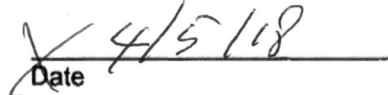


I hereby certify that I have the authority to make necessary application that the application is correct and that the construction will conform to the regulations in the Building Electrical Plumbing and Mechanical codes and the Harnett County Zoning Ordinance I state the information on the above contractors 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


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 _____ Date _____

I will not be financing for the home I am building on Ellis Stewart Ln. I will be paying out of pocket.



Anthony Tripi

Anthony Tripi

Beth Anne Petrich

Notary

I certify that Anthony Tripi personally appeared before me on this day 4/5/2018.

COUNTY OF Harnett

Inspection Department

Parcel Identification Number and address where the building is to be constructed: PIN _____

Address _____

Type of construction: Residential Commercial Industrial Other

Intended use after completion (e.g. Personal residence): _____

Building permit number associated with this application: _____

I, ANTONINO TRUPI (Print Full Name) 2083143510 (Phone Number)

hereby claim exemption from licensure under G.S. 87-1(b)(2) by **initialing** the relevant provision in paragraph 1 and **initialing** paragraphs 2-5 below attesting to the following:

- 1. I certify I am the owner of the property set forth above on which a building is to be constructed or altered and for which application for a building permit is hereby made;
OR
 I am legally authorized to act on behalf of the firm or corporation that is constructing or altering this building on the property owned by the firm or corporation as set forth above:

(Name of Firm or Corporation)

- 2. I will personally superintend and manage all aspects of the construction or alteration of the building and that duty will not be delegated to any person not duly licensed under the terms of Article 1, Chapter 87 of the General Statutes of North Carolina.
- 3. I will be on site regularly during construction and I will be personally present for all inspections required by the North Carolina State Building Code, unless the plans for the construction or alteration of the building were drawn and sealed by an architect licensed pursuant to Chapter 83A of the General Statutes of North Carolina.
- 4. I understand that by executing this licensing exemption AFFIDAVIT pursuant to G.S. 87-1(b)(2), I am required by law to occupy the building for which the licensing exemption is granted for twelve months after completion, during which time it may not be offered for rent, lease or sale.
- 5. I understand a copy of this AFFIDAVIT will be transmitted to the North Carolina Licensing Board for General Contractors for verification I am validly entitled to claim an exemption under G.S. 87-1(b)(2) for the building construction or alteration specified herein. I further understand if the North Carolina Licensing Board for General Contractors determines I am not entitled to claim this exemption the building permit issued for the construction or alteration specified herein shall be revoked pursuant to G.S. 153A-362 or G.S. 160A-422.

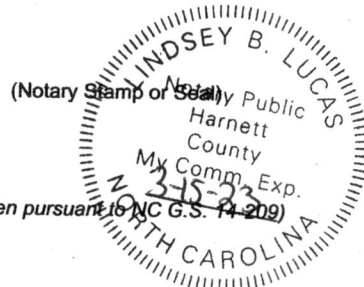
Antonino Trupi
(Signature of Affiant)

4/5/18
(Date)

Sworn or affirmed and subscribed before me this the 5th day of April, 2018

Lindsey B. Lucas
(Signature of Notary Public)

Lindsey B. Lucas
(Printed Name of Notary Public)



(NOTE: It is a class F felony to willfully commit perjury in any affidavit taken pursuant to NC G.S. 74-209)

Application Number 18-50043219 Date 4/05/18
Property Address 330 ELLIS STEWART LN
PARCEL NUMBER 09-9556- - -0106- - -
Application type description CP NEW RESIDENTIAL (SFD)
Subdivision Name
Property Zoning PENDING

Owner

Contractor

TRIPI ANTHONY & MARGARET
7775 ALBANY POST RD
RED HOOK NY 12571

OWNER

Applicant

TRIPI ANTHONY
330 ELLIS STEWART LN
CAMERON NC 28326
(203) 314-3510

--- Structure Information 000 000 60X67 3BDR 2BTH W/GAR W/DECK CRWL
Flood Zone FLOOD ZONE X
Other struct info # BATHS 2
BEDROOMS 3.00
PROPOSED USE SFD
SEPTIC - EXISTING? NEW SEPTIC
WATER SUPPLY EXIST WELL

Permit BLDG,MECH,ELEC,PLB,INSU PERMIT
Additional desc
Phone Access Code . 1227875
Issue Date 4/05/18 Valuation 0
Expiration Date . . 4/05/19

Special Notes and Comments

02/02/2018 01:34 PM LLUCAS ----
330 ELLIS STEWART LN
TAKE 27W TO 24/27 GO WEST ON SANDS RD -
TAKE SANDS RD TO RUNNING BROOK AND MAKE
LEFT INTO ELLIS STEWART LN - PROPERTY
AT END OF ELLIS (GREEN GATES)
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

Application Number	18-50043219	Page	3
Property Address	330 ELLIS STEWART LN	Date	4/05/18
PARCEL NUMBER	09-9556- - -0106- - -		
Application description . . .	CP NEW RESIDENTIAL (SFD)		
Subdivision Name			
Property Zoning	PENDING		
Permit	BLDG, MECH, ELEC, PLB, INSU PERMIT		
Additional desc			
Phone Access Code	1227875		

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	_____	___/___/___
50-60	429	R429	FOUR TRADE FINAL	_____	___/___/___
50-60	209	E209	R*ELEC TEMP POWER CERT	_____	___/___/___
999		H824	ENVIR. OPERATIONS PERMIT	_____	___/___/___

HARNETT COUNTY CASH RECEIPTS

*** CUSTOMER RECEIPT ***

Oper: BPETRICH Type: CP Drawer: 1
Date: 4/05/18 51 Receipt no: 310502

Year	Number	Amount
2018	50043219	
330 ELLIS STEWART LN CAMERON, NC 28326		
01	BP - PERMIT FEES	\$990.00

SFD

ANTHONY TRIPI

Tender detail	
CA CASH PAYMENT	\$990.00
Total tendered	\$990.00
Total payment	\$990.00

Trans date: 4/05/18 Time: 14:36:33

** THANK YOU FOR YOUR PAYMENT **