\* 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 # 09.5002326

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
Telephone Number 910-893-7525 www.harnett.org
Application for Building and Trade Permit

| Owner's Name:  | Date:   |
|--|---|
| Address:   |   |
| Directions to job site from Lillington:  |   |
|  |   |
| Subdivision:   | Lot:  |
| Construction Type: (Please Check)  New Moved House Renovation Addition Other                           | Lot:  Building Use: (Please Check)  Residential  Modular  Multi-Family  Diposed Work: |
|  | Multi-Family  |
| Total Project Cost:Description of Pro  | oposed Work:ontractor Information   |
| Heated SFCrawl Space ( ) B   | Juilding Construction Cost \$   |
| Officated of Stap ( )  | cres Disturbed Stories  |
| Destin Blackwell, Inc  | 919-606-4696  |
| Dustin Blackwill, Inc<br>Building Contractor's Company Name<br>ZOI Shonow Oaks Circle Suite<br>Address | Telephone   |
| Address ~  | 113 (my, NC 2751) 3 C235  |
| Ded Ladren   | License #   |
| Signature of Owner/Contractor/Officer(s) of Corpor   | ation – Must sign back of form & workers comp   |
|  |   |
| Description of Work Electrical Work TS Pole: Yes () No () Underground () O                             | Electrical Cost \$  |
| Permanent Service: Underground () Overhead   | () Service Size: Amps   |
| Loper Electric Mintergouse Co. In.   | 919-499- 3767   |
| Electrical Contractor's Company Name   | Telephone   |
| Electrical Contractor's Company Name  80 Ne:// Thomas Id Lillington NC 2  Address  M                   | 27546 21643-0   |
| Address Management of Lympton NC 2   | License #   |
| Signature of Officer(s) of Corporation   |   |
|  | Permit Information  |
|  |   |
| Description of Work  Number of Units  Cavalina Clarifort Aiv MC  | Mechanical Cost \$  |
| Chyolina Chonfort Air Inc  | . (919) 934-1060-   |
| Mechanical Consedctor's Company Name   | (Social del Maria   |
| Address Movice St  | License #   |
|  |   |
| Signature of Officer(s) of Corporation   |   |
| Description of Work 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2  | Permit Information  |
| Number of Baths 2  | Plumbing Cost \$  |
| JAMIE Johnson Plumbing   |   |
| Plumbing Contractor's Company Name   | Telephone   |
| 1490 Clark Red Lillingh  |   |
| Address  | License #   |
| Signature of Officer(s) of Corporation   |   |
|  | esidential() Other() Not Required()   |
| In - City Trucken  |   |
|  | 910-486-8355  |

|  | obs must fill out this portion<br>er System Information  |                                 |
|--|--|---------------------------------|
| Sprinkler Contractor's Company Name  | Contact & Telephone  | THE REAL PROPERTY.              |
| Address  | License #  |                                 |
| Signature of Officer(s) of Corporation   |  |                                 |
| Fire Alar  | 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                              |
| Homeowners Apply   | ying to Build Their Own Home   |                                 |
| Please answer the following questions then see a Permit  | Technician to determine if you qualify for permit under Owne   | ers Exemption.                  |
| Questionnaire per G.S. 87-14 Regulations a   | s to Issue of Building Permits (Memo available   | upon request)                   |
| 1. Do you own the land on which this bu  | ilding will be constructed? yes  | no                              |
| 2. Have you hired or intend to hire an inc   | · · · · · · · · · · · · · · · · · · ·  |                                 |
| Do you intend to directly control & sup  | yes  | no                              |
|  |  |                                 |
| 4. Do you intend to schedule, contract, ø be done?   | fr directly pay for all phases of constructi   | on work to<br>no                |
|  |  | <del></del>                     |
| <ol> <li>Do you intend to personally occupy the<br/>following completion of construction and o<br/>creates the presumption under law that yo</li> </ol>  | do you understand that if you do not do  | onths<br>so, it                 |
|  | yes  | no                              |
| Sign & date  |  |                                 |
| I hereby certify that I have the authority to make and that the construction will conform to the reduction that the construction will conform to the reduction of the contractors is correct as known to me and if any coulding and trade plans, Environmental Health permy responsibility to notify the Harnett County Centractor/Officer(s) of Corrections | egulations in the Building, Electrical, Plumbing ordinance. I state the information on the a changes occur including listed contractors, site ermit changes or proposed use changes, I certifitral Permitting Department of any and all change | and<br>bove<br>plan,<br>y it is |

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

| The undersigne                      | d applicant for Building Permit #   |   | _ being the:                    |
|-------------------------------------|---|---|---------------------------------|
| P                                   | _ General Contractor<br>_ Owner<br>_ Officer/Agent of the Contractor or Ov  | wner                                      |                                 |
| Do hereby conf<br>the work set for  | īrm under penalties of perjury that the in the permit:  | ne person(s), firm(s                      | s) or corporation(s) performing |
|                                     | Has/have three (3) or more employed compensation insurance to cover the   | ees and has/have o                        | btained workers'                |
|                                     | Has/have one (1) or more subcontra compensation insurance to cover th   |   | ave obtained workers'           |
| $-\cancel{\cancel{>}}$              | Has/have one (1) or more subcontra workers' compensation insurance co   | actors(s) who has/h<br>overing themselves | ave their own policy of         |
|                                     | Has/have not more than two (2) em   | oloyees and no sub                        | ocontractors.                   |
| Department iss<br>insurance prior t | n the project for which this permit is suing the permit may require certifico issuance of the permit and at any on carrying out the work. | icates of coverag                         | e of worker's compensation      |
| Firm Name:                          | Dustin Black well   | Inc.                                      |                                 |
| Sign/Title:                         | D Bladus  | 7 , 08                                    | :0                              |
| Date:                               | ~   | ,   |                                 |

| Plan Box Number | DC |
|-----------------|----|
|-----------------|----|

Job Name B Lackusell

Date: 12-10-09

## Required Inspections for SFA/SFD

Appl. # 0950023255 Valuation 176852 Sq. Feet 2722

## 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   |
|        |                            |