 Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address, company 			ion # 10-500 24364	
name & phone must match information on license		Central Permitting		
PO Box 65 Lillington, NC 27546 Phone 910-893-7525 Fax 910-893-2753 www.harnett.org				
Application for Residential Building and Trades Permit Owner's Name: Stancil Builders Inc Date: 6-7-10				
Site Address: 95 Aba	<u> </u>		late: <u>6-7-10</u>	
		9-639-2073		
Directions to job site from Lillington: <u>401towards Fayetteville, Turn Right</u> Hwy27, turn Left on Tingen Rd. Subdivision on Left				
<u>ARTEN BUIN DELU (</u>	n ringen ku.	Subdivision	on Left	
Subdivision: Pattons	Point			
		L(
Description of Proposed Work: Heated SE 1196	<u>Residential</u>	Home#	Bedrooms: 3	
Heated SF <u>1180</u> Unheated SF <u>526</u> Finished Rec Room? <u>N</u> Crawl Space (+Slab () <u>General Contractor Information</u> Stancil Builders, Inc. <u>919-639-2073</u>				
Bolding Connactor's Company	Name	<u>919-639-</u> Telephone	2073	
Address Addres	<u>il Rd., Angie</u>	er, NC 27501	034533	
hulle The	a l		License #	
Signature of Owner/Contractor/Officer(s) of Corporation				
Description of Work <u>New Residential</u> Service Size: <u>200</u> Amps TPole: Jesino				
Stancil-Oven Floot	<u>Sidential</u> Servi	ce Size: <u>200</u> An	nps TPole: resino	
<u>Stancil-Owen Elect</u> Electrical Contractor's Company	Name	<u>919-639-</u> Telephone	2073	
466 Stancil Rd.,		7501	13075-L	
Address			License #	
Signatural Ottion				
Signature of Officer(s) of Corpora		rmit Information		
Description of Work <u>Resid</u>	ential	that mornation		
JC's Heating & Air		919_5	52-6258	
Mechanical Contractor's Compar	y Name	Taloohana		
1589 Wade Stephens	on Ha., Molly	Springs,NC	12655-H3	
nouless my	L L		License #	
Signature of Officer(s) of Corpora	tion			
Plumbing Permit Information				
Description of Work <u>Reside</u>	ential		aths2	
Barnes Plumbing, In	<u>nc</u> .		3 9–0935	
Plumbing Contractor's Company	Name	Telephone		
PO Box 1207, Angier Address	, NC 27501	P	17735	
2 - R			License #	
Signature of Officer(s) of Corporat	ion			
Insulation Permit Information				
Insulating, Inc.	1212 Home Ct	Raleigh,NC	919-772-9000	
Insulation Contractor's Company I	vame & Address	27603	Telephone	

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Application # 10-500 24 376 9

Questionnaire per G.S. 87-14 Regulations as to Issue	IId Their Own Home etermine if you qualify for permit under Own of Building Permits' (Memo availab	hers Exemption. le upon request)
1. Do you own the land on which this building will be co	onstructed?yesr	סו
2. Have you hired or intend to hire an individual to supe project?	erintend and manage constructi	on of the no
3. Do you intend to directly control & supervise constru	ction activities? yes	no
4. Do you intend to schedule, contract, or directly pay f done?	or all phases of construction we	ork to be no
5. Do you intend to personally occupy the building for a completion of construction and do you understand that presumption under law that you fraudulently secured th	If you do not do so, it creates in	19
I hereby certify that I have the authority to make necessary and that the construction will conform to the regulations Mechanical codes, and the Harnett County Zoning Ordinar contractors is correct as known to me and if <u>any</u> changes o number of bedrooms, building and trade plans, Environment changes, I certify it is my responsibility to notify the Harnett any and all changes.	In the Building, Electrical, Func- nce. I state the information on th occur including listed contractors, s tal Health permit changes or propo t County Central Permitting Depar	e above ite plan, ised use tment of
Signature of Gwizer/Contractor/Cincerta) of Corporation		<u></u>
Affidavit for Worker's Compe The undersigned applicant being the:	nsation N.C.G.S. 07-14	
X_General ContractorOwnerO	fficer/Agent of the Contractor or Ov	wner
	(1) (imple) as a midration(c) porto	
Do hereby confirm under penalties of perjury that the person set forth in the permit:	n(s), tirm(s) or corporation(s) pend	rming the work
Do hereby confirm under penalties of perjury that the person set forth in the permit: <u>X</u> Has three (3) or more employees and has obtained v		
set forth in the permit:	vorkers' compensation insurance t	o cover them.
set forth in the permit: <u>X</u> Has three (3) or more employees and has obtained w Has one (1) or more subcontractors(s) and has obtained	workers' compensation insurance t ined workers' compensation insura	o cover them. nce to cover
set forth in the permit: X Has three (3) or more employees and has obtained w Has one (1) or more subcontractors(s) and has obtain them. X Has one (1) or more subcontractors(s) who has their	workers' compensation insurance t ined workers' compensation insura own policy of workers' compensat	o cover them. nce to cover
set forth in the permit: X Has three (3) or more employees and has obtained w Has one (1) or more subcontractors(s) and has obtain them. X Has one (1) or more subcontractors(s) who has their covering themselves.	workers' compensation insurance t ined workers' compensation insura own policy of workers' compensat itractors. it is understood that the Central Pi overage of worker's compensation	o cover them. nce to cover tion insurance ermitting insurance prior
set forth in the permit: X Has three (3) or more employees and has obtained we have the set of t	workers' compensation insurance t ined workers' compensation insura own policy of workers' compensat itractors. it is understood that the Central Pi overage of worker's compensation	o cover them. nce to cover tion insurance ermitting insurance prior
set forth in the permit: X Has three (3) or more employees and has obtained we have the set of t	workers' compensation insurance t ined workers' compensation insura own policy of workers' compensat itractors. it is understood that the Central Po overage of worker's compensation ed work from any person, firm or c	o cover them. nce to cover tion insurance ermitting insurance prior

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Cranl AA 12

Plan Box Number

Job Name StANCI

Date: 6-8-10

Required Inspections for SFA/SFD

Appl. # 0 505247365Valuation 1/1816Sq. Feet 721

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