

* 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.

Application # 1050025163

Harnett County Central Permitting.

PO Box 65 Lillington, NC 27546

Telephone Number 910-893-7525 www.harnett.org

Application for Building and Trade Permit

Owner's Name: HSP Const. & Dev.

Date: 9/7/10

Address: ~~114 Castle Rock Dr.~~ 114 Castle Rock Dr.

Phone: 910-988-6404

Directions to job site from Lillington: _____

Subdivision: The Summit Lot: 90

Construction Type: (Please Check) New Moved House Renovation Addition Other
Building Use: (Please Check) Residential Commercial Multi-Family Modular

Total Project Cost: _____ Description of Proposed Work: _____

General Contractor Information

Heated SF _____ Crawl Space () Building Construction Cost \$ _____
Unheated SF _____ Slab () Acres Disturbed _____ Stories _____

HSP Construction & Dev., LLC 910-988-6404
Building Contractor's Company Name Telephone

P.O. Box 2007, Fayetteville, NC 28302 69166
Address License #

[Signature]
Signature of Owner/Contractor/Officer(s) of Corporation -- Must sign back of form & workers comp

Electrical Permit Information

Description of Work Electrical Work Electrical Cost \$ _____
TS Pole: Yes () No () Underground () Overhead ()

Permanent Service: Underground () Overhead () Service Size: _____ Amps

Power Electric & Maintenance Co., Inc. 919-499-7767
Electrical Contractor's Company Name Telephone

80 Neill Thomas Rd Lillington NC 27546 21643-U
Address License #

[Signature]
Signature of Officer(s) of Corporation

Mechanical Permit Information

Description of Work _____
Number of Units _____ Type System _____ Mechanical Cost \$ _____

Christina Comfort Air Inc. (910) 934-1060
Mechanical Contractor's Company Name Telephone

528 West Market St. (Smithfield) #29077
Address License #
NC 27577

[Signature]
Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work Plumbing
Number of Baths 2 Plumbing Cost \$ _____

JAMIE Johnson Plumbing
Plumbing Contractor's Company Name Telephone

1490 Clark Rd Lillington, N.C. 27546 21649
Address License #

[Signature]
Signature of Officer(s) of Corporation

Insulation Permit Information Residential () Other () Not Required ()

Tia City Insulation 910-486-8855
Insulation Contractor's Company Name & Address Telephone

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.

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.

Phil S. Heasant
Signature of Owner/Contractor/Officer(s) of Corporation

9/7/10
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: MS Construction & Dev, LLC
Sign w/Title: Phil S. Heasant, Mgr. Date: 9/7/10

Plan Box Number B2

Job Name Summit.

Date: 9-9-10

Required Inspections for SFA/SFD

Appl. # 10-50025163
Valuation 171,468
Sq. Feet 2639

Sequence

10	<input checked="" type="checkbox"/>	R* Bldg. Footing
10-30	<input type="checkbox"/>	R* Elec. Temp Service Pole
20	<input checked="" type="checkbox"/>	R* Building Foundation
20	<input type="checkbox"/>	Address Confirmation
30-999	<input checked="" type="checkbox"/>	Open Floor
30-999	<input type="checkbox"/>	R* Bldg. Slab Insp.
30-999	<input type="checkbox"/>	R* Elec. Under Slab
30-999	<input type="checkbox"/>	R*Plumb. Under Slab
40	<input checked="" type="checkbox"/>	Four Trade Rough In
40	<input type="checkbox"/>	Four Trade Rough In > 2500
40	<input type="checkbox"/>	Three Trade Rough In
40	<input type="checkbox"/>	Three Trade Rough In > 2500
40	<input type="checkbox"/>	Two Trade Rough In
40	<input type="checkbox"/>	Two Trade Rough In > 2500
40	<input type="checkbox"/>	One Trade Rough In
40	<input type="checkbox"/>	One Trade Rough In > 2500
50	<input checked="" type="checkbox"/>	R* Insulation
60	<input checked="" type="checkbox"/>	Four Trade Final
60	<input type="checkbox"/>	Four Trade Final > 2500
60	<input type="checkbox"/>	Three Trade Final
60	<input type="checkbox"/>	Three Trade Final > 2500
60	<input type="checkbox"/>	Two Trade Final
60	<input type="checkbox"/>	Two Trade Final > 2500
60	<input type="checkbox"/>	One Trade Final
60	<input type="checkbox"/>	One Trade Final > 2500
999	<input type="checkbox"/>	Envir. Operations Permit