

SCANNED
5/4/10
DATE

"Hanna"

Lot 37 CS

Application # (10) 50024120

* 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.

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.C.P Partners, LLC Date: 5/4/10

Site Address: 612 Spring Flowers Drive Phone: _____

Directions to job site from Lillington: Go down Pondessa Trail, (R) onto
Fern Ridge, (R) onto Green Wks. (D) onto Spring Flowers.
lot down on D near end of cul-de-sac

Subdivision: Carolina Seasons Lot: 37

Description of Proposed Work: New Home #Bedrooms: 4

Heated SF 2831 Unheated SF 504 Finished Rec Room? Yes Crawl Space Slab ()

General Contractor Information

Jason Price Construction, Inc. (910) 814-4236
Building Contractor's Company Name Telephone

170 Pine State St. 50869
Address License #

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

Electrical Permit Information

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

MRT Electrical Contractor Inc. 919-258-0208
Electrical Contractor's Company Name Telephone

P.O. Box 384 Broadway N.C. 27505 11906-LL
Address License #

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

Mechanical/HVAC Permit Information

Description of Work New Home

Jackson's Heating + A/C, Inc. 919-891-5410
Mechanical Contractor's Company Name Telephone

PO Box 82, Benson, NC 27504 23670
Address License #

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

Plumbing Permit Information

Description of Work New Home # Baths 2 full / 2 half

Glover Contract Plumbing Inc 919-868-0959
Plumbing Contractor's Company Name Telephone

PO Box 726 23160
Address License #

Shawn Lee Allen
Signature of Officer(s) of Corporation

Insulation Permit Information

Tatum Insulation II, Inc. 519 Old Drug Store Rd. Garner, NC (919) 661-0999
Insulation Contractor's Company Name & Address Telephone

MAY X 4 ENT'D

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.

Matthew 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: Matthew Price, Office Manager Date: May 4, 2010

Plan Box Number H2

Job Name Carolina Peasos

Date: 5-5-10

Required Inspections for SFA/SFD

Appl. # 10-500 24120

Valuation \$217719

Sq. Feet 3351

Sequence

10	<input checked="" type="checkbox"/>	R* Bldg. Footing
10-30		R* Elec. Temp Service Pole
20	<input checked="" type="checkbox"/>	R* Building Foundation
20		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		Envir. Operations Permit