

To whom it concerns:

The property @ 291 Sherman Pines Dr.
Fuquay Varina, NC 27526

is not being financed thru a bank.
Financing is 100% by owners.

Rachel A Rogers / J. A. Schwartz
3/9/16

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 JC Ashworth/Rachel Rogers Date 3/9/16

Site Address 291 Sherman Pines Dr. Fuquay Varina, NC Phone 919-971-0851

Directions to job site from Lillington Take 401N⁰ towards Fuquay Varina. After passing Senter's Rest Home, take 1st left into Sherman Pines Subdivision. 291 is in Cul de sac.

Subdivision Sherman Pines Lot # 8

Description of Proposed Work Private Residence # of Bedrooms 4

Heated SF 2665 Unheated SF 839 Finished Bonus Room? Yes Crawl Space Slab

General Contractor Information

Owners 919-971-0851
Building Contractor's Company Name 7720 Eagle Chase Dr. Willow Spring, NC Telephone
Address 27592 Email Address rachel-rogers088@yahoo.com

License #

Electrical Contractor Information

Description of Work New Construction Service Size 200 Amps T-Pole Yes No

Idea Electric Telephone 910-990-5635

Electrical Contractor's Company Name 1937 Edmond Mathis Rd. Clinton, NC
Address 28328 Email Address

24870 U

License #

Mechanical/HVAC Contractor Information

Description of Work New Construction Telephone 919-230-8486
Stephenson Heating & Air

Mechanical Contractor's Company Name 343 Shipwash Dr. Garner, NC 27529
Address 18644 Email Address

18644

License #

Plumbing Contractor Information

Description of Work New Construction # Baths 3 1/2

Wagner Plumbing Telephone 910-890-2299

Plumbing Contractor's Company Name 555 Tirzah Dr. Lillington, NC 27546
Address 31576 class 1 Email Address

31576 class 1

License #

Insulation Contractor Information

Insulating, Inc Telephone 919-772-9000
Insulation Contractor's Company Name & Address 5902 Fayetteville Rd. Raleigh, NC

27603

*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

J.C. Ashworth
Signature of Owner/Contractor/Officer(s) of Corporation

3-9-16
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 _____

Sign w/Title

J.C. Ashworth - owner

Date

3-9-16

Plan Box # A4

Date 3-3-16

Job Name Ashworth

App # 1550037277 Valuation 275599

SQ Feet 2665
Garage 534
= .3199

Inspections for SFD/SFA

Crawl Slab _____ Mono _____ Basement _____

Footing	Footing	Plum Under Slab	Footing
Foundation	Foundation	Ele. Under Slab	Foundation
Address	Address	Address	Waterproofing
Open Floor	Slab	Mono Slab	Plum Under slab
Rough In	Rough In	Rough In	Address
Insulation	Insulation	Insulation	Slab
Final	Final	Final	Open Floor
			Rough In
			Insulation
			Final

Foundation Survey Envir. Health New Septic Other _____

Additions / Other

255840

Footing _____
Foundation _____
Slab _____
Mono _____
Open Floor _____
Rough In _____
Insulation _____
Final _____

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 15-50037277 Date 3/09/16
Property Address 291 SHERMAN PINES DR
PARCEL NUMBER 08-0655- - -0118- -44-
Application type description CP NEW RESIDENTIAL (SFD)
Subdivision Name SHERMAN PINES
Property Zoning PENDING

Owner	Contractor
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NORRIS JAMES & MARSHA 715 VARINA LANE FUQUAY VARINA NC 27526	OWNER

Applicant

ASHWORTH JC & ROGERS RACHEAL
7501 LADORA DR
WILLOW SPRINGS NC 27592
(919) 971-0851

--- Structure Information 000 000 58X70 4BDR W/GARAGE W/DECK CRAWL
Flood Zone FLOOD ZONE X
Other struct info # BEDROOMS 4.00
PROPOSED USE SFD
SEPTIC - EXISTING? NEW SEPTIC
WATER SUPPLY COUNTY

Permit BLDG,MECH,ELEC,PLB,INSU PERMIT
Additional desc . . .
Phone Access Code . . . 1129758
Issue Date 3/09/16 Valuation 0
Expiration Date . . . 3/09/17

Special Notes and Comments
T/S: 10/12/2015 04:04 PM LBENNETT --
291 SHERMAN PINES DR
TAKE 401 N PAST CHALYBEATE SPRINGS AND
AFTER RAWLS BAPTIST CHURCH, SHERMAN
OINES SUBDIVISION IS ON LEFT LOT#8 IN
CUL-DE-SAC
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

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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	425	R425	FOUR TRADE ROUGH IN	_____	___/___/___
40-60	125	R125	ONE TRADE ROUGH IN	_____	___/___/___
40-60	325	R325	THREE TRADE ROUGH IN	_____	___/___/___
40-60	225	R225	TWO TRADE ROUGH IN	_____	___/___/___
50-60	429	R429	FOUR TRADE FINAL	_____	___/___/___
50-60	131	R131	ONE TRADE FINAL	_____	___/___/___
50-60	329	R329	THREE TRADE FINAL	_____	___/___/___
50-60	229	R229	TWO TRADE FINAL	_____	___/___/___
50-60	209	E209	R*ELEC TEMP POWER CERT	_____	___/___/___
999		H824	ENVIR. OPERATIONS PERMIT	_____	___/___/___
999	104	B104	R*FOUND & SETBACK VERIF SURVEY	_____	___/___/___