Application # 10-500-24761

Harnett County Central Permitting PO Box 65 Lillington, NC 27546 910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Application for Residential Building and Trades Permit

Owner's Name: John D. Maia	Date: 08/19/2010
Site Address: 549 Pope Lake Road Angier, NC	Phone: 910-514-2222
Directions to job site from Lillington: Take US 421 towards Dunn. Turn I	eft onto Old Stage Road. Then turn right onto
Langdon Road. Then turn left onto Pope Lake Road. Lot #4 is the first lot of	
Subdivision: Pope Lake Phase I	Lot: ⁴
Construction of personal property	
Description of Proposed Work: Construction of personal property	# of Bedrooms: 3
Heated SF: 2,657 Unheated SF: 914 Finished Bonus Room?	
John D. Maia (Owner)	(910)514-2222
Building Contractor's Company Name	Telephone
PO Box 367 Lillington, NC 27546	jmaia6115@gmail.com
Address	Email Address
Address	Email / (da. 655
Signature of Owner/Contractor/Officer(s) of Corporation	License #
Electrical Contractor Informa	tion
Description of Work Service Siz	e: <u>400 </u>
John D. Maia (Owner)	(910) 514-2222
Electrical Contractor's Company Name	Telephone
PO Box 367 Lillington, NC 27546	jmaia6115@gmail.com
Address	Email Address
Signature of Owner/Contractor/Officer(s) of Corporation	License #
Mechanical/HVAC Contractor Info	<u>ormation</u>
Description of Work	
John D. Maia (Owner)	(910) 514-2222
Mechanical Contractor's Company Name	Telephone
PO Box 367 Lillington, NC 27546	jmaia6115@gmail.com
Address	Email Address
Signature of Owner/Contractor/Officer(s) of Corporation Plumbing Contractor Information	License #
	# Baths
Description of Work	(910) 514-2222
John D. Maia (Owner)	Telephone
Plumbing Contractor's Company Name	jmaia6115@gmail.com
PO Box 367 Lillington, NC 27546	Email Address
Address	Email Address
Signature of Owner/Contractor/Officer(s) of Corporation Insulation Contractor Information	License #
Tri-City Insul and Bldg Prod 418 Person St Suite 101 Fayetteville, NC	(910) 486- 8855
Insulation Contractor's Company Name & Address	Telephone

*NOTE: General Contractor must fill out and sign the second page of this application.

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			
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 <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 any and all changes. EXPIRED PERMIT FRES - 6 Months 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 08/19/2010 Date			
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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: John D. Maia			
Sign w/Title: Date: 08/19/2010			

Plan Box	Number	DS

Job Name Pastake

Date: 8-23-10-

Required Inspections for SFA/SFD

Appl. # 10 - 500 24761 Valuation #217654 Sq. Feet 3350

Sequence

10 10-30 20	R* Bldg. Footing R* Elec. Temp Service Pole
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20	and an 14 11 was 1 1
	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