\*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 # <u>3350 9</u> Central Permitting

## Harnett County Central Permitting PO Box 65 Lillington, NC 27546

Telephone Number 910-893-7525 www.harnett.org

Owner's Name:	Watermark Homes, Inc	Date:
Address:	1308 Ft Bragg Rd Fayetteville, NC 28305	Phone: 910-483-2229
Directions to job site from Lillington:		110.10.
	Λ.	
Subdivision:	Carolina Seasons Community	Lot # <u>名 入</u>
Construction Type (Please Chec	1. ( isase chook) [-	
New	Moved House Residential	Commercial
Renovation	Addition Modular	Multi-Family
	Other	ALSO IF ID "
Total Project Cost: \$	Description of Proposed Work:	New Single Frankly Dweller
Heated SF: 1709 SF	General Contractor Information	J 1
TERROLL F	Crawl Space Building Construction Cost: 9	
	Slab Acres Disturbed: 0.44 AC	Stories 3
	atermark Homes, Inc.	910-237-1512 (Christa)
	ting Contractor's Company Name	Telephone #
1300 Ft Bra	agg Rd Fayetteville, NC 28305	49261
5///	Address	License #
Signature of Officer(s) of Cor	TOCATION	-
	Electric Permit Information	
Description of Work: Ele	ectrical Work Electrical Cost:\$	
· · · · · · · · · · · · · · · · · · ·		Underground Overhead
	Underground Overhead	Service Size:AMPS
	Sandy Ridge Electric	910-323-2458
	ical Contractor's Company Name	Telephone #
	ad Road Fayetteville, NC 28301	10006U
- 01.	Address	License #
		Live 180 F
Land & Home		
Signature of Officer(s) of Con	poration	-
	<b>Mechanical Permit Information</b>	
	/AC	
# of Units	Type System: Heat Pump	Mechanical Costs: \$
		<del></del>
Simmons He	ating, Cooling & Electrical, Inc.	910-276-2790
	nical Contractor's Company Name	Telephone #
11780 McColl Road Laurinburg, NC 28352		23859
	Address	License #
Ha DK (1) A	$\int_{-\infty}^{\infty}$	
		•
Signature of Officer(s) of Corp	1	
Description of Work:	Plumbing Permit Information	
# of Baths 3.5	Diumbine Contact	
" or build	Plumbing Costs: \$	
	Race Plumbing	040 007 7000
Bass Plumbing  Plumbing Contractor's Company Name		910-237-7996
	Telephone #	
406 Dehavilland Drive Fayetteville, NC 28311  Address		22895P1
	License #	
Thuman I In		
Signature of Officer(s) of Corpo	oration	
- gramo a ornadito) of Colp	Insulation Permit Information	
Resdiential	Other Not Required	
	205 Clinton Road Fayetteville, NC 28312	Q10_484_7119
	Contractor's Company Name & Address	910-484-7118 Telephone
		Telephone

Application #			
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? 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 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?			
yesno			
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 phanges  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 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:			
X Has three (3) or more employees and has obtained workers' compensation insurance to cover them.			
X Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them.			
X 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.			

Sign w/Title

Date: December 11, 2009

Plan Box	Number	G-3
	_	

Job Name Carolina Seasons

Date: \_\_01-11-2010

## Required Inspections for SFA/SFD

Appl. # 09-50023509 Valuation \$141,703 Sq. Feet 2181

## Sequence

10 v	D# D11 m
10.20	R* Bldg. Footing
20	R* Elec. Temp Service Pole
20	R* Building Foundation
30-999	Address Confirmation
	Open Floor
30-999x	R* Bldg. Slab Insp.
30-999 x	R* Elec. Under Slab
30-999 x	R*Plumb. Under Slab
40x	Four Trade Rough In
40	Four Trade Rough In> 2500
40x	Three Trade Rough In
40	Three Trade Rough In> 2500
40	Two Trade Rough In
40	Two Trade Rough In> 2500
40x	One Trade Rough In
40	One Trade Rough In > 2500
50x	R* Insulation
60x	Four Trade Final
60	Four Trade Final > 2500
60x	Three Trade Final
60	Three Trade Final > 2500
60x	Two Trade Final
60	Two Trade Final > 2500
60x	One Trade Final
60	One Trade Final > 2500
999x	
	Envir. Operations Permit