

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 17-50042158 Date 10/06/17
Property Address 2501 ASHE AVE
PARCEL NUMBER 02-1507- - -0407- -08-
Application type description CP NEW RESIDENTIAL (SFD)
Subdivision Name
Property Zoning RES/AGRI DIST - RA-30

Owner

SHARPE BRYAN L & RACHEL
PO BOX 1393
DUNN NC 28335

Contractor

JOHNSON JUNIOR INC
2384 NC HWY 50 S
BENSON NC 27504
(919) 625-4368

Applicant

SHARPE BRYAN
2501 ASHE AVE
DUNN NC 28334
(910) 985-1139

--- Structure Information 000 000 62X37 3BDR 2.5BATH W/GARWDECK CRWL FNBON
Flood Zone FLOOD ZONE X
Other struct info # BEDROOMS 3.00
PROPOSED USE SFD
SEPTIC - EXISTING? EXIST
WATER SUPPLY COUNTY

Permit BLDG, MECH, ELEC, PLB, INSU PERMIT
Additional desc
Phone Access Code 1213628
Issue Date 10/06/17 Valuation 0
Expiration Date 10/06/18

Special Notes and Comments

T/S: 08/29/2017 11:08 AM LLUCAS ----
GO DOWN 421 TOWARD DUNN - TURN LEFT ON
RED HILL CHURCH RD - THEN TURN LEFT ON
ASHE AVE AT BLINKING LIGHTS - LAND IS
ON THE RIGHT ABOUT 1/2 MILE DOWN THE
ROAD
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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Page 2
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Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
10-30	814	A814	ADDRESS CONFIRMATION	_____	___/___/___
10	101	B101	R*BLDG FOOTING / TEMP SVC POLE	_____	___/___/___
20	103	B103	R*BLDG FOUND & TEMP SVC POLE	_____	___/___/___
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	_____	___/___/___

Plan Box # AA8

Date 10/5/17

Job Name Sharpe

Plan Name _____

App # 17-50042158

Valuation 248832

SQ Feet 2592

Garage 816

= 3408

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 No

Envir. Health Existing Tank Other _____

Additions / Other

Footing _____

Foundation _____

Slab _____

Mono _____

Open Floor _____

Rough In _____

Insulation _____

Final _____

HARNETT COUNTY CASH RECEIPTS
*** CUSTOMER RECEIPT ***
Oper: JBROCK Type: CP Drawer: 1
Date: 10/06/17 52 Receipt no: 100319

Year	Number	Amount
2017	50042150	
2501 ASHE AVE DUNN, NC 28334		
B1	BP - PERMIT FEES	\$1105.00

SFD

JUNIOR JOHNSON

Tender detail		
CK CHECK PAYMEN	2520	\$1105.00
Total tendered		\$1105.00
Total payment		\$1105.00

Trans date: 10/06/17 Time: 13:57:06

** THANK YOU FOR YOUR PAYMENT **

LIEN AGENT INFORMATION

Effective April 1, 2013

In accordance with North Carolina General Assembly Session Law 2012-158, Inspection Departments are not allowed to issue any permit where the project cost is \$30,000 or more unless the application is for improvements to an existing dwelling that the applicant uses as a residence OR the property owner has designated a lien agent and provided the inspections office with the information below:

Name of Lien Agent Fidelity National Title Company, LLC
Mailing address of Agent 19 W Hargett St Suite 507
Raleigh NC 27601
Physical address of Agent 19 W Hargett St Suite 507
Raleigh NC 27601
Telephone 1-888-690-7384 Fax 919-489-5231
Email Support@liensoe.com

The information will be attached to the permit record and a copy provided to the applicant. The applicant is required to post a copy on the construction site.

Excerpt from North Carolina G.S. 160A-417:

"(Effective April 1, 2013) No permit shall be issued pursuant to subdivision (1) of subsection (a) of this section where the cost of the work is thirty thousand dollars (\$30,000) or more, other than for improvements to an existing single-family residential dwelling unit as defined in G.S. 87-15.5(7) that the applicant uses as a residence, unless the name, physical and mailing address, telephone number, facsimile number, and electronic mail address of the lien agent designated by the owner pursuant to G.S. 44A-11.1(a) is conspicuously set forth in the permit or in an attachment thereto. The building permit may contain the lien agent's electronic mail address. The lien agent information for each permit issued pursuant to this subsection shall be maintained by the inspection department in the same manner and in the same location in which it maintains its record of building permits issued."

* 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: Brian Staape Date: _____

Site Address: 2501 Ach Ave Dunn NC Phone: _____

Directions to job site from Lillington: _____

Subdivision: _____ Lot: _____

Description of Proposed Work: _____ # of Bedrooms: _____

Heated SF: _____ Unheated SF: _____ Finished Bonus Room? _____ Crawl Space: _____ Slab: _____

General Contractor Information

Juniata Johnson Tax Building Contractor's Company Name Telephone 919-625-4360

2384 NC 50 S Benson, NC 27024 Address Email Address LEJTR@AOL.Com

33074 License #

Electrical Contractor Information

Description of Work _____ Service Size: 200 Amps T-Pole: Yes No

Little River Electric Electrical Contractor's Company Name Telephone 919-915-0274

Prairton NC Address Email Address _____

23906 License #

Mechanical/HVAC Contractor Information

Description of Work Stephenson HVAC Mechanical Contractor's Company Name Telephone 919-879-4809

GARNER, NC Address Email Address _____

18644 License #

Plumbing Contractor Information

Description of Work _____ # Baths _____

Jeremy Williford Plumbing Plumbing Contractor's Company Name Telephone 919-915-0533

Dunn, NC Address Email Address _____

30747 License #

Insulation Contractor Information

Tatum Insulation Insulation Contractor's Company Name & Address Telephone 919-661-0999

*NOTE: General Contractor / owner 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.

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

10-5-17
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: *Jimmie Johnson Inc*

Sign w/Title: *Jimmie Johnson president* Date: 10-5-17