

Last 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 # _____
Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
Telephone Number 910-893-7525 www.harnett.org
Application for Building and Trade Permit

21480

Owner's Name: Shaw A Partnership Date: 1 22 09
Address: 1248 Bill Shaw Rd Spring Lake NC Phone: 910 483 2904
Directions to job site from Lillington: Hwy 210 S approx 10 miles right onto SR 1244
left onto SR 1120 Left onto Sierra Trail Right onto S. Dakota 5th Lot on L
Subdivision: Sierra Village Lot: 47

Construction Type: (Please Check) Building Use: (Please Check)
 New Moved House Residential Commercial
 Renovation Addition Other Modular Multi-Family

Total Project Cost: 199,400 Description of Proposed Work: Single family home

General Contractor Information

Heated SF 1974 Crawl Space () Building Construction Cost \$ 180,227.00
Unheated SF 746 Slab () Acres Disturbed .345 Stories 2

Shaw Const Co Inc 910 483 2904
Building Contractor's Company Name Telephone

1248 Bill Shaw Rd Spring Lake NC 4548 unL
Address License #

Kerlth A Shaw
Signature of Owner/Contractor/Officer(s) of Corporation - Must sign back of form & workers comp

Electrical Permit Information

Description of Work wire dwelling Electrical Cost \$ 4689
TS Pole: Yes No () Underground Overhead ()
Permanent Service: Underground Overhead () Service Size: 200 Amps

Allman Electric Corp 485 8617
Electrical Contractor's Company Name Telephone

345 Wilkes Rd. Fay N.C. 6136 U
Address License #

John B. ...
Signature of Officer(s) of Corporation

Mechanical Permit Information

Description of Work Install heat pumps
Number of Units _____ Type System Split Mechanical Cost \$ 7134

Total Systems Inc 910-436-3450
Mechanical Contractor's Company Name Telephone

13341 Hwy 210 S 28846
Address License #

...
Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work Residential Plumbing
Number of Baths 2 Plumbing Cost \$ 7350.00

Eddie's Plbg Serv INC 910-630-1550
Plumbing Contractor's Company Name Telephone

302 Palestine Rd Linden N.C. 28356 18177
Address License #

Edmond B. Harris
Signature of Officer(s) of Corporation

Insulation Permit Information Residential Other () Not Required ()

Blown Rite Fayetteville NC 483 8191
Insulation Contractor's Company Name & Address Telephone

**Commercial Jobs must fill out this portion
Sprinkler System Information**

Sprinkler Contractor's Company Name

Contact & Telephone

Address

License #

Signature of Officer(s) of Corporation

Fire Alarm System Information

Fire Alarm Contractor's Company Name

Contact & Telephone

Address

License #

Signature of Officer(s) of Corporation

Driveway Access - NC Department of Transportation Driveway Access/Permit? Yes No

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

Sign & date

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, 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.

Kenneth A Shaw
Signature of Owner/Contractor/Officer(s) of Corporation

1-15-09
Date

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

The undersigned applicant for Building Permit # _____ 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/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.

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.

Firm Name: Show Const Co Inc

Sign/Title: Kenneth Show President

Date: 1 22 09

CRAWL GARAGE

Plan Box Number G-5

Job Name SHAW CONST.

Date: 1-22-09

Required Inspections for SFA/SFD

Appl. # 0950021486
Valuation \$163,859
Sq. Feet 2522

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 checked="" type="checkbox"/>	Open Floor
30-999	<input type="checkbox"/>	R* Bldg. Slab Insp.
30-999	<input type="checkbox"/>	R* Elec. Under Slab
30-999	<input 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
50	<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