

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 Maddox, Jeffrey & Alanna Date 07/10/2015  
Site Address Lot 3a, Hillmon Grove Road, Cameron, NC 28326 Phone 910-864-0247  
Directions to job site from Lillington Head South on S. Main St towards E. Front Street, Right onto W. Old Road,  
Slight left onto NC-27W, Right onto NC-24W/NC-27 W, turn left onto Hillman Grove Road

Subdivision Halcyon Hills Lot 3 & 4a  
Description of Proposed Work New SFD # of Bedrooms 4  
Heated SF 3118 Unheated SF 448 Finished Bonus Room? No Crawl Space      Slab X

**General Contractor Information**

Showcase Construction Co, 910-864-0247  
Building Contractor s Company Name Telephone  
5506 Yadkin Road, Fayetteville, NC 28303 coordinator@showcasenc.com  
Address Email Address  
41883  
License #

**Electrical Contractor Information**

Description of Work New SFD Service Size 400 Amps T-Pole X Yes      No  
Allman Electric Corp. Inc. 910-485-8617  
Electrical Contractor s Company Name Telephone  
345 Wilkes Road, Fayetteville, NC 28306 rick.stephens@allmanelectric.com  
Address Email Address  
6136-U  
License #

**Mechanical/HVAC Contractor Information**

Description of Work New SFD  
Total Systems Heating & Cooling 910-436-3450  
Mechanical Contractor s Company Name Telephone  
13341 Hwy. 210 South, Spring Lake, NC 28390 Services@totalsystemsnc.com  
Address Email Address  
28846  
License #

**Plumbing Contractor Information**

Description of Work New SFD # Baths 3  
Bill Hallock Plumbing 910-858-4139  
Plumbing Contractor s Company Name Telephone  
1136 Green Street, Parkton, NC 28371 hallockplumbing@embarqmail.com  
Address Email Address  
24037  
License #

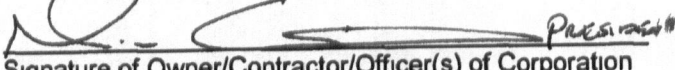
**Insulation Contractor Information**

Healthy Homes Insulation 919-418-0307  
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

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

07/10/2015  
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 Showcase Construction Co.

Michael J. Etowski

Sign w/Title

  
PRESIDENT

Pres.

Date 07/10/2015

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 7/20/15

Application Number . . . . . 15-50036172  
Property Address . . . . . 47925 \*UNASSIGNED  
PARCEL NUMBER . . . . . 09-9564- - -0089- -03-  
Application description . . . . . CP NEW RESIDENTIAL (SFD)  
Subdivision Name . . . . .  
Property Zoning . . . . . PENDING

Permit . . . . . BLDG,MECH,ELEC,PLB,INSU PERMIT

Additional desc . . . . .  
Phone Access Code . . . . . 1099563

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
10-30	814	A814	ADDRESS CONFIRMATION	_____	___/___/___
10-999	309	P309	R*PLUMB UNDER SLAB	_____	___/___/___
10-999	205	E205	R*ELEC UNDER SLAB	_____	___/___/___
20-999	114	B114	R*BLDG MONO SLAB/TEMP SVC POLE	_____	___/___/___
30-50	129	I129	R*INSULATION INSPECTION	_____	___/___/___
30-60	425	R425	FOUR TRADE ROUGH IN	_____	___/___/___
30-60	125	R125	ONE TRADE ROUGH IN	_____	___/___/___
30-60	325	R325	THREE TRADE ROUGH IN	_____	___/___/___
30-60	225	R225	TWO TRADE ROUGH IN	_____	___/___/___
40-60	429	R429	FOUR TRADE FINAL	_____	___/___/___
40-60	131	R131	ONE TRADE FINAL	_____	___/___/___
40-60	329	R329	THREE TRADE FINAL	_____	___/___/___
40-60	229	R229	TWO TRADE FINAL	_____	___/___/___
999		H824	ENVIR. OPERATIONS PERMIT	_____	___/___/___

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 . . . . . 15-50036172 Date 7/20/15  
 Property Address . . . . . 47925 \*UNASSIGNED  
 PARCEL NUMBER . . . . . 09-9564- - -0089- -03-  
 Application type description CP NEW RESIDENTIAL (SFD)  
 Subdivision Name . . . . .  
 Property Zoning . . . . . PENDING

Owner  
 -----  
 MADDOX JEFFREY & ALANNA  
 4129 BATESBURG DRIVE  
 HOPE MILLS NC 28348

Contractor  
 -----  
 SHOWCASE CONSTRUCTION CO.  
 PO BOX 11104  
 FAYETTEVILLE NC 28303  
 (910) 864-0247

Applicant  
 -----  
 MADDOX JEFFREY AND ALANNA  
 4129 BATESBURG DR  
 HOPE MILLS NC 28348  
 (919) 616-0390

--- Structure Information 000 000 75X75 4 BR ATT GARAGE DECKS SLAB  
 Flood Zone . . . . . FLOOD ZONE X  
 Other struct info . . . . . # BEDROOMS 4.00  
 PROPOSED USE SFD  
 SEPTIC - EXISTING? NEW  
 WATER SUPPLY COUNTY

Permit . . . . . BLDG,MECH,ELEC,PLB,INSU PERMIT  
 Additional desc . . . . .  
 Phone Access Code . . . . . 1099563  
 Issue Date . . . . . 7/20/15 Valuation . . . . . 0  
 Expiration Date . . . . . 7/19/16

Special Notes and Comments  
 T/S: 05/19/2015 12:44 PM DJOHNSON --  
 HALCYON HILLS LOTS 3/4  
 HILLMON GROVE RD  
 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

\_\_\_\_\_  
 \_\_\_\_\_

# SHOWCASE CONSTRUCTION CO.

P.O. Box 11104 - 5506 Yadkin Road  
Fayetteville, NC 28303  
Ph: (910) 864-0247 Fax: (910) 868-1586

Harnett County Permitting  
P.O. Box 65  
Lillington, NC 27546

**Reference:**

Permit#: 15-50036172  
Lot 3a, Hillmon Grove Road  
Cameron, NC 28326

To whom this may concern,

This letter is to request a vendor change to the permit referenced above. Please change the plumbing contractor information from Bill Hallock Plumbing to reflect Avery's Plumbing.

Description of Work: New SFD # of Baths: 3

Avery's Plumbing Telephone # 252-943-4833

Plumbing Contractor's Company Name

3221- B Plainview Church Road. Angier, NC 27501 Email Address: N/A

Address

14990

License #

Thank you,

Krystal Arnold  
Showcase Construction  
Phone: 910-864-0247  
Fax: 910-868-1586