

11Arey/8k
SCANNED
5/4/10
DATE

Lot 41 CS

* 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 # (10) 500 24062

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: M & P Partners, LLC Date: 5/4/10

Site Address: 627 Spring Flowers Drive Phone: (910) 814-4236

Directions to job site from Lillington: Go down Pendenssa Trail. (R) onto Fern Ridge. (R) onto Green Wicks. (L) onto Spring Flowers. Lot is down on (D).

Subdivision: Carolina Seasons Lot: 41

Description of Proposed Work: New Home #Bedrooms: 3

Heated SF 2479 Unheated SF 576 Finished Rec Room? Yes Crawl Space (Y) Slab ()

General Contractor Information

Jason Price Construction, Inc. Telephone (910) 814-4236

Building Contractor's Company Name Address 170 Pine State St. License # 50859

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

Electrical Permit Information

Description of Work New Home Service Size: 200 Amps TPole (yes/no)

MAT Electrical Contractor Inc. Telephone 919-258-0208

Electrical Contractor's Company Name Address P.O. Box 284 Broadway N.C. 27505 License # 11906-LL

Signature of Officer(s) of Corporation James Thomas Jr.

Mechanical/HVAC Permit Information

Description of Work New Home

Jackson's Heating + A/C, Inc. Telephone 919-841-5410

Mechanical Contractor's Company Name Address PO Box 82, Benson, NC 27504 License # 23670

Signature of Officer(s) of Corporation J. David Jackson J. David Jackson, President

Plumbing Permit Information

Description of Work New Home # Baths 2

Glover Contract Plumbers Inc Telephone 919-868-0959

Plumbing Contractor's Company Name Address PO Box 726 License # 23160

Signature of Officer(s) of Corporation Shawn Lee Allen

Insulation Permit Information

Tatum Insulation #, Inc. Telephone (919) 661 0999

Insulation Contractor's Company Name & Address 519 Old Drug Store Rd. Garner, NC

MAY X 4 ENTD

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.

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.

Natalee Price
Signature of Owner/Contractor/Officer(s) of Corporation

May 4, 2010

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: Jason Price Construction, Inc.

Sign w/Title: Natalee Price, Office Manager Date: May 4, 2010

CRAWL

Caroline Seasns

Plan Box Number G2

Job Name Jean Price

Date: 5-5-10

Required Inspections for SFA/SFD

Appl. # 10-50024062

Valuation 198488

Sq. Feet 3055

Sequence

10	<u>✓</u>	R* Bldg. Footing
10-30		R* Elec. Temp Service Pole
20	<u>✓</u>	R* Building Foundation
20		Address Confirmation
30-999	<u>✓</u>	Open Floor
30-999		R* Bldg. Slab Insp.
30-999		R* Elec. Under Slab
30-999		R*Plumb. Under Slab
40	<u>✓</u>	Four Trade Rough In
40	<u>✗</u>	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	<u>✓</u>	R* Insulation
60	<u>✓</u>	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