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

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

<u>Application for Residential Building and Trades Permit</u>

.	
Owner's Name: Ted Brown Const. Mc.	Date: ///9/20//
Site Address: Lot #21 Tixen Place	Phone: 910-897-4345
	From Sillister (T2) and
Lixed Rd, (Th) and Micro Tower	
Acres 2d into S/D.	ac, con krugus
Subdivision: Tiken Place	Lot:
Description of Proposed Work: Two Story w/ Borus	
Heated SF: 1818 Wunheated SF: 576 Finished Bonus Room?	The Crawl Space: Slab:
General Contractor Information	<u>on</u>
Building Contractor's Company Name	<u>9/0-89Z - 4345</u> Telephone
DD Recompany Name	Telephone
Address Address	Telephone <u>Joannorris @ Certury</u> JAK. Ne Enlail Address
	59493
Signature of Owner/Contractor/Officer(s) of Corporation	License #
Description of Work Service Size:	On ZOO Amps T-Pole: Yes No
Wester & Pace Electric	919-499-5389
Electrical Contractor's Company Name	Telephone
Ste Leslie Dr. Sanford NC 7733	2
Address	Email Address
Signature of Owner/Contractor/Officer(s) of Corporation	1300 7-11 License #
Mechanical/HVAC Contractor Inform	nation
Description of Work New	
Machanial Sarias Healing 2 Air	919-258-0415 Telephone
Wechanical Contractor's Company Mame	Telephone
2200 Col Springs Rd. Brandway N.C. 773	
Par Trues	Email Address
Signature of Owner Contractor/Officer(s) of Corporation	
Plumbing Contractor Informatio	<u>n</u>
Description of Work New	# Baths 2/2
Plumbing Contractor's Company Name	910-531 - 3111
	Telephone
Address , Startown Lwy Kosebaro, NC ZE	Email Address
un Trotale	_7269
Signature of Owner/Contractor/Officer(s) of Corporation	License #
Insulation Contractor Information	-
nsulation Contractor's Company Name & Address	910-486-8855 Telephone
• • • • • • • • • • • • • • • • • • • •	i elektrotte

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

Homeowners Applying Please answer the following questions then see a Permit Technician Questionnaire per G.S. 87-14 Regulations as to Issue	to Build Their Own Home n to determine if you qualify for permit under Owners Exemption. of Building Permits (Memo available upon request)		
1. Do you own the land on which this building wil	ll be constructed?YesNo		
Have you hired or intend to hire an individual t manage construction of the project?	to superintend and Yes No		
3. Do you intend to directly control & supervise of	onstruction activities? Yes No		
4. Do you intend to schedule, contract, or directly construction work to be done?	pay for all phases of Yes No		
5. Do you intend to personally occupy the building months following completion of construction and construction you do not do so, it creates the presumption under secured the permit?	do you understand that if		
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 of Owner/Contractor/Officer(s) of Corporation Date			
Affidavit for Worker's Con The undersigned applicant being the:	mpensation N.C.G.S. 87-14		
General Contractor Owner	Officer/Agent of the Contractor or Owner		
Do hereby confirm under penalties of perjury that the peset forth in the permit:	erson(s), firm(s) or corporation(s) performing the work		
Has three (3) or more employees and has obtain	ed workers' compensation insurance to cover them.		
Has one (1) or more subcontractors(s) and has o	obtained workers' compensation insurance to cover		
✓ Has one (1) or more subcontractors(s) who has to covering themselves.	heir own policy of workers' compensation insurance		
Has no more than two (2) employees and no sub-	contractors.		
While working on the project for which this permit is sough Department issuing the permit may require certificates on to issuance of the permit and at any time during the permit carrying out the work.	f coverage of worker's componenties incomes with		
	mitted work from any person, firm or corporation		
Company or Name: (unberland Hon	mitted work from any person, firm or corporation		

1

Slab

Plan Box Number	4	A	(
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Job Name Tolkowi

Date: 1-21-11

Required Inspections for SFA/SFD

Appl. # 11 -50025919 Valuation 155542 Sq. Feet 2394

Sequence

10	D* D14. Easting
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

Harnett County Central Permitting

Re: Building Contractor's Company

Cumberland Homes, Inc.

Requesting removal of mechanical HVAC Contractor:

Owner is Phil Bryant

Cool Spring Service, Inc. License #1152; from our job and to add as our new mechanical HVAC Contractor:

Owner is Integrated Systems of the Triangle, LLC

107 ACC Blvd., Raleigh, NC 27617 License #18129.

Thank You,

Danny Norris