

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 Empire Investment Date 11-28-12
Site Address 246 English Springer Dr. Angier Phone 919 422 0355
Directions to job site from Lillington 210 Hwy North. LF Harnett Central Rd.
LF English Springer Dr. House on Right

Subdivision Quail Glen Lot 17
Description of Proposed Work New House. # of Bedrooms 4
Heated SF 2589 Unheated SF _____ Finished Bonus Room? Crawl Space Slab _____

General Contractor Information

BRC Homes Inc.
Building Contractor's Company Name
7101 Hawk Hill Ct Wake Forest Telephone _____
Address NC 27587 ~~Bulmaro~~ Email Address _____
71436 Bulmaro1@embarqmail.com
License # _____

Electrical Contractor Information

Description of Work _____ Service Size _____ Amps T-Pole Yes No
Pedro Electric
Electrical Contractor's Company Name Telephone _____
P.O. Box 61307 Raleigh NC. Email Address _____
Address 21572
License # _____

Mechanical/HVAC Contractor Information

Description of Work _____
Casey Services Telephone 919 556 3338
Mechanical Contractor's Company Name Telephone _____
Burnell Rd Wake Forest NC. Email Address _____
Address 10540 H3.
License # _____

Plumbing Contractor Information

Description of Work _____ # Baths _____
WW Plumbins Telephone _____
Plumbing Contractor's Company Name Telephone _____
Angier NC. Email Address _____
Address 14087
License # _____

Insulation Contractor Information

Smith Insulation Telephone 919 496 3512
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

Bulmaro Rodriguez
Signature of Owner/Contractor/Officer(s) of Corporation

11-28-12
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 BRC Homes Inc.

Sign w/Title Bulmaro Rodriguez Date 11-28-12

Plan Box # File

Date 11/13/12

Job Name BBC

App # 30072

Valuation 200,307

SQ Feet 3083

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 _____