Harnett County Central Permitting PO Box 65 Lillington NC 27546 910 893 7525 Fax 910 893 2793 www harnett org/permits Application # 24 3 78

Each section below to be filled out by whomever performing work Must be owner or licensed contractor Address company name & phone must match

Application for Residential Building and Trades Permit

Owners Name Mike Griswold	Date
	70
Site Address Lot & beside 2055 Darra	
	in Right on Darrock Rd
Turn in Drive on the Left shared Drive	10 Wy 2055
Subdivision Samos Larrar	Lot
Description of Proposed Work	# of Bedrooms
Heated SF 2033 Unheated SF 264 Finished Bonus Room?	Crawl Space Slab
General Contractor Information	
Cape Pear Builder	910-891-9600
Building Contractor's Company Name	Telephone
1116 Tysinger Rd, Lilling ton	Email Address
Address	Email Address
License #	
Electrical Contractor Information	10
Description of Work New home Service Size	Amps T-Pole Yes No
fatrick elactric	910-237-1594
Electrical Contractor s Company Name	Telephone
1309 N Main Street Lillington	Franklide
Address	Email Address
<u>4910 U</u>	
License # Mechanical/HVAC Contractor Inform	ation
Description of Work New Split	
Description of the state of the	910-897-5501
Mechanical Contractor's Company Name	Telephone
724 Turington Rd Dyan	
Address	Email Address
17164	
License #	
Plumbing Contractor Informatio	
Description of Work	_# Baths
Strait Flish	919-722-8099
Plumbing Contractor's Company Name	Telephone
978 Mid-chell Ra Lilhigton	Frank Address
Address	Email Address
136)	
License # Insulation Contractor Information	n a aca-Auta
Tol-City Fair Hour lo	9/0-237-095/
Insulation Contractor & Company Name & Address	Telephone

Mechanical codes and the Harnett County Zoning Ordinance I state the information on the above contractors is correct as known to me and that by signing below I have obtained all subcontractors permission to obtain these permits 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 Month's to 2 years permit re-issue fee is \$150 00 After 2 years re-issue fee is as per current fee schedule Signature of Owner/Contractor/Officer(s) of Corporation 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 cevering 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

Sign w/Title

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

Plan Box #	Date	3-22-12 ne Joe Garner
App # 1050024	1378 Valuation 14534	
App #	13 1% Valuation 19539	U SQ Feet 2237
Inspections for SFD/SFA	4	
Crawl	Slab	Mono
Footing	Footing	Plumbing Under Slab
Foundation	Foundation	Ele. Under Slab
Address Open Floor	Address Slab	Address Mono Slab
Rough In	RoughIn	Rough In
Insulation	Insulation	Insulation
Final	Final	Final
>2500	>2500	>2500
Foundation Survey N_{θ}	Envir. Health New To	Other
••••••		
Additions / Other		
Additions / Other		
Footing		
Foundation		
Slab	,	
Slab Mono		
Slab		