ach section below to be filled out by whomever performing work. Must be owner or liceneed contractor. Address, company name & phone must match information on license.

Application #	22531	

Harnett County Central Permitting PO Box 65 Lillington, NC 27546 910-893-7525 Fax 910-893-2793 www.harnett.org esidential Building and Trades Perm #Bedrooms Description of Proposed Work: Crawl Space () Slab (* Heated SF / 552 Unheated SF Finished Rec Room? General Contractor Information 910-892-4345 Cumberland Homes Telephone Building Contractor's Company Name 28335 727 Dunn, NC Address Must sign & fill out second page Signature of Owner/Contractor/Officer(s) of Corporation **Electrical Permit Information** Amps TPole yes no Service Size: 200 Description of Work New 919-499-5389 Wester + Pace Telephone Electrical Contractor's Company Name 546 Leslie Dr. Sanford Address ~ William Wester Signature of Officer(s) of Corporation Mechanical Permit Information Description of Work 910-891-5410 Jacksons Heating + Air Mechanical Contractor's Company Name Telephone 23670 Pa Bux 82 Benson NC License # Address Signature of Officer(s) of Corporation Plumbing Permit Information New Description of Work Signature of Officer(s) of Corporation **Insulation Permit Information** Tei-City Insulation 418 Person 5t.
Insulation Contractor's Company Name & Address

Арр	plication #
Homeowners Applying to Build The Please answer the following questions then see a Permit Technician to determine if Questionnaire per G.S. 87-14 Regulations as to Issue of Buildin	Fr Own Home f you qualify for permit under Owners Exemption. ing Permits (Memo available upon request)
1. Do you own the land on which this building will be constructed	ed?yesno
2. Have you hired or intend to hire an individual to superintend project?	
3. Do you intend to directly control & supervise construction ac	ctivities? yes no
4. Do you intend to schedule, contract, or directly pay for all ph done?	hases of construction work to be 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 that the construction will conform to the regulations in the Building, 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.

Signature of Owner/Contractor/Officer(s) of Corporation

carrying out the work.

Company or Name:_

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 one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover 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

SLAB

Ted. Brown

Plan Box Number AA /

Job Name Mre Branch

Date: 7-24-09

Required Inspections for SFA/SFD

Appl. # 69-5002253 / Valuation 135148

Sq. Feet 2080

Sequence

10	Re Dido m
10-30	R* Bldg. Footing
20	R* Elec. Temp Service Pole
20	
30-999	Autrois Confirmation
30-999	Open Floor
30-999	Re Bldg. Slab Insp.
30-999	R. Elec. Under Slab
40	R*Plumb. Under Slab
40	Four Trade Rough In
10	FOUR Made Rough ton a con-
40	TRUE ROUGH I
40	14400 LINGS Rough In Acad
40	
40	We linds Rough In 2000
40	
50	Une Trade Rough In > 2600
60	· · monthfol
50	Four Trade Final
60	Four Trade Final > 2500
60	Three Trade Final
60	Three Trade Final > 2500
60	Two Trade Final
60	Two Trade Final > 2500
60	One Trade Final
	One Trade re
999	One Trade Final > 2500
	Envir. Operations Permit