* 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 # 08 500 709 60

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: Jimmy alonga Byrd	Date: 11-17-08	
Site Address: 10+54 Ray Burckel Phone	919-499-8424	
Directions to job site from Lillington: HOI'S Out Si Liel		
on Starkyandrd left on Ray Bynd.	3	
Subdivision: Stan Uan Estates 2	Lot: 54	
Description of Proposed Work: non Construction	#Bedrooms: 3	
Heated SF Finished Rec Room?	Crawl Space () Slab (V	
Steve themas General Contractor Information	_	
Building Contractor's Company Name Telephone	6-4069	
POBON 875 Brandian NC2 7505	<i>59452</i>	
Address 1	License #	
Must sign & fill o Signature of Owner/Contractor/Officer(s) of Corporation	out second page	
Electrical Permit Information		
Description of Work now Construction Service Size: 800		
Wester the Starting 919-49 Electrical Contractor's Company Name Telephone	9-3946	
546 Leslierd Sanford NC27330	180-7-17	
Address .	License #	
William Wester		
Signature of Officer(s) of Corporation Mechanical/HVAC Permit Information		
Description of Work New HVAC Sucker		
Yellow Dort 919-	X4-8686	
Mechanical Contractor's Company Name Teleph	one	
1203 New Hope Rd Kaluch Nr 27610	06706	
Address	License #	
Signature of Officer(s) of Corporation		
Plumbing Permit Information	n	
Description of Work NPD Construction	# Baths 2	
	0-814-0218	
Plumbing Contractor's Company Name Teleph	one	
490 Clark Rd Lillington NC 27546 Address	<u> </u>	
rudi 699	License #	
Signature of Officer(s) of Corporation		
Insulation Permit Information		
Insulation Contractor's Company Name & Address	Telephone	
	•	

Hamasumana Annising to Duttet The Land		
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)		
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?		
Do you intend to directly control & supervise construction activities? yes no		
Do you intend to schedule, contract, or directly pay for all phases of construction work to be done?		
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 Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:		
Affidavit for Worker's Compensation N.C.G.S. 87-14		
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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		
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.		
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Harnett County Central Permitting PO Box 65 Lillington, NC 27546 Telephone Number 910-893-4759

Certification of Work Performed By Owner/Contractor

Owner (s) of Structure:	
Owner (s) Telephone:	·
Owner (s) Mailing Address:	
Construction or Site Address:	
Directions to Job:	
Subdivision:	Lot #:
I JAMIE John	have provided or will provide the
Plumbing lab	or on this structure. I am the owner or hold a
	which entitles me to perform such work on
the above structure legally. All work shall of	comply with the State Building Code and all
other applicable State & local laws, ordinan-	ces and regulations.
Owner (s) signature:	Date:
Contractor's signature: Jami John	Date:
	Date:
Contractor's License: 31649	

	AU
Plan Box Number_	<i> </i>

Job Name Jimmy BURD

Date: 11-14-08

Required Inspections for SFA/SFD

Appl. # 0850020960 Valuation # 86,347 Sq. Feet 1329

Sequence

10	De Diam Road
10-30	R* Bldg. Footing
20	R* Elec. Temp Service Pol
20	R* Building Foundation
30-999	Address Confirmation
30-999	Open Floor
30-999	R* Bldg. Slab Insp.
30-999	R* Elec. Under Slab
40	R*Plumb. Under Slab
40	Four Trade Rough In
10	Four Trade Rough In> 2500
40	Those Trade Rough In
40	Three Trade Rough In> 2500
40	Two Trade Rough In
. ————————————————————————————————————	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	
999	One Trade Final > 2500
	Envir. Operations Permit