. CROSS RESISTED CONCRETE OR DO RESIST BOT DA encenter conforming work. Must be some or imported conforming. Address, company arms 8 phone must make internation on theres.

@polestion # 09-50022538

Tetaphone

Harnett County Control Permitting PO 80x 60 Lillington, NG 97548 910-809-7529 Fax 810-803-2707 season barren

	Building and Trad		8/13/09
Owner's Name: AQ Contracting Inc. Site Address: 38 Cross Roads Court			
Officerations to July afte from Littington: Rt 27 West to Left on T			
Diebt en Conse Donale Const		AACL DI	ive (Tillgell Flace)
Single de la company de la com			
Sibdivision: Tingen Place Lot.		ot: 39	
Description of Proposed Work: New Single Family Residentia	<u> </u>	Bedr	ooms: <u>3</u>
Heated SF 1668 Unheated SF 479 Finished R	ec Room? yes		Crawl Space (x)
AQ Contracting Inc.			
Building Contractor's Company Name	919-542-9893		
PO Box 1508, Pittsboro, NC 27312	Telephone		
Address 2			47496
The I Muse me			License #
Signature of Owner/Contractor/Offsetr(e) of Corporation	Must sign & fill out a	econd	page
Etectrical Perm	it information		
Description of Work Electrical Wiring Service		nos	TPole YES
Maida Electric, LLC	910-897-6216	•	
Electrical Contractor's Company Name	Tetephone		
34 Eagle Road, Coats, NC 27521			23491L
Thomas A Marola			License #
Signature of Officer(s) of Corporation			
Machanical/HVAC P	emit information		
Description of Work New Single Family Residential			
ARS / Rescue Rooter	919-828-514	<del></del> 7	<u>.</u>
Mechanical Contractor's Company Name	Yelephone	-	
517 Pylor Drive, Raleigh, NC 27606		•	16245
Address he o			License #
Still But			Prince Wide as
Signature of Officer(s) of Corporation			
Plumbing Permi	t information		
Description of Work Plumbing Per Code		athe	2.0
Hare's Plumbing Inc.	919-774-2482	11120	· · · · · · · · · · · · · · · · · · ·
	Telephone	<del></del>	
Plumbing Contractor's Company Name	F : =		19443
, , ,			
Pivmbing Confractor's Company Name  112 Swaringen Lane, Sanford, NC 27330  Address		<del> </del>	License #
Address  Address		. <del></del>	Ucense #
12 Swaringen Lane, Sanford, NC 27330		. <del></del>	Ucen <del>se</del> #

Insulation Contractor's Company Name & Address

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?  X 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? X yes no				
4. Do you intend to schedule, contract, or directly pay for all phases of construction work to be done?   X 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 Hamett 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.				
8/13/09				
Signature of Owner/Contractor/Officer(s) of Corporation Date				
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:				
X General Contractor X 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 A& Contracting Inc				
Sign w/Title:Date:				

CRAW! HG

Plan Box Number H G

Job Name Tinger Place

Date: 8-17-09

## Required Inspections for SFA/SFD

Appl. # 09-50022538Valuation 8139623Sq. Feet 2149

## 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.	
30-999	R* Elec. Under Slab	
30-999	R*Plumb. Under Slab	
40	Four Trade Rough In	
40	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	
40	One Trade Rough In > 2500	
50	R* Insulation	
60	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	
60	One Trade Final > 2500	
999	Envir. Operations Permit	
	•	