

HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

LILLINGTON, NC 27546

For Inspections Call: (910) 893-7525 Fax: (910) 893-2793

Bldg Insp scheduled before 2pm available next business day.

Application Number 12-50029015 Date 9/13/13
Property Address 91756 *UNASSIGNED
PARCEL NUMBER 02-1527- - -0185- -04-
Application type description CP NEW RESIDENTIAL (SFD)
Subdivision Name
Property Zoning RES/AGRI DIST - RA-30

Owner Contractor

PARKER ANTHONY TRENT & ERICA OWNER
903 WEEKS ROAD
DUNN NC 28334

Applicant

PARKER ERICA & ANTHONY #2

--- Structure Information 000 000 60X60 3BDR 2BATH SFD W GAR FIN BON ROOM
Flood Zone FLOOD ZONE X
Other struct info # BEDROOMS 3.00
PROPOSED USE SFD
SEPTIC - EXISTING? EXISTING TANK
WATER SUPPLY COUNTY

Permit BLDG,MECH,ELEC,PLB,INSU PERMIT
Additional desc
Phone Access Code 931915
Issue Date 9/13/13 Valuation 217849
Expiration Date 9/13/14

Special Notes and Comments
T/S: 05/25/2012 09:43 AM VBROWN ----
903 WEEKS ROAD DUNN 28334. NO
DIRECTIONS GIVEN. 421N TO DUNN WEEKS
RD RUNS BESIDE I-95.
XX
PERMIT INCLUDES BLDG,ELEC,MECH,PLUMB
INSULATION AND LAND USE.
XX
Work must conform and comply with the
STATE BUILDING CODE and all other State
and local laws, ordinances & regulations

HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

LILLINGTON, NC 27546

For Inspections Call: (910) 893-7525 Fax: (910) 893-2793

Bldg Insp scheduled before 2pm available next business day.

Page 2
Date 9/13/13

Application Number 12-50029015
 Property Address 91756 *UNASSIGNED
 PARCEL NUMBER 02-1527- - -0185- -04-
 Application description . . . CP NEW RESIDENTIAL (SFD)
 Subdivision Name
 Property Zoning RES/AGRI DIST - RA-30

Permit BLDG,MECH,ELEC,PLB,INSU PERMIT

Additional desc . . .
 Phone Access Code . . . 931915

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
10	101	B101	R*BLDG FOOTING / TEMP SVC POLE	_____	___/___/___
20	103	B103	R*BLDG FOUND & TEMP SVC POLE	_____	___/___/___
20-30	814	A814	ADDRESS CONFIRMATION	_____	___/___/___
30-999	105	B105	R*OPEN FLOOR	_____	___/___/___
40-50	129	I129	R*INSULATION INSPECTION	_____	___/___/___
40-60	427	R427	FOUR TRADE ROUGH IN >2500	_____	___/___/___
40-60	127	R127	ONE TRADE ROUGH IN > 2500	_____	___/___/___
40-60	327	R327	THREE TRADE ROUGH IN >2500	_____	___/___/___
40-60	227	R227	TWO TRADE ROUGH IN >2500	_____	___/___/___
50-60	431	R431	FOUR TRADE FINAL >2500	_____	___/___/___
50-60	133	R133	ONE TRADE FINAL > 2500	_____	___/___/___
50-60	331	R331	THREE TRADE FINAL >2500	_____	___/___/___
50-60	231	R231	TWO TRADE FINAL>2500	_____	___/___/___

Harnett County Central Permitting

PO Box 65 Lillington NC 27548

910 893 7825 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 Anthony & Erica Parker Date 9/13/12

Site Address 903 Weeks Rd., Dunn, NC 28334 Phone 910-992-2657

Directions to job site from Lillington take Hwy 421 to Dunn, turn left on Hwy 301 towards Benson (you will leave city limits of Dunn) turn Rt. onto Stewart Rd. then take 2nd paved road to Rt. which is Weeks Rd., go about 1 mi and 903 weeks rd. will be on your left.

Subdivision NO Lot

Description of Proposed Work Construction of New Home # of Bedrooms 3

Heated SF 2695 Unheated SF 983 Finished Bonus Room? [checked] Crawl Space [checked] Slab

General Contractor Information

Whitley Contractors 919-524-1703

Building Contractor's Company Name Telephone

5735 Brogden Rd, Smithfield, NC 27577

Address Email Address

71585

License #

Electrical Contractor Information

Description of Work Service Size Amps T-Pole Yes No

OWNER

Electrical Contractor's Company Name Telephone

Address Email Address

License #

Mechanical/HVAC Contractor Information

Description of Work

Owner

Mechanical Contractor's Company Name Telephone

Address Email Address

License #

Plumbing Contractor Information

Description of Work # Baths 2

Owner

Plumbing Contractor's Company Name Telephone

Address Email Address

License #

Insulation Contractor Information

Insulation Contractor's Company Name & Address Telephone

Owner

*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 Hamett 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 Hamett 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

Brenda Whitley
Signature of Owner/Contractor/Officer(s) of Corporation

9-13-13
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 owned

Sign w/Title Erica L. Parker

Date 9-13-13