* 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

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: MALMETTO BUILDING INC Date: 9-2-09		
Site Address: 39 WALNUT GROVE DR. Phone: 9/9-795-02//		
Directions to job site from Lillington: Hwy 210 5 Townes Speing LAKE.		
T/L ONTO LASATE RO I MILE PAST SOUTH HARNETT		
ELEMENTY SCHOOL. SUBDIVISION IS 1/2 MILE ON LEFT		
Subdivision: WALWUT GROVE Lot: 2		
Description of Proposed Work: LESIAENTIAL CONSTRUCTION Bedrooms: 3		
Heated SF 2419 Unheated SF 300 Finished Rec Room? Y Crawl Space (+ Slab ()		
PALMETTO BUILDING IN (. 919-795-02//		
Po Box 1008 Holly Strings W CD570 Address License #		
Address License #		
Must sign & fill out second page Signature of Owner/Contractor/Officer(s) of Corporation		
Electrical Permit Information		
Description of Work ELECTRICAL R//N Service Size: 200 Amps TPole (yes)/no		
STANCIL - OWENS ELECTRIC 9/9-639-2073 Electrical Contractor's Company Name Telephone		
A 71		
STANCIL RO HNGIER NC 13075-L Address License #		
Signature of Officer(s) of Corporation		
Mechanical Permit Information		
Description of Work HEATING + AIR INSTALLATION		
Mechanical Contractor's Company Name 1539 WADE STEPHENSON KO. HOLLY SPRINGS 275VO 12655H3 Address Display #		
Mechanical Contractor's Company Name		
1539 WADE STEPHENSON KO. HOLLY OPRINGS 27540 12655H3		
Address License #		
Signature of Officer(s) of Corporation		
Plumbing Permit Information		
Description of Work Kumbini & Rin ov #Baths 2/2		
BARNES PLUMBING 919-639-0935		
Plumbing Contractor's Company Name Telephone		
POBOX 1207 ANGIOR NC 27501 17735		
Address License #		
Harry Barns		
Signature of Officer(s) of Corporation Insulation Permit Information		
INSULATING INC. 1212 HOME CT. GARNER 919-772-8000		
Insulation Contractor's Company Name & Address 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)		
1. Do you own the land on which this building will be constructed?no		
2. Have you hired or intend to hire an individual to superintend and manage construction of the project?		
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?		
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 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 Date		
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.		
Company or Name: VALMETTO BUILDING INC Sign w/Title: TH. M. WILLE PRESIDENT Date: 9-2-09		

Plan Box Number <u>E-5</u>

Job Name WALNUT GAVE

Date: <u>9-3-09</u>

Required Inspections for SFA/SFD

Appl. # 09500 22715 Valuation \$ 189,588 Sq. Feet 1918

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
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