

Application for Building and Trade Permit

Owner's Name: _____ Date: _____
 Address: _____ Phone: _____
 Directions to Job Site: _____

Subdivision: NA Lot: _____
 Type Construction: (Please Check)
 New Renovation Addition Building Use: (Please Check)
 Moved House Other Residential Modular
 Commercial Multi-Family
 Specify Type of Work: _____

Building Permit Information

Heated: Crawl Space Building Construction Cost \$ _____
 Unheated: Slab Acres Included: 1 Stories: _____
 Building Contractor's Company Name: Moore Home Builders & Realty Address: PO Box 570 Lillington, NC
 Signature of Officer(s) of Corporation: W. Al Moore License #: 18637 Telephone: 910-893-4875

Electrical Permit Information

Description of Work: Electrical Electrical Cost \$ _____
 TS Pole: Yes No Underground Overhead
 Permanent Service: Underground Overhead Service Size: _____ Amps
 Electrical Contractor's Company Name: Pioneer Electric Maintenance Co., Inc. Address: 4812 Old 05421 Lillington, NC, 27546
 Signature of Officer(s) of Corporation: Neill B. Johnson License #: 210643 Telephone: 910-814-3781

Insulation Permit Information

Residential Other Not Required _____
 Insulation Contractor's Company Name: TLC CITY INSULATION Address: 418 Person & Fay
 Telephone: 910-886-8855

Mechanical Permit Information

Description of Work: HVAC Number of Units: _____ Type System: _____ Mechanical Cost \$ _____
 Number of Tons: _____
 Mechanical Contractor's Company Name: Beasley's Htg & A/C, Inc. Address: 5160 C. Beasley Ln. Coats N.C. 27521
 Signature of Officer(s) of Corporation: T. Brent Beasley License #: 9497 Telephone: 919-894-4248

Plumbing Permit Information

Description of Work: Plumbing Number of Baths: _____ Plumbing Cost \$ _____
 Plumbing Contractor's Company Name: Double J Plumbing LLC Address: 1014 Byrd Rd Bunnlevel, NC
 Signature of Officer(s) of Corporation: _____ License #: 210649 Telephone: (910) 814-7705 28323

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

4/17/2018

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

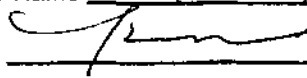
_____ Has no more than two (2) employees and no subcontractors

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

Moss Home Builders & Realty Inc

Sign w/Title



Date

4/17/2018

HARNETT COUNTY CENTRAL PERMITTING
P.O. BOX 65
LILLINGTON, NC 27546
For Inspections Call: (910) 893-7525 Fax: (910) 893-2793

Application Number 18-50043899 Date 6/01/18
Property Address 96 JOEL WAY
PARCEL NUMBER 13-0610- - -0255- -07-
Application type description CP NEW RESIDENTIAL (SFD)
Subdivision Name CENTRELLA 8LOTS
Property Zoning RES/AGRI DIST - RA-30

Owner

TRIUMPH CAPITAL GROUP LLC &
CENTRELLA LYNN A
510 E WASHINGTON STREET
LILLINGTON NC 27546

Contractor

MOSS KENNETH A
PO BOX 577
LILLINGTON NC 27546
(910) 893-4875

Applicant

MOSS HOMEBUILDERS
PO BOX 577
LILLINGTON NC 27546
(910) 890-2111

--- Structure Information 000 000 50X50 3BDR 2.5BA CRAWL W/GARAGE
Flood Zone FLOOD ZONE X
Other struct info # BATHS 2.5
BEDROOMS 3000000.00
PROPOSED USE SFD
SEPTIC - EXISTING? NEW TANK
WATER SUPPLY COUNTY

Permit BLDG, MECH, ELEC, PLB, INSU PERMIT
Additional desc
Phone Access Code 1245240
Issue Date 6/01/18 Valuation 0
Expiration Date 6/01/19

Special Notes and Comments

T/S: 04/30/2018 04:21 PM JBROCK ----
96 JOEL
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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Permit BLDG,MECH,ELEC,PLB,INSU PERMIT

Additional desc . . .
Phone Access Code . . . 1245240

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: JBROCK Type: CP Drawer: 1
Date: 6/01/18 52 Receipt no: 372913

Year	Number	Amount
2018	50043899	
96 JOEL WAY		
LILLINGTON, NC 27546		
B1	BP - PERMIT FEES	\$1000.00

SFD

MOSS BUILDERS

Tender detail		
CK CHECK PAYMEN	7514	\$1000.00
Total tendered		\$1000.00
Total payment		\$1000.00

Trans date: 6/01/18 Time: 14:57:22

** THANK YOU FOR YOUR PAYMENT **