

Application # 10500 24648

* 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 85 Lillington, NC 27548
Phone 810-893-7525 Fax 810-893-2793 www.harnett.org

Application for Residential Building and Trades Permit

Owner's Name: Bill Clark Homes of Fayetteville, LLC Date: 6/18/10
Site Address: 276 Strike Eagle Drive Phone: (910) 426-2898

Directions to job site from Lillington: _____
Rt. 27 towards Rt. 87. Turn left on Tingen Road. Turn left into Subdivision on Strike Eagle Drive.

Subdivision: PATTON'S POINT Lot: 95

Description of Proposed Work: Single Family Dwelling #Bedrooms: 3
Heated SF 1460 Unheated SF 420 Finished Rec Room? NO Crawl Space () Slab

General Contractor Information

Bill Clark Homes of Fayetteville, LLC Telephone (910) 426-2898
Building Contractor's Company Name
PO Box 87021 Fayetteville, NC 28304 Address
Kimberly Gay License # 34592-BLD-U

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

Electrical Permit Information

Description of Work New Electric Service Service Size: 200 Amps TPole /no
Sandy Ridge Electric, Inc. Telephone (910) 323-2458
Electrical Contractor's Company Name
454 Whithead Rd. Fayetteville, NC 28312 Address
[Signature] License # 10006-U

Signature of Officer(s) of Corporation _____

Mechanical Permit Information

Description of Work New HVAC
Mark-Air, Inc. Telephone (910) 484-6565
Mechanical Contractor's Company Name
5217-103 Raeford Rd. Fayetteville, NC 28304 Address
Chandler Sikes License # 15874

Signature of Officer(s) of Corporation _____

Plumbing Permit Information

Description of Work New Plumbing # Baths 2
NANCE JOHNSON PLUMBING Telephone 910-424-6712
Plumbing Contractor's Company Name
3242 MID PINE DR FAY NC 28306 Address
William Boyer License # 7756-PI

Signature of Officer(s) of Corporation _____

Insulation Permit Information

TRI City Insulation Telephone (910) 486-8855
Insulation Contractor's Company Name & Address 418 Pison St. Fayetteville, NC 28301

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.

[Signature]
Signature of Owner/Contractor/Officer(s) of Corporation

6/18/10
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: Bill Clark Homes of Fayetteville, LLC

Sign w/Title: Kimberly Coy - New Home Coordinator Date: 6/18/10

11
SLAB

Pattons Point

Plan Box Number AA7

Job Name Bill Clark

Date: 6-18-10

Required Inspections for SFA/SFD

Appl. # 10-58824648

Valuation \$122991

Sq. Feet 1832

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		Open Floor
30-999	<input checked="" type="checkbox"/>	R* Bldg. Slab Insp.
30-999		R* Elec. Under Slab
30-999	<input checked="" type="checkbox"/>	R*Plumb. Under Slab
40	<input checked="" type="checkbox"/>	Four Trade Rough In
40		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	<input checked="" type="checkbox"/>	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