

3

SCANNED
9-4-08
DATE

Application # 08 5 00 20228

* 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.

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2783 www.harnett.org/permits

Application for Residential Building and Trades Permit

Owner's Name: Horace + Tracey Small Date: 8/13/08

Site Address: Walker Rd. Phone: 910 670 2355

Directions to job site from Lillington: 401 s to (L) McLean Chapel Rd to (U) Wise Rd to (R) Walker Road.

Subdivision: N/A Lot: _____

Description of Proposed Work: Single Family Dwelling #Bedrooms: 5

Heated SF 3813 Unheated SF 795 Finished Rec Room? _____ Crawl Space Slab ()

General Contractor Information

Canady Builders Inc. 910-641-2086
Building Contractor's Company Name Telephone

8707 Sweetmeadow Rd Colfax NC 29235 63497
Address License #

Wiley R Canady Jr
Signature of Owner/Contractor/Officer(s) of Corporation Must sign & fill out second page

Electrical Permit Information

Description of Work Install Electrical Service Size: 100 Amps TPole: no

Teal Electric 910-990-5635
Electrical Contractor's Company Name Telephone

121 Hawley Bidge La Duan 28334 24870U
Address License #

Andy Jackson
Signature of Officer(s) of Corporation

Mechanical/HVAC Permit Information

Description of Work Install Hvac
Technical Services Heating & Cooling Inc 910-686-8174
Mechanical Contractor's Company Name Telephone

PO Box 10164 Wilmington 28404 14271
Address License #

Wiley R Canady Jr
Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work Install Plumbing # Baths 3, 5
Sasser Plumbing 1919-669-6872
Plumbing Contractor's Company Name Telephone

1720 Braswell Rd Smithfield 27577 13236
Address License #

Picky Sasser
Signature of Officer(s) of Corporation

Insulation Permit Information

Eastern Insulation PO Box 2583 Wilmington NC 28401 910-251-1911
Insulation Contractor's Company Name & Address Telephone

Application # _____

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 Harnett 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 Harnett County Central Permitting Department of any and all changes.

Wiley K Canady Jr
Signature of Owner/Contractor/Officer(s) of Corporation

08-14-2008
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: Canady Builders Inc.

Sign w/Title: Wiley K Canady Jr President Date: 08-14-2008

Plan Box Number D-1

Job Name HORACE SMALL

Date: 9-3-08

Required Inspections for SFA/SFD

Appl. # 0850020228
Valuation \$282,041
Sq. Feet 4341

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		Three 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
50	✓	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