TO BE REMAINED DESCRIPTION OF USING THE PARTY OF THE PART entranse and a series of the s lacaro.

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Nament County Cooper Permitting

PO See 65 Livingson, NC 17840 910-153-7531 Fee 1915-493-2019 See france conferently

Application for Residential Building and Trades Forms

তিফালেও শিক্ষাকে: AQ Contracting Inc.	~ A. 2.10.2010		
Clark deletion 122 C. J. T.	Date 3-18-2010 Phone: 919-656-6900		
Chections to job site from Littington: Rt 27 West to Left on Ti	nger Rd to Left on	Tower Drive (Tingen Place)	
to right on Sandy Tingen Court lot 67 on the right	iger na. to cert off	Tower Drive (Tringer Prace)	
Substitutor: Tingen Place	**************************************	47	
Description of Proposed Winte: New Single Family Residential		Lot 67	
470		#Bedreonis: 3	
Ganeral Contract	or Edgm? YES	Craws Space (4) Skd	
AQ Contracting Inc.	919-542-9893		
PO Box 1508, Pittsboro, NC 27312	Telephone		
Address Address		47496	
Muse on		Lizense #	
Shinahura of Owner/Contractor/Officer(v) of Corporation	Malet sign & fâl mu	g seconi bođe	
Electrical Parme	· Information		
Coscintion of Work Electrical Wiring Service	Size: 200	Amps TPOM YES	
Marido (1944 1945)	10-897-6216	3 and the original states	
	i eleptione		
34 Eagle Road, Coats, NC 27521	, , , , , , , , , , , , , , , , , , ,	23491L	
Thomas Dolanda		License #	
Signeture of Lifficar(s) of Corporation			
Machanical/IVAC Pe	mit informati	983	
ិត្តនូលគ្រៅលែក ជា Work New Single Family Residential			
ARS / Rescue Rooter	919-828-5147		
Recharked Contractor's Company Name	Telephone		
17 Pylor Drive, Raleigh, NC 27606	- ,	162 4 5	
THE CAL		License #	
Separature of Officer(s) of Corporation			
Plumbing Panel	Information		
เราะสติที่สก อใ Work Plumbing Per Code		E Baths 2.0	
are's Plumbing Inc.	919-774-2482		
lumbing Contractor's Company Warre	Yelephor	_	
2 Swaringen Lane, Sanford, NC 27330	C Simple age	19443	
dress		Licensa #	
gridule of Official(s) of Corporation			
Insulation Permit i	pinaryarina		
City Building Insulation & Building Products		910-486-8855	
Sulation 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)				
1. 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?				
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?				
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 <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.				
3-18-2010 Signature of Owner/Contractor/Officer(s) of Corporation Date				
Affidavit for Worker's Compensation N.C.G.S. 87-14				
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:				
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				
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:				
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				
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Plan Box	Number	1	5
Plan Box	Number_	·)

Job Name Tingen Plate

Date: 3-18-10

Required Inspections for SFA/SFD

Appl. # 10-500 23883 Valuation 7/46728 Sq. Feet 2166

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		