

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

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

Application for Residential Building and Trades Permit

Owner's Name Sawny Homes, LLC Date 1/9/12

Site Address 101 Emma Ct. Phone 919-781-8104

Directions to job site from Lillington From Lillington, take Hwy. 210 towards Fayetteville.

Take left at McNeill Hobbs Rd. Follow approximately 4 1/2 miles to turn right at Wire Rd. Kenlan Farms subdivision is located approximately 3 1/2 miles on the right.

Subdivision Kenlan Farms Lot 7

Description of Proposed Work new single-family dwelling # of Bedrooms 4

Heated SF 3098 Unheated SF 432 Finished Bonus Room? Crawl Space Slab

General Contractor Information

Sawny Homes, LLC

Building Contractor's Company Name

6030 Creedmoor Rd., Ste. 101, Raleigh, NC 27612

Address

67375

License #

919-781-8104

Telephone

nikole@sawnyhomes.com

Email Address

Electrical Contractor Information

Description of Work new SFD Service Size 200 Amps T-Pole Yes No

Raleigh Lanchart Electric Co.

Electrical Contractor's Company Name

1120 Burma Dr., Apex, NC 27502

Address

24986-U

License #

919-303-6266

Telephone

tigh@lanchart.com

Email Address

Mechanical/HVAC Contractor Information

Description of Work new SFD

Charles William Burgess

Mechanical Contractor's Company Name

6290 Rosalind Rd., Huntington, WV 25705

Address

31157

License #

919-909-4635

Telephone

chuck@carolinaheatcool.com

Email Address

Plumbing Contractor Information

Description of Work new SFD # Baths 2 1/2

Thornton's Plumbing, Inc.

Plumbing Contractor's Company Name

3160-A Vinson Rd., Clayton, NC 27527

Address

22152

License #

919-550-4833

Telephone

thorntonsplumbing@earthlink.net

Email Address

Insulation Contractor Information

Eastern Insulation 334 E. Mountain Dr., Fayetteville, NC 28306 910-486-8855
Insulation Contractor's Company Name & Address Telephone

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

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

Ruth M. Modine
Signature of Owner/Contractor/Officer(s) of Corporation

1/5/12
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 Sunny Homes, LLC

Sign w/Title [Signature] PRODUCTION DOCUMENT COORD. Date 1/5/12

Plan Box # File

Date 1-12-12

Job Name Sandy Home

App # 1250088171

Valuation 229349

SQ Feet 3530

Inspections for SFD/SFA

Crawl _____

Slab _____

Mono

Footing	Footing	Plumbing Under Slab
Foundation	Foundation	Ele. Under Slab
Address	Address	Address
Open Floor	Slab	Mono Slab
Rough In	Rough In	Rough In
Insulation	Insulation	Insulation
Final	Final	Final

>2500 _____

>2500 _____

>2500 _____

Foundation Survey _____

Envir. Health _____

Other _____

Additions / Other

Footing _____

Foundation _____

Slab _____

Mono _____

Open Floor _____

Rough In _____

Insulation _____

Final _____