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
icense.

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Application #_

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.hamett.org/permits
ication for Residential Building and Trades Permit

Application for Residential E	suliding and Trades Permit
Owner's Name: Jason Price Const., Inc.	Date:
Site Address: Antique Court	
Directions to job site from Lillington: # 27 our	t of Ullington to they 87N.
Go about 1/2 mile, left him a	to with welch Rd. Go del
The way down road subdivision is	across tre street.
Subdivision: <u>Carolina Seasons</u>	Lot:
Description of Proposed Work: New Home	#Bedrooms:3
Heated SF 2833 Unheated SF 600 Finished R General Contract	ec Room? <u>YeS</u> Crawl Space () Slab (*/
Jasan Price Construction, Inc. Building Contractor's Company Name	(910) 814-4236 Telephone
170 Pine State St. Lillington.	
Address	License #
Signature of Owner/Contractor/Officer(s) of Corporation	Must sign & fill out second page
Clocking Der	nit Information e Size: 200 Amps TPole(yes)no
The state of the state of the	919- 258-0208
Tectrical Contractor's Company Name	Telephone
Rectrical Contractor's Company Name P.O. Box 384 Broadway 1. C. 27	505 11906-11
dd ess	Ficeuse #
Agnature of Officer(s) of Compration	
Mechanical/HVAC	Permit Information
Description of Work New Home	
Jackson's Heating + Alc. Inc	919-391-5410
Mochanical Contractor's Company Name	Telephone
POBOX 82 Benson, NC &	17564 <u>93610</u>
	David Jackson, Prosident
Signature of Officer(s) of Corporation	TYYOR ONCE TO VILLE CLANK
	mit Information
Description of Work New Home	# Baths 2 5
Glover Contract Plumbing Irec	2.0.010.050
Plumbing Contractor's Company Name	Telephone
PO Box 126	<u> 39/60</u>
Address Allun P. Wh	License #
Signature of Officer(s) of Corporation	wit to forward to m
<u> </u>	mit Information Old Drug Store Rd. (919) 661-0999
Jatum Insulation II, Inc. Ga	Telephone

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)		
Do you own the land on which this building will be constructed? yes no		
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		
and the state of the state of the same and institute and i		
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.		
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 7 / 3/09 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:		
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 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) and has obtained workers' compensation insurance to cover		
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		
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.		
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		

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SLAB

Plan Box Number 556

Job Name Jasa Vice

Date: 7-14-09

Required Inspections for SFA/SFD

Sequence

10 10-30 20 20 30-999 30-999 30-999 40 40 40 40 40 40 50 60 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* 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 Four Trade Final Four Trade Final Three Trade Final Three Trade Final Three Trade Final Two Trade Final Two Trade Final Two Trade Final Two Trade Final
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60	One Trade Final
299	One Trade Final > 2500
	Envir. Operations Permit