

ADDRESS : 182 WINGED FOOT DR
CONTRACTOR : MOSS KENNETH A
OWNER : EVEN PAR DEVELOPMENT LLC
PARCEL : 01-0525- - -0062- -16-
APPL NUMBER: 09-50021553 CP NEW RESIDENTIAL (SFD)
DIRECTIONS : 210 S LEFT ON LASATER RD ON LEFT ON
WALNUT GROVE DR LEFT ON WINGED FOOT
DRIVE LOT ON RIGHT LOT 7 JB

SUBDIV: WALNUT GROVE 37LOTS
PHONE : (910) 893-4875
PHONE :

STRUCTURE: 000 000 50X50 3BDR CRAWL W/ GARAGE & DECK

FLOOD ZONE : FLOOD ZONE X

BEDROOMS : 3.00

SEPTIC - EXISTING? : NEW

PROPOSED USE : SFD

WATER SUPPLY : COUNTY

PERMIT: CPSE 00 CP * SFD

TYP/SP	REQUESTED COMPLETED	INSP RESULT	DESCRIPTION RESULTS/COMMENTS
B101	4/08/09	DT	R*BLDG FOOTING / TEMP SVC POLE VRU #: 001752945
	4/20/09	AP	VOICE MESSAGE LEFT
A814	4/21/09	TI	ADDRESS CONFIRMATION VRU #: 001758044
B103	4/21/09	TI	R*BLDG FOUND & TEMP SVC POLE TIME: 17:00 VRU #: 001757533

4/21/09 AP DT

COMMENTS AND NOTES

ADDRESS : 182 WINGED FOOT DR
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B105 01	4/23/09	TI	R*OPEN FLOOR VRU #: 001758896

4239 ~~AP~~
AP MR

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	4/21/09	AP	
B105 01	4/23/09	MR	R*OPEN FLOOR VRU #: 001758896
	4/23/09	AP	
R425 01	5/19/09	TI	FOUR TRADE ROUGH IN TIME: 17:00 VRU #: 001770114

5-19-09 DABS

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R425 01	5/19/09	BS	FOUR TRADE ROUGH IN TIME: 17:00 VRU #: 001770114
	5/19/09	DA	1. Firestopswitch wire at laundry room And bottom plate at front door. Also HVAC linesets. 2. Where front wall top plate intersects LVL near front door, install angle steel plates either side to tie wall plate to LVL. 3. PLAN calls for a 3 ply 2x10 beam over rear bedroom entry door/closet doors (upstairs bed #2). 2 ply is installed. ok to insulate/side, DO NOT INSTALL REAR PORCH CEILING BEFORE INSULATION INSPECTION
I129 01	5/22/09	TI	R*INSULATION INSPECTION TIME: 17:00 VRU #: 001771567
	<u>5/22/09</u>	<u>AP DT</u>	
R425 02	5/22/09	TI	FOUR TRADE ROUGH IN TIME: 17:00 VRU #: 001771559
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H824 01	7/07/09	OT	✓ENVIR. OPERATIONS PERMIT TIME: 17:00 VRU #: 001791698
	7/07/09	AP	T/S: 07/08/2009 10:16 AM S STEWART ----- T/S: 07/08/2009 10:16 AM S STEWART -----
R431 01	9/09/09	TI	FOUR TRADE FINAL >2500 VRU #: 001818821
	9/09/09	CA	T/S: 09/09/2009 08:04 AM NTART -----
R429 01	9/10/09	TI	FOUR TRADE FINAL TIME: 17:00 VRU #: 001819523
	9/10/09	DA	T/S: 09/09/2009 12:40 PM VBROWN -----

COMMENTS AND NOTES

VIOLATION NOTICE

DO NOT REMOVE!

Harnett County Inspection Department

108 East Front Street • P.O. Box 65

Lillington, NC 27546

Phone: (910) 893-7525 Ext. 1 • Fax: (910) 893-2793

Job Name: Kenneth Moss Date: 9/10/09

Address: 182 Winged Foot Dr

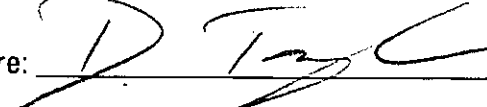
Lot No.: 7 Permit No.: _____

(Check Box for Violation)

- | | | | | | | | |
|-------------------------------------|-------------------------------------|----------------------------------|--|-------------------------------------|---------------------------------------|---------------------------------|--------------------------------------|
| <input type="checkbox"/> Footing | <input type="checkbox"/> Foundation | <input type="checkbox"/> Bldg. | <input type="checkbox"/> Elec. | <input type="checkbox"/> Plumb. | <input type="checkbox"/> Mech. | <input type="checkbox"/> Insul. | <input type="checkbox"/> Floor Fram. |
| <input type="checkbox"/> Floor Slab | <input type="checkbox"/> MFG. Home | <input type="checkbox"/> Modular | <input type="checkbox"/> Damp/Water Proof. | <input type="checkbox"/> Structural | <input type="checkbox"/> Wall Sheath. | <input type="checkbox"/> Other | |

Violations Found: 1) Handrail at front steps must sustain 200lb load in any direction
2) Garage door must be wind rated.
3) Rear bottom step greater than 8 1/4 inches
4) Spare bath exhaust duct not connected to vent.

Code Enforcement Official

Signature:  Date: _____

It is unlawful for any subcontractor, general contractor, or owner to cover or cause to be covered any part of the work with flooring, sheetrock, earth or other material until the proper inspector had ample time to approve the installation

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R431 02	9/14/09 <u>9/14/09</u>	TI <u>AP DT</u>	FOUR TRADE FINAL >2500 VRU #: 001820569

**COUNTY OF HARNETT
DEPARTMENT OF BUILDING INSPECTION
AND PLANNING/DEVELOPMENT
CERTIFICATE OF OCCUPANCY**

This certificate issued pursuant to the requirements of Section 105 of the North Carolina State Building Code and the Harnett County Zoning Ordinance certifies at the time of issuance this structure was in compliance with the various ordinances of the County of Harnett regulating development and building construction or use. For the following:

Use Classification: Residential Conditional Use Permit No.: _____
Type of Construction: _____ Building Permit No.: _____
Owner of Building: Kenneth Moss Electrical Permit No.: _____
Building Address: 182 Winged Foot Dr Insulation Permit No.: _____
Zoning District: _____ Plumbing Permit No.: 09-50021553
Zoning Permit No.: _____ Mech. Permit No.: _____
Date: 9/14/09 Envir. C.O. No.: _____

[Signature]
Building Official

Zoning Official