Each section below to be filled out by inomever performing work. Must be owner licenaed contractor. Address, company ame & phone must match information on license.

Application #

Harnett County Central Permitting PO Box 65 Lillington, NC 27546 Phone 910-893-7525 Fax 910-893-2793 www.harnett.org Application for Residential Building and Trades Permit Owner's Name: Kriss Site Address: 9니 #Bedrooms: 3 Description of Proposed Work: No. Heated SF 1778 Unheated SF 399 Finished Rec Room? 405 Crawl Space (4 Slab General Contractor Information 910-892-A3A5 Cumberland Homes **Building Contractor's Company Name** Telephone PO BOX 727 28335 Address Must sign & fill out second page Signature of Owner/Contractor/Officer(s) of Corporation **Electrical Permit Information** Description of Work New Service Size: 200 Amps TPole yes/no 919-499-5389 Wester + Pace Telephone Electrical Contractor's Company Name 546 Leslie Dr. Sanford NC 12007-K License # Address -William Wester Signature of Officer(s) of Corporation **Mechanical Permit Information** Description of Work Jacksons Heating & Air 910 - 891-5410 Mechanical Contractor's Company Name Telephone 23670 Pa Bux 82 Benson NC Address License # Signature of Officer(s) of Corporation **Piumbing Permit Information** # Baths 2 1/2 Description of Work 910-531-3111 Curtis Fuircloth Plumbing Plumbing Contractor's Company Name Telephone 5056 Elizabethtown Huy 7269 Signature of Officer(s) of Corporation Insulation Permit Information

Tri-City Insulution 418 Person St. Insulation Contractor's Company Name & Address

Application #	24696
Whiteamon #	·····

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)
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?yesno
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 of Owner/Contractor/Officer(s) of Corporation 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.
Sign w/Title: Dy Zus /owner Date: 4-23-10
Sign w/Title: Date: 4-23-10

Plan	Box	Numbe	er_j	P	A	2	
			,		-		

Job Name Briese Blows

Date: 6-25-10

Required Inspections for SFA/SFD

Appl. # 15, -502465¢ Valuation 14/443 Sq. Feet 2177

Sequence

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10	R* Bldg. Footing
10-30	R* Elec. Temp Service Pole
20	R* Building Foundation
20	Address Confirmation
30-999	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	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	R* Insulation
60	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