 Finished Rec Room? 436 Crawl Space () Slab

General Contractor Information

Cumberland Homes 910-892-4345

Building Contractor's Company Name Telephone

PO Box 727 Dunn, NC 28335 59493

Address License #

Dany Harris

Must sign & fill out second page

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

Electrical Permit Information

Description of Work New Service Size: 200 Amps TPole no

Wester + Pace 919-499-5389

Electrical Contractor's Company Name Telephone

546 Leslie Dr. Sanford, NC 12007-4

Address License #

William Westar

Signature of Officer(s) of Corporation

Mechanical Permit Information

Description of Work New

Jacksons Heating + Air 910-891-5410

Mechanical Contractor's Company Name Telephone

PO Box 82 Benson, NC 23670

Address License #

David Jackson

Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work New # Baths 2 1/2

Glover Contract Plumbing 910-892-1612

Plumbing Contractor's Company Name Telephone

PO Box 726 Coats, NC 23160

Address License #

Shawn Glover

Signature of Officer(s) of Corporation

Insulation Permit Information

Tri-City Insulation 418 Person St. Fay, NC 910-486-8855

Insulation Contractor's Company Name & Address Telephone

Plan Box Number AA-2

Job Name SILVERADI

Date: 5-16-05

Required Inspections for SFA/SFD

Appl. # 0856020079

Valuation \$199,722

Sq. Feet 3074

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 type="checkbox"/>	Open Floor
30-999	<input checked="" type="checkbox"/>	R* Bldg. Slab Insp.
30-999	<input type="checkbox"/>	R* Elec. Under Slab
30-999	<input checked="" 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

HARNETT COUNTY DEPARTMENT OF PUBLIC UTILITIES

Water User's Agreement

Form Must be Completed in Full Before Service is Made Available. I.D is Required.

20079

Today's Date <u>5-13-08</u> Date Service Requested: <u>wild call</u>	<p style="text-align: center;">*Deposits shown apply for customers with approved credit only!</p> <table style="width: 100%; border: none;"> <tr> <td style="padding: 2px;">Fees Due: Deposit, Owner, Water</td> <td style="text-align: right; padding: 2px;">\$25</td> <td style="padding: 2px;">Connection Fee,</td> <td></td> </tr> <tr> <td style="padding: 2px;">Deposit, Owner, Sewer</td> <td style="text-align: right; padding: 2px;">\$25</td> <td style="padding: 2px;">all accounts:</td> <td style="text-align: right; padding: 2px;">\$15</td> </tr> <tr> <td style="padding: 2px;">Deposit, Rental, Water</td> <td style="text-align: right; padding: 2px;">\$50</td> <td style="padding: 2px;">Meter Fee:</td> <td style="text-align: right; padding: 2px;">\$70</td> </tr> <tr> <td style="padding: 2px;">Deposit, Rental, Sewer</td> <td style="text-align: right; padding: 2px;">\$50</td> <td></td> <td></td> </tr> </table>	Fees Due: Deposit, Owner, Water	\$25	Connection Fee,		Deposit, Owner, Sewer	\$25	all accounts:	\$15	Deposit, Rental, Water	\$50	Meter Fee:	\$70	Deposit, Rental, Sewer	\$50		
Fees Due: Deposit, Owner, Water	\$25	Connection Fee,															
Deposit, Owner, Sewer	\$25	all accounts:	\$15														
Deposit, Rental, Water	\$50	Meter Fee:	\$70														
Deposit, Rental, Sewer	\$50																

This agreement is to request Harnett County Department of Public Utilities through normal procedures and in accordance with the District's Rules and Regulations, to provide water and/or sewer service connections at the following location:

Please Print:
 Service Address: Trail Rider Lane Lot # 8 Landlord: _____

Applicant's Name: Silverado Homes

Applicant's Social Security #: _____ DL#: _____ Birthdate: _____

Co-Applicant's Name: _____

Co-App's Social Security #: _____ DL#: _____ Birthdate: _____

Applicant's Billing Address: PO Box 777

Town: Dunn State: NC Zip: 28335

Home Phone #: 897-4345 Cell Phone #: _____

Previous Address: _____

Employer's Name: _____ Phone #: _____


Employer's Address: _____

Co-Applicant's Employer: _____ Phone #: _____

Name of Nearest Relative: _____ Phone #: _____

Mailing Address: _____

I, the undersigned, do agree to abide by the rules and regulations of the Harnett County Department of Public Utilities. Should I fail to make all payments on time when due as stated on the WATER/SEWER bill, the department has the right to disconnect my services without further notice. In order for service to be restored, I will be required to pay ALL DUE amounts plus a \$30 reconnect fee. Any fees resulting from court action to collect on an account will be the responsibility of the customer. Any FINAL BILLS with a credit balance of less than \$1.00 will not be refunded. Property owners will be responsible for a monthly bill regardless of whether water and/or sewer is being used, until the property is sold or rented. By signing this application, you are agreeing that you are at least 18 years of age.

Customer Signature: 

Amount Paid: _____	Cash: _____	Check: _____	Account #: <u>LID 85899/CID</u>
Account # Transferred From: _____		Date To Turn Off: _____	
Address of Transferred Account: _____		Turn On: _____	Read Only: _____ Install: _____