* Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address, company name & phone must match Application # 252510

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

Application for Residential Building and Trades Permit

Owner's Name: Brian Raynor	Date: 9-20-2010
Site Address: 202 Emma Ct.	Phone: 910-824-1238
Directions to job site from Lillington: From Lillington take 401 S to about 3 miles on the left.	W. Reeves Rd and turn right. Subdivision is
Subdivision: Kenlan Farms	Lot: 26
Description of Proposed Work: Single Family	# of Bedrooms: 3
Heated SF: 1,818 Unheated SF: 696 Finished Bonus F General Contractor Inf	
Signature Home Builders, Inc.	910-892-9299
Building Contractor's Company Name	Telephone
801 W. Cumberland St. Dunn, NC 28334	larry@signaturehomebuilders.com
Address When y s	Email Address 49431
Signature of Owner/Contractor/Officer(s) of Corporation <u>Electrical Contractor In</u>	
· · · · · · · · · · · · · · · · · · ·	ice Size: <u>200</u> Amps T-Pole: <u>√</u> Yes <u>N</u>
White & Company, Inc.	910-237-0247
Electrical Contractor's Company Name	Telephone
600 Erwin Rd. Erwin NC 28339	whitecompanyinc@embarq.com
Address	Email Address
Phillip White	22907-U
Signature of Owner/Contractor/Officer(s) of Corporation Mechanical/HVAC Contract	License #
Description of Work New Consturction	or information
Stephenson's Heating and Air conditioning, Inc.	919-329-0686
Mechanical Contractor's Company Name	Telephone
343 Shipwash Drive Garner, NC 27529	stephensonhvac@aol.com
Address •	Email Address
Address .	189644
Signature of Owner/Contractor/Officer(s) of Corporation	License #
Plumbing Contractor In	
Description of Work New Construction	# Baths 3
L.R. Glover Plumbing, Inc.	919-820-0026
Plumbing Contractor's Company Name	Telephone
PO Box 764 Benson, NC 27504	NA
Address	Email Address
No Abrel	07958
Signature of Owner/Contractor/Officer(s) of Corporation Insulation Contractor In	License #
Tri-City Insulation	910-486-8855
Insulation Contractor's Company Name & Address	Telephone
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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		
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 <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 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.		
4-2-1-		
Signature of Owner/Contractor/Officer(s) of Corporation Date		
Signature of Owner/Contractor/Officer(s) of Corporation Date Affidavit for Worker's Compensation N.C.G.S. 87-14		
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:		
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		
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:		
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.		
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		
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.		
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		

Tas Administrating Management

Plan Box Number	23
I Idii Dok Hamooi_	

Job Name Remarkans

Date: 9-22-10

Required Inspections for SFA/SFD

Appl. # 10 - 5002525 C Valuation # 155542 Sq. Feet 2394

Sequence

10 10-30 20	R* Bldg. Footing R* Elec. Temp Service Pole R* Building Foundation
20	Address Confirmation
30-999	Open Floor
30-999	R* Bldg. Slab Insp. Movu
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 V_	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