\* 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

## 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 Watermark Homes Inc	Date Sep 28 2011
Site Address 310 Timberline Drive Phone	(910) 483-2229
Directions to job site from Lillington	
Subdivision The Summit	Lot 116
Description of Proposed Work Single Family Residential	_#Bedrooms 3
Heated SF 1901 Unheated SF 2424 Finished Rec Room? No General Contractor Information	
Watermark Homes Inc (910) 483-222	.9
Building Contractor's Company Name Telephone	
1308 Fort Bragg Road Fayetteville NC 28305	49261BLD-U
Address /	License #
Must sign & fill of	out second page
Signature of Owner/Contractor/Officer(s) of Corporation  Electrical Permit Information	. •
Description of Work Single Family Residential Service Size	Amps TPole yes/no
Sandy Ridge Electric (910) 323-245	<b>58</b>
Electrical Contractor's Company Name Telephone	
454 Whitehead Road Fayetteville NC 28305	10006EL-U
Address	License #
Signature of Officer(s) of Corporation	
Mechanical/HVAC Permit Information	<u>tion</u>
Description of Work Single Family Residential	
Simmon's Heating, Cooling & Electric (910)	217-5242
Mechanical Contractor's Company Name Teleph	none
1110 East 2nd Street Lumberton NC 28358	02875
Address Name	License #
Signature of Officer(s) of Corporation  Plumbing Permit Information	
Description of Work Single Family Residential	
	# Baths 2 5
Bass Plumbing (910) Plumbing Contractor's Company Name Teleph	237-7996
406 Dehavilland Drive Fayetteville NC 28311 Address	22895-P1 License #
Mega l Dr	LIGGII30 W
Signature of Officer(s) of Corporation	
Insulation Permit Information  Cumberland Insulation 4205 Climaton Rd. Equational Inc. 28312	(010) 494 7419
Cumberland Insulation - 4205 Clington Rd Fayetteville NC 28312 Insulation Contractor's Company Name & Address	(910) 484-7118 Telephone
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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 that by signing below I have obtained all subcontractors permission to obtain these permits 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

12/12/11

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 

Plan Box # FU Job Name WOUN MK	_
App # 1150027978 Valuation 155 866 SQ Feet 239	9_
Inspections for SFD/SFA	
Crawl Slab Mono	
Footing Footing Plumbing Under Slat	b
Foundation Foundation Ele Under Slab	
Address Address Address	
Open Floor Slab Mono Slab	
Rough In Rough In	
insulation insulation insulation	
Final Final	
>2500 >2500 >2500	
Foundation Survey Envir Health/_ Other	
	• • ;
Additions / Other	
Footing	
Foundation	
Slab	
Mono	
Open Floor	
Rough In	
Insulation	
Final	