* 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.

950021965

Application #

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: Eric + Jessica Anderson Date: 5-12-09
Site Address:Phone:
Directions to job site from Lillington: Huy 401 South, LT. on Titan Roberts Rd, LT. on James Tant Rd, LT. at End
Roberts Ro, LT. on James Tant Rd, LT. at End
on Pavement
Subdivision:Lot:
Description of Proposed Work: New Home #Bedrooms:
Heated SF 2800 Unheated SF Finished Rec Room? Crawl Space (/ Slab (General Contractor Information
Jeffrey L. Proe 910 -814 - 7475 Building Contractor's Company Name Telephone
2568 Old Buies Caule 100. Angiru, N.C. 41084 Address
Must sign & fill out second page Signature of Owner/Ontractor/Officer(s) of Corporation
Description of Work Service Size: 200 Amps TPole: yes/no
Wes Matthews Presidential Services 919-868-8187 Electrical Contractor's Company Name Telephone
5781 Rauls Chunh Ml. Fuguer Vaniva 21204 Address License #
() on Dawley
Signature of Officer(s) of Corporation Mechanical/HVAC Permit Information
Description of Work New 2 units
Description of Work New 2 units Indoor Comfort Andy Watteins 910 - 897 - 185 3 Mechanical Contractor's Company Name 1953 Old Stage Rd, Erwin, N.C. 43-17615 Address License #
1953 Old Stage Rdy Erwin, N.C. 43-17615
Address License #
Signature of Officer(s) of Corporation
Description of Work# Baths 31/2
Straight Flush Plumbing 919-422-8044 Plumbing Contractor's Company Name Telephone
978 Mitchel Rt. Lillington, N.C. 23655 Address License #
Ana milla
Signature of Officer(s) of Corporation Insulation Permit Information
Insulation Contractor's Company Name & Address Telephone

4 1 1 4 5 0 1 T 1 5 5 1 1 5		
Homeowners Applying to Build Their Own Home *Please Apswer 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? 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 <u>any</u> 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. EXPIRED PERMIT FEES - 6 Months to 2 years permit re-issue fee is \$150.00. After 2 years re-issue fee is as per current fee schedule.		
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		
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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 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		
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		
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.		
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Plan Box Number B - 2

Job Name Pope Custom Horico

Date: 4-23-09

Required Inspections for SFA/SFD

Appl. # 09.5002 | 965 Valuation # 209, 858 Sq. Feet 3,230

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.
3 0-999	R* Elec. Under Slab
30-999	R*Plumb. Under Slab
40	Four Trade Beach I
40	Four Trade Rough In
10	Four Trade Rough In> 2500
40_	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
50	One Trade Rough In > 2500
60	R* Insulation
50	Four Trade Final
60	Four Trade Final > 2500
60	Three Trade Final
60	Three Trade Final > 2500
60	Two Trade Final
	Two Trade Final > 2500
60	One Trade Final
60	One Trade Final > 2500
999	Envir. Operations Permit
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