Harnett County Central Permitting PO Box 65 Lillington, NC 27546 910-893-4759 www.harnett.org

Owner's Name: Wayer Wilk Wayer (O) For Date:				
Address: North Went DR Phone 90 1030 -21 Directions to job site: Hull Al W To Tixou Rd. Right and all Asal				
let on North Willes DR.				
Subdivision:Lot:Lot:Lot:Lot:				
New Residential Modular				
Addition Commercial Multi-Family				
Other Description of Proposed Work: Description of Proposed Work:				
4 6 6 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7				
Heated SF Crawl Space () Unheated SF Siab () Heated SF Stories () Heated SF Siab () He				
Weaver Development CO., Inc. 910-630-2100 Building Contractor's Company Name Telephone				
P.O. Box 53786, Fayett 11e, NC 28305 # 26962 Address License #				
Signature of Officer(s) of Corporation				
Electrical Permit Information //aa.700				
Description of Work <u>Install Electrical</u> Electrical Cost \$ 4000 TS Pole: Yes () No () Underground ()				
Permanent Sérvice: Underground () Överhead () Service Size: 200 Amps 919-718-1156				
Electrical Contractor's Company Name Telephone 1206 Pendergraff Rd. Sanford, NC 27330 # 18002-L				
Address License #				
Signature of Officer(s) of Corporation				
Mechanical Permit Information Description of Work Install Heat Pump				
Number of Units Type System Heat Pump Mechanical Cost \$ 5005				
P. 9, 20078 # 20078 License #				
Address # Signature of Officer(s Vof Corporation) License #				
Plumbing Permit Information				
Description of Work Install Plumbing Number of Baths Plumbing Cost \$				
H.F. Dorman Plumbing 910-483-7082 Plumbing Contractor's Company Name Telephone				
4225 Final Approach Dr. Fayetteville, NC 28312 # 04132 P1 Address 7/7 License #				
Signature of Officer(s) of Corporation				
Insulation Permit Information Residential (V) Other () Not Required ()				
Tri-City Insulation Insulation Contractor's Company Name 418 Person St. 910-486-8855 Address Fayetteville, NC Telephone				
78301				

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

The undersigned	d applicant for Building Permit #	being the:		
	Contractor Owner Officer/Agent of the Contractor or Owne	ər		
	nfirm under penalties of perjury that work set forth in the permit:	the person(s), firm(s) or	corporation(s)	
	Has/have three (3) or more employees compensation insurance to cover them		rkers'	
	Has/have one (1) or more subcontracte compensation insurance to cover them		ed workers'	
x	Has/have one (1) or more subcontracte workers' compensation insurance cove		wn policy of	
	Has/have not more than two (2) emplo	yees and no subcontractors	s.	
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: We	aver Development CO., Inc.			
By/Title	week Hall Source	5. Hall (Sug	es-)	
Date:		- <i>, </i>		

	Application # obs must fill out this portion or System Information	
Sprinkler Contractor's Company Name	Contact & Telephone	
Address License #		_
Signature of Officer(s) of Corporation Fire Alan	m System Information	
Fire Alarm Contractor's Company Name	Contact & Telephone	_
Address	License #	
Signature of Officer(s) of Corporation <u>Driveway Access</u> - NC Department of Tr	ransportation Driveway Access/Permit? Yes	No
	ying to Build Their Own Home Technician to determine if you qualify for permit under Own	ers Exemption.

Signature of Officer(s) of Corporation
<u>Driveway Access</u> - 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 <u>any</u> 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. Signature of Owner/Contractor/Officer(s) of Corporation Date

Job Name Weaver

Date: 4-27-09

Required Inspections for SFA/SFD

Appl. # 09 50021985
Valuation 139753
Sq. Feet 2151

Sequence

10 10-30 20 20 30-999 30-999 30-999 30-999 40 40 40 40 40 40 40 50 60 60 60 60 60	R* Bldg. Footing R* Elec. Temp Service Pole R* Building Foundation Address Confirmation Open Floor R* Bldg. Slab Insp. R* Elec. Under Slab R*Plumb. Under Slab Four Trade Rough In Four Trade Rough In Four Trade Rough In Three Trade Rough In Three Trade Rough In Two Trade Rough In One Trade Rough In One Trade Rough In One Trade Rough In One Trade Final Four Trade Final Four Trade Final Three Trade Final Two Trade Final Two Trade Final Two Trade Final
	One Trade Final
60	One Trade Final > 2500
999	Envir. Operations Permit