

* 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
Phone 910-893-7525 Fax 910-893-2793 www.harnett.org

Application for Residential Building and Trades Permit

Owner's Name: New Century Homes, LLC Date: 3/18/09
Site Address: Lot #121 Ashford Phone: 910-892-4345
Directions to job site from Lillington: 27 W from Lillington / (TL) on
NC 24 E / (TL) on Sparks Rd / (TL) on
Ashford Way / (TL) on WynnGate Dr. / Lot on Left
Subdivision: Ashford Lot: 121
Description of Proposed Work: One Story w/ Rec Room #Bedrooms: 3
Heated SF 1849 Unheated SF 440 Finished Rec Room? Yes Crawl Space () Slab (x)

General Contractor Information

Cumberland Homes 910-892-4345
Building Contractor's Company Name Telephone
PO Box 727 Dunn, NC 28335 59493
Address License #
Danny Harris Must sign & fill out second page
Signature of Owner/Contractor/Officer(s) of Corporation

Electrical Permit Information

Description of Work New Service Size: 200 Amps TPole yes no
Wester + Pace 919-499-5389
Electrical Contractor's Company Name Telephone
546 Leslie Dr. Sanford, NC 12007-U
Address License #
William Wester
Signature of Officer(s) of Corporation

Mechanical Permit Information

Description of Work New
Jacksons Heating + Air 910-891-5410
Mechanical Contractor's Company Name Telephone
PO Box 82 Benson, NC 23670
Address License #
David Jackson
Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work New # Baths 2
Curtis Faircloth Plumbing 910-531-3111
Plumbing Contractor's Company Name Telephone
5056 Elizabethtown Hwy Roseboro, NC 28382 7269
Address License #
Curtis Faircloth
Signature of Officer(s) of Corporation

Insulation Permit Information

Tri-City Insulation 418 Person St. Fay., NC 910-486-8855
Insulation Contractor's Company Name & Address Telephone

Change
of
Contractor

Application # 09-50021799

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793
www.harnett.org/permits

Certification of Work Performed By Owner/Contractor
(Individual Trade Application)

Owner (s) of Structure: New Century Homes, LLC Phone: 910-892-4345
Owner (s) Mailing Address: P.O. Box 727 Dunn, NC 28335

Land Owner Name (s): New Century Homes, LLC Phone: 910-892-4345
Construction or Site Address: Lot #121 Ashford / 89 Wyndgate Drive
PIN or Parcel # from GIS: _____

Job Cost: \$68,300.00 Description of Work to be done Two Story w/
Recreational Room

Mechanical: New Unit With Ductwork ___ New Unit Without Ductwork ___ Gas Piping ___

Electrical*: 200 Amp ___ <200 Amp ___ Service Change ___ Service Reconnect ___ Other ___
* For Progress Energy customers we need the premise number

Plumbing: Water/Sewer Tap Septic Number of Baths 2 Water Heater 50 gal.

Specific Directions to Job from Lillington:
27 West End Lillington, Turn Left on NC 24 E, Turn
Right on Marks Rd, Turn Left into Ashford S/D,
Turn Right on Wyndgate Drive, Lot on Left

Subdivision: Ashford Lot #: 121

I Shawn Glover will provide the Plumbing labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 73160, which entitles me to
perform such work on the above structure legally. All work shall comply with the State Building Code
and all other applicable State and local laws, ordinances and regulations.

Structure owner(s) signature: Shawn Glover Date: 3/25/09

Company Name: Glover Contract Plumbing Phone: 910-892-1612
Address: P.O. Box 726 Coats, NC
County: Harnett County Contractor's License #: 73160
Contractor's Signature: Shawn Glover Date: 3/25/09

*Company name, address, & phone must match information on 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.

D. J. ...
Signature of Owner/Contractor/Officer(s) of Corporation

3/18/09
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: Cumberland Homes

Sign w/Title: D. J. ... /owner Date: 3/18/09

SLAB w/ GARAGE

Plan Box Number AA-2

Job Name WASHE FORD

Date: 3-24-09

Required Inspections for SFA/SFD

Appl. # 0950021799

Valuation \$146,445

Sq. Feet 2254

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 type="checkbox"/>	Open Floor
30-999	<input checked="" type="checkbox"/>	R* Bldg. Slab Insp.
30-999	<input type="checkbox"/>	R* Elec. Under Slab
30-999	<input checked="" type="checkbox"/>	R* Plumb. Under Slab
40	<input checked="" type="checkbox"/>	Four Trade Rough In
40	<input 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 checked="" type="checkbox"/>	Four Trade Final
60	<input 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