

FEB-18-2007 06:14:11 FROM:

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Oct.14.2010 07:30 AM GENE MCDONALD

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Application # 1050021801

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

Harnett County Central Permitting
PO Box 02 Lillington, NC 27546
1100 R02 7826 Fax 910 893 2700 www.harnett.org/permits

Application for Residential Building and Trades Permit

Owner's Name: MITCH & IONA BARGER Date: 10/7/10
Site Address: Huytor Road Phone: 910-487-2385
Directions to job site from Lillington _____

Subdivision: _____ Lot _____
Description of Proposed Work: SINGLE FAMILY DWELLING # of Bedrooms: 4
Heated SF: 2757 Unheated SF: 440 Finished Bonus Room? Crawl Space Slab

General Contractor Information
LOCKRIDGE HOMES-RALEIGH, LLC
Building Contractor's Company Name
1207 ROBERTS PATH RD, RICHMOND, VA 23220
Address
Signature of Owner/Contractor/Officer(s) of Corporation
Telephone: 804-368-6788
PRINCIPAL@LOCKRIDGE.COM
Email Address
License #

Electrical Contractor Information
Description of Work: WIRE BEFORE INSPECTION Service Size: 400 Amps T Pole: Yes No
LEONARD KEARNS
Electrical Contractor's Company Name
149 Allison Garner N.C. 27529
Address
Signature of Owner/Contractor/Officer(s) of Corporation
Telephone: 919-69-7857
Email Address: 28899 14731-L
License #

Mechanical/HVAC Contractor Information
Description of Work: WIRE BEFORE INSPECTION
STEPHENSON HVAC
Mechanical Contractor's Company Name
Address
Signature of Owner/Contractor/Officer(s) of Corporation
Telephone: 919-329-0688
Email Address: 18644
License #

Plumbing Contractor Information
Description of Work: WIRE BEFORE INSPECTION
KW BOYKIN PLUMBING
Plumbing Contractor's Company Name
Address
Signature of Owner/Contractor/Officer(s) of Corporation
Telephone: 919-558-4789
Email Address: 28500
License #

Insulation Contractor Information
Description of Work: WIRE BEFORE INSPECTION
EASTERN INSULATION
Insulation Contractor's Company Name & Address: JEFF
Telephone: 919-969-4730

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

Application # 10 500 24804

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

Harnett County Central Permitting
PO Box 66 Lillington, NC 27546
910-803-7575 Fax 910-803-2783 www.harnett.org/permits

Application for Residential Building and Trades Permit

Owner's Name: MITCH & IONA BARGER Date: 10/1/10
Site Address: Raynor Road Phone: 910-497-2365
Directions to job site from Lillington: _____

Subdivision: _____ Lot: _____
Description of Proposed Work: SINGLE FAMILY DWELLING # of Bedrooms: 4
Heated SF: 2757 Unheated SF: 440 Finished Bonus Room? Crawl Space? Slab

General Contractor Information
LOCKRIDGE HOME-BUILDING, LLC
Building Contractor's Company Name
1207 ROSE N LATH RD, RICHMOND, VA 23230
Address
Signature of Owner/Contractor/Officer(s) of Corporation
A04 358 5768
Telephone
PROJECT@SGLLOCKRIDGE.COM
Email Address
68052
License #

Electrical Contractor Information
Description of Work: W/O APPROF INSPECTION Service Size: 60A Amps 1 Pole Yns No
LEONARD KEARNS
Electrical Contractor's Company Name
Address
Signature of Owner/Contractor/Officer(s) of Corporation
919 769-7857
Telephone
22811 14731-L
Email Address
License #

Mechanical/HVAC Contractor Information
Description of Work: HVAC
~~W/O APPROF INSPECTION~~ STEPHENSON HVAC
Mechanical Contractor's Company Name
Address: 343 Stephens Dr, Cary 27529
Signature of Owner/Contractor/Officer(s) of Corporation
919 329-0688
Telephone
18644
Email Address
License #

Plumbing Contractor Information
Description of Work: W/O APPROF INSPECTION KW BOYKIN PLUMBING
Plumbing Contractor's Company Name
Address
Signature of Owner/Contractor/Officer(s) of Corporation
919 553-4789
Telephone
28500
Email Address
License #

Insulation Contractor Information
Description of Work: W/O APPROF INSPECTION EASTERN INSULATION
Insulation Contractor's Company Name & Address: JEFF
919 969-4730
Telephone

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

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

Harnett County Central Permitting
PO Box 651 Blyden, NC 27546
910 883 2520 Fax 910 883 2793 www.harnettcountync.gov

Application # 10 9 00 24904

Application for Residential Building and Trades Permit

Owner's Name: MITCH & IONA BARGER Date: 10/7/10
Site Address: Raynes Road Phone: 910-487-2366
Directions to job site from Lillington: _____

Subdivision _____ Lot _____
Description of Proposed Work: SINGLE FAMILY DWELLING # of Bedrooms: 4
Heated SF: 2761 Unheated SF: 440 Finished Bonus Room? Crawl Space Slab

General Contractor Information

LOCKRIDGE HOMES-RALEIGH, LLC 804 358-6768
Building Contractor's Company Name Telephone
1707 HONKENTH RD, RICHMOND, VA 23230 PROJECTS@LOCKRIDGE.COM
Address Email Address
[Signature] 68002
Signature of Owner/Contractor/Officer(s) of Corporation License #

Electrical Contractor Information

Description of Work WIREWORK INSPECTION Service Bus 400 Amps T. Pole Yes No
LEONARD KEARNS 919 769-7857
Electrical Contractor's Company Name Telephone

Address _____ Email Address 22897 14731-L
Signature of Owner/Contractor/Officer(s) of Corporation License #

Mechanical/HVAC Contractor Information

Description of Work WIREWORK INSPECTION STEPHENSON HVAC 919 329-0688
Mechanical Contractor's Company Name Telephone

Address _____ Email Address 18644
Signature of Owner/Contractor/Officer(s) of Corporation License #

Plumbing Contractor Information

Description of Work WIREWORK INSPECTION KW BOYKIN PLUMBING # Baths: 3 919 533-4789
Plumbing Contractor's Company Name Telephone

7104 Cornwallis Rd Garner NC 27529
Address Email Address
[Signature] Marc C. Boykin 28500
Signature of Owner/Contractor/Officer(s) of Corporation License #

Insulation Contractor Information

Description of Work WIREWORK INSPECTION EASTERN INSULATION 919 969-4730
Insulation Contractor's Company Name & Address JEFF 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 Participation Questionnaire per G.S. 87-14 Regulations as to Issue of Building Permits (Form 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.

EXPIRED PERMIT FEES - 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] 10/7/10
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.

Company or Name: LOCKRIDGE HOMES-HALF HIGH COM

Sign w/Title: [Signature] / Permit Administrator Date: 10/7/10
LOCKRIDGE HOMES - HALF HIGH, LLC

CRAWL

Plan Box Number A8

Job Name Keystone

Date: 10-12-10

Required Inspections for SFA/SFD

Appl. # 16-50024804

Valuation \$207714

Sq. Feet ~~11924~~ 3197

Sequence

10	<u>✓</u>	R* Bldg. Footing
10-30		R* Elec. Temp Service Pole
20	<u>✓</u>	R* Building Foundation
20		Address Confirmation
30-999	<u>✓</u>	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	<u>✓</u>	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	<u>✓</u>	R* Insulation
60		Four Trade Final
60	<u>✓</u>	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



www.lockridgehomes.com

1207 Roseneath Road, Suite 200 · Richmond, VA. 23230
(804) 358-5768 Office · (804) 678-5322 Fax

November 10, 2010

To Harnett County Permitting Department

Lockridge Homes – Raleigh, LLC would like to make the changes listed below to the trade contractors currently listed on

Permit # 10-50024804 for Mitch & Iona Barger

Mechanical remove Stephenson Heating and Air Conditioning Inc. change to Air Essentials, Inc.

Plumbing remove K W Boykin Plumbing change to Richard D White Plumbing, LLC

Electrical remove Leonard Kearns change to 4 M Electric, Inc.

Robert Brunel

A handwritten signature in black ink, appearing to read "R. Brunel", written over a horizontal line.

Permit Administrator

Application # 10-50024804

Harnett County Central Permitting
PO Box 85 Lillington, NC 27546
910-893-7625 Fax 910-893-2793
www.harnett.org/permits
Certification of Work Performed By Owner/Contractor
(Individual Trade Application)

Owner (s) of Structure: Mitch & Iona Berger Phone: 910-497-2365

Owner (s) Mailing Address: 5085 Marvin Dr
Spring Lake, NC 28380

Land Owner Name (s): Mitch & Iona Berger Phone: 910-497-2365

Construction or Site Address: Raynor-McLamb Road

PIN or Parcel # from GIS: 0545-78-6885.0000

Job Cost: \$223,249 Description of Work to be done: New Single Family Dwelling

Mechanical: New Unit With Ductwork New Unit Without Ductwork Gas Piping (fireplace only)

Electrical: 200 Amp <200 Amp Service Change Service Reconnect Other
* For Progress Energy customers we need the premise number

Plumbing: Water/Sewer Tap Number of Baths Water Heater

Specific Directions to Job from Lillington:

Turn SLIGHT RIGHT onto N MAIN ST/US-401 S/US-421 S/NC-210 W/NC-27 W/PALM GREEN MEMORIAL HWY. Ct
Turn RIGHT onto MCLEAN CHAPEL CHURCH RD. Turn SLIGHT LEFT onto RAYNOR-MCLAMB RD

Subdivision: _____ Lot #: _____

Air Essentials, Inc will provide the Mechanical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 68052, which entitles me to perform such work on the above structure legally. All work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations.

Structure owner(s) signature: [Signature] Date: 11/10/2010
Lockidge Homes - Raleigh, LLC

Company Name: Air Essentials, Inc Phone: (919)779-1237

Address: PO BOX 264, Garner, NC 27529 County: WAKE

Contractor's License #: 21536 H3C1 Email Address: airessentialsnc@aol.com

Contractor's Signature: [Signature] Date: 11-11-10

*Company name, address, & phone must match information on license.

Application #: 10-50624804

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

Certification of Work Performed By Owner/Contractor
(Individual Trade Application)

Owner (e) of Structure: Mitch & Iona Barger Phone: 910-497-2365

Owner (s) Mailing Address: 5085 Marvin Dr
Spring Lake, NC 28390

Land Owner Name (s): Mitch & Iona Barger Phone: 910-497-2365

Construction or Site Address: Raynor McLamb Road

Pin or Parcel # from GIS: 05457868950000

Job Cost: \$223,249 Description of Work to be done: New Single Family Dwelling

Mechanical: New Unit With Ductwork New Unit Without Ductwork Gas Piping

Electrical: 200 Amp <200 Amp Service Change Service Reconnect Other
* For Progress Energy customers, we need the premise number

Plumbing: Water/Sewer Tap Number of Baths: 3 Water Heater

Specific Directions to Job from Lillington:

Turn SLIGHT RIGHT onto N MAIN ST/US 401 S/US 421 S/NC 210 W/NC 27 W/RPAUL GREEN MEMORIAL HWY. C/
Turn RIGHT onto MCLEAN CHAPEL CHURCH RD. Turn SLIGHT LEFT onto RAYNOR MCLAMB RD.

Subdivision: _____ Lot #: _____

I, Richard Donald White will provide the Plumbing labor on this structure.
(Contractor's Name) (Trade)

I am the building owner or my NC state license number is 68952 which entitles me to perform such work on the above structure legally. All work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations.

Structure owner(s) signature: [Signature] Date: 11/10/2010

Lockridge Homes - Raleigh, NC

Company Name: Richard D White Plumbing, LLC Phone: (919) 556-8082

Address: 310 Boardwalk Drive, Youngsville, NC 27595 County: Franklin

Contractor's License #: 16941 Email Address: rdwhiteplumbing@aol.com

Contractor's Signature: [Signature] Date: 11/11/10

*Company name, address, & phone must match information on license.

2010-11-11 06:59

4M ELECTRIC

9192173394 >>> Fax

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Application # 10-50024804

Harnett County Central Permitting
PO Box 65 Lillington, NC 27548
910-893-7525 Fax 910-893-2793

www.harnett.org/permits

Certification of Work Performed By Owner/Contractor
(Individual Trade Application)

Owner (s) of Structure: Mitch & Iona Berger Phone: 910-497-2365

Owner (s) Mailing Address: 5086 Marvin Dr
Spring Lake, NC 28390

Land Owner Name (s): Mitch & Iona Berger Phone: 910-497-2365

Construction or Site Address: Raynor-McLamb Road

PIN or Parcel # from GIS: 0545-76-6895.0000

Job Cost: \$223,249 Description of Work to be done: New Single Family Dwelling

Mechanical: New Unit With Ductwork New Unit Without Ductwork Gas Piping

Electrical: 200 Amp <200 Amp Service Change Service Reconnect Other
* For Progress Energy customers we need the premise number

Plumbing: Water/Sewer Tap Number of Baths Water Heater

Specific Directions to Job from Lillington:

Turn SLIGHT RIGHT onto N MAIN ST/US-401 & US-421 SANG-210 W/NC-27 W/PAUL GREEN MEMORIAL HWY. C
Turn RIGHT onto MCLEAN CHAPEL CHURCH RD. Turn SLIGHT LEFT onto RAYNOR-MCLAMB RD

Subdivision: _____ Lot #: _____

Brent Metz
I, 4m Electric Inc will provide the Electric labor on this structure.
(Contractor Name) (Trade)

I am the building owner or my NC state license number is 68052, which entitles me to perform such work on the above structure legally. All work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations.

Structure owner(s) signature: [Signature] Date: 11/10/2010

LakeRidge Homes - Raleigh, LLC

Company Name: 4 M Electric, Inc. Phone: (919)217-3361

Address: 4400 Ravens Crest Lane, Raleigh, NC 27618 County: Wake

Contractor's License #: 13174-4 Email Address: 4melectric@bellsouth.net

Contractor's Signature: Brent Metz Date: 11-11-10

*Company name, address, & phone must match information on license.