* 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.

ection below to be filled out by er performing work. Must be owner ed contractor. Address, company phone must match information on	Harnett County C PO Box 65 Lillin Telephone Number 910-8 Application for Build	Central Permitting gton, NC 27546 193-7525 www.harnett.org	08500200
Oursels Name:			8.7-08
Owner's Name:			
Address: 30550ld	Buis Crack	C Ld literal Phone	e: _ /
Directions to job site from Lilling	gton: 401,00,	about 5 m	16/25
Millbroxy,	ou Licht	-	-
Subdivision:	18	1 at:	19
	-arch		1-1-
Construction Type: (Please Ch			
New Moved Hou	use Res	sidential Co	emmercial
Renovation Addition	Other Mod	dular Mu	liti-Family
Total Project Cost:	Description of Propose	d Work:	
	General Contrac	tor Information	
Heated SFCrawl Space	e () Buildin	g Construction Cost \$ _	
Unheated SFSlab ()	// Acres i	Disturbed	Stories/
Dary Lynx	Mughes	919-669- Telephone	5365
Building Contractor's Company	Name J \	Telephone	- 20
			41587
Address			License #
of Ann	May 1		
Signature of Owner/Contractor	Officens) of Corporation	- Must sign back of form & v	vorkers comp
	Electrical Perm	it Information	romaro comp
Description of Work			
TS Pole: Yes () No () Und	lerground () Overhe	ad ()	
Permanent Service: Undergrou			
Kex A Deav Elect R	icit Continuetor	919 592 428	2
HIGGINGS CONTROL COMPAN	v Nonec	Lalanhana	
8039 Konn elec Nort Lo	Filow Spring NC.	27592	5748-2
Address	7 - 1		License #
Rex along			
Signature of Officer(s) of Corpo	pration		
	Mechanical Perr	nit Information	
Description of WorkNumber of Units			
Number of Units	_ Type System	Mechanical C	ost \$
			3033
Mechanical Contractor's Compa		Telephone	
Address 1539 who corporations of Corporations of Officer(s) of Corporations of	A.C INC.		12655-13
Address 1539 wasc	5 teph = NSUM	1 1301	License #
Hally Sics	11C. 2754	40	
Signature of Officer(s) of Corpo	ration		
orginatore or officer(s) or corpor	Plumbing Perm	it Information	
Description of Work			
Description of Work Number of Baths		Plumbing Cost \$	
11 Ker Dlanking	To. INC.	919.6	19.0195
I/O TIXO I FUNDINA C	y Name	Telephone	
Plumbing Contractor's Company	· /	57	14087
Plumbing Contractor's Company	USD ALC. 220		, , - u /
NEW Plansing Contractor's Company POBOY 1239 ANG Address	TER N.C. 275		l icense #
Plumbing Contractor's Company PoBoy 1239 Awa Address	TIER N.C. 275		License #
Rich Wells			License #
Signature of Officer(s) of Corpor	ration	,	License #
Signature of Officer(s) of Corpor		,	License #
Signature of Officer(s) of Corpor	ration rmit Information Reside	,	License #

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. Signature of Owner/Contractor/Officer(s) of Corporation Date				
Signature of Owner/Contractor/Officer(s) of Corporation Date				
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:				
The undersigned applicant being the:				
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				
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:				
The undereigned 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				
The undereigned 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				
The undereigned 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.				
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				

Plan Box Number A-L+

Job Name GARY HYGHES

Date: 7-29-00

Required Inspections for SFA/SFD

Appl. # 0850020632Valuation 4167,756Sq. Feet 2582

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
60	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
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