

\* 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 license.

Application # 09 500 23 284

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: Jeff Lucas Date: 6-18-08

Site Address: \_\_\_\_\_ Phone: 910 892 6436

Directions to job site from Lillington:  Hwy 27 west to Hoover Rd. Turn Right to Persimmon Hills Subdivision on the Left Turn Left, 1<sup>st</sup> street TK to 2nd street Turn Left Lot 1

Subdivision: Persimmon Hills Lot: 29

Description of Proposed Work: Home #Bedrooms: 4

Heated SF 2876 Unheated SF 528 Finished Rec Room? Yes Crawl Space  Slab

**General Contractor Information**

Lucas Builders 910-892-6436  
Building Contractor's Company Name Telephone

161 Fowler Lane Dunn N.C. 28339 63097  
Address License #

[Signature] Must sign & fill out second page  
Signature of Owner/Contractor/Officer(s) of Corporation

**Electrical Permit Information**

Description of Work Electrical Service Size: 200 Amps TPole: yes/no

Wester + Pace Electrical 919 499 5389  
Electrical Contractor's Company Name Telephone

546 Leslie Rd Sanford N.C. 12007-U  
Address License #

[Signature]  
Signature of Officer(s) of Corporation

**Mechanical/HVAC Permit Information**

Description of Work HVAC

Beasley's Heating + Air 919 894 4298  
Mechanical Contractor's Company Name Telephone

57 WC Beasley Ln. Coats N.C. 27521 9997  
Address License #

[Signature]  
Signature of Officer(s) of Corporation

**Plumbing Permit Information**

Description of Work Plumbing # Baths 2.5

Grady's Plumbing 919-289-3093  
Plumbing Contractor's Company Name Telephone

PO Box 228 Micro N.C. 27555 19805  
Address License #

[Signature]  
Signature of Officer(s) of Corporation

**Insulation Permit Information**

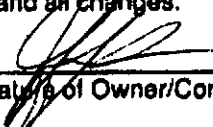
Insulating Inc. 919-772-9070  
Insulation Contractor's Company Name & Address Telephone

**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?     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?     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

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

2-4-09  
\_\_\_\_\_  
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.

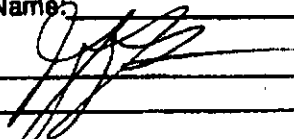
Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them.

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: \_\_\_\_\_

Sign w/Title: 

Date: 2-4-09

• CRAWL  
• GARAGE

Plan Box Number C-3

Job Name JEFF LUCAS BLDG.

Date: 11-17-09

Required Inspections for SFA/SFD

Appl. # 0950023284  
Valuation \$230,909  
Sq. Feet 3554

Sequence

10	<input checked="" type="checkbox"/>	R* Bldg. Footing
10-30	<input checked="" type="checkbox"/>	R* Elec. Temp Service Pole
20	<input checked="" type="checkbox"/>	R* Building Foundation
20	<input checked="" type="checkbox"/>	Address Confirmation
30-999	<input checked="" type="checkbox"/>	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	<input checked="" type="checkbox"/>	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	<input checked="" type="checkbox"/>	R* Insulation
60		Four Trade Final
60	<input checked="" type="checkbox"/>	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	<input checked="" type="checkbox"/>	Envir. Operations Permit