Each section below to be filled out by whomever performing work. Must be owner	Application # 10- 500 24 317	_		
P	ett County Central Permitting			
Filone 910-893	3-7525 Fax 910-893-2793 www.harnett.org Residential Building and Trades Permit			
Owner's Name: Bradley Built Inc				
Site Address: 56 Abrem C+				
Directions to job site from Lillington A	Phone: 919-639-2023			
R and the 27 for the T	Huy 210/401 tomards Fayettu: 1/2			
K on Huy 27 L on Fix	agen Rd Sub on Left			
Subdivision: Pat a Pat of T				
Subdivision: Patton's Point Place II	Lot: 112			
Description of Proposed Work: New S	FD#Bedrooms: 2			
Heated SF 1090 Unheated SF 339 Generation	Finished Rec Room? Crawl Space (*) Slat) ()		
Bradley Built, Inc.	919-639-2073			
Building Contractor's Company Name	Telephone			
466 Stancil Rd, Angier/ N Address	<u>NC 27501</u> 54519			
machh	License #			
Signature of Owner/Contractor/Officer(s) of Co	Must sign & fill out second page			
Men than <u>Hew Repidential</u>	Service Size: 200 Amins TPole wanne			
<u>Stancil-Owen Electrical, In</u> Electrical Contractor's Company Name	<u>1C.</u> 919-639-2073			
466 Stancil Rd., Angir, NC	Telephone			
Address				
amphil	License #			
Signature of Officer(s) of Corporation				
Mechanical Permit Information				
Description of Work <u>Residential</u>				
JC's Heating & Air Mechanical Contractor's Company Name	919-552-6258			
1539 Wade Shephenson Rd.	Telephone			
Address Address				
hun Cont	License #			
Signature of Officer(s) of Corporation	*			
Plumbi	ing Permit Information			
Deservition of Work Residential	# Baths2			
Barnes Plumbing, Inc. Plumbing Contractor's Company Name	919-639-0935			
	Telephone			
Address	7501 P17735			
danny Kome	License #			
Signature of Officer(s) of Corporation				
Insulatio	on Permit Information			
inducting, inc., iziz Home Ct	t. Raleigh NO 27602	9000		
Insulation Contractor's Company Name & Addre	ess Telephone			

	Homeowners Applying to Build Their Own Home		
	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 theyes		
	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 beyes		
	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 <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		
	Signature of Owner/Contractor/Officer(s) of Corporation Date		
Affidavit for Worker's Componenties N.O.O.C.			
	and 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.		
Ī	Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover hem.		
ā	X Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance to evering 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.			
С	ompany or Name: Bradley Puilt, Inc.		
S	ign w/Title: Fresident Date: C-21-10		

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CRAWL Plan Box Number AAG

Job Name Brackley Bult Date: 6-21-10

Required Inspections for SFA/SFD

Appl. #_1050024317 Valuation 92649 Sq. Feet 1426

Sequence

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R* Bldg. Footing R* Elec. Temp Service Pole **R*** Building Foundation Address Confirmation **Open Floor** R* Bldg. Slab Insp. R* Elec. Under Slab R*Plumb. Under Slab Four Trade Rough In Four Trade Rough In> 2500 Three Trade Rough In Three Trade Rough In> 2500 Two Trade Rough In Two Trade Rough In> 2500 One Trade Rough In One Trade Rough In > 2500 **R*** Insulation Four Trade Final Four Trade Final > 2500 Three Trade Final Three Trade Final > 2500 Two Trade Final Two Trade Final > 2500 One Trade Final One Trade Final > 2500 Envir. Operations Permit