Sanford Metal Building LLC Phone 919 776 2623 P O Box 5231

Sanford NC 27331

Fax 919 775 5451 E mail sanfordmetalbuilding@gmail.com

March 24,2011

Harnett County Inspections Department **108 East Front Street** Lillington, NC 27546

RE Walker Automotive 1129 Sherriff Johnson Road Permit # 10 50024840

To whom it may concern,

Due to liability reasons that may be caused by others it has been advised to Sanford Metal Building LLC to pull our permit Sanford Metal Building LLC provided only a pre engineered metal building and erection along with 2x4 wood framing at the 20'x 60' office area only

Sincerely,

Sanford Metal Building LLC

Bryan Ritter Bryan Ritter 3-24-11

| * Each section below to be filled out by | Application # 10 | 5 24 840 | | |
|----------------------------------------------------------|-----------------------------------------------------------------------------------------|-----------------------------|--|--|
| whomever performing work. Must be owner | Harnett County Central Permitting | <u> </u> | | |
| name & phone must match information on | PO Box 65 Lillington, NC 27546 910-893-7525 Fax 910-893-2793 www.harnett.org/permits | | | |
| license. | COMMERCIAL | SCANNED | | |
| 7 | Application for Building and Trades Permit | DATE | | |
| Owner's Name: James | W. V. Rence D. Walker JDate: | | | |
| Site Address: <u>() るり ろれ</u> | ec. HJODDJON RO Phone: 410 | <u>.843.529</u> 6 | | |
| Directions to job site from Lilling | | Addier, | | |
| Righton old Coo | | ies Creck Rd | | |
| Subdivision: Ma | F abhussi Rd, just beyon perty on right Lot: | d mitchell Rd | | |
| Description of Proposed Work: | · · · · · · · · · · · · · · · · · · · | | | |
| Heated SF <u>1200</u> Unheated | I SF Contractor Information Building Cost \$ <u>}.3</u> | 500 | | |
| | ilding LLC 9/9-276-26 | | | |
| Building Contractor's Company | | <u> </u> | | |
| 1414 Trammar K | 2. Sonford. NC 27330 | (2038 | | |
| Address 711 | | License # | | |
| Signature of Owner/Contractor/ | Must sign & fill out secor | | | |
| Elec | trical Permit Information Elec Cost \$ 700 | 0.00 | | |
| Description of Work | Service Size: Amps | #TPoles | | |
| Electrical Contractor's Compan | v Name Telephone | 7 | | |
| 1309 1 MM | IN ST LILHNGTON | 49100 | | |
| Address | L La avenue | License # | | |
| Jonal Can | | , | | |
| Signature of Officer(s) of Corpo Mecha | nical Permit Information Mech Cost \$ | | | |
| Description of Work | # Unit | S | | |
| | | <u> </u> | | |
| Mechanical Contractor's Comp | any Name Telephone | | | |
| | | License # | | |
| Address | | | | |
| Signature of Officer(s) of Corpo Plum | bration bing Permit Information Plumb Cost \$ | × . | | |
| Description of Work | mhu #Bat | hs | | |
| Hancthe | 910-5 | 793-87.97 | | |
| Plumbing Contractor's Compar | Name Telephone Telephone | 11907 | | |
| NO BOY 124 | Baris Creek N= | <u>///////</u> License # | | |
| Address | | | | |
| Signature of Officer(s) of Corpo | pration | | | |
| Insulation Permit Information | | | | |
| Inculation Contractor's Compa | Name & Address | Telephone | | |
| Insulation Contractor's Company Name & Address Telephone | | | | |
| | | | | |

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| Sprinkler | System Information |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sprinkler Contractor's Company Name | Contact & Telephone |
| Address | License # |
| Signature of Officer(s) of Corporation | |
| · · · · · · · · · · · · · · · · · · · | System Information |
| Fire Alarm Contractor's Company Name | Contact & Telephone |
| Address | License # |
| Signature of Officer(s) of Corporation <u>Driveway Access</u> - NC Department of Tran | nsportation Driveway Access/Permit? Yes No |
| and that the construction will conform to the re Mechanical codes, and the Harnett County Zonin contractors is correct as known to me and if <u>any</u> or number of bedrooms, building and trade plans, En changes, I certify it is my responsibility to notify the any and all changes. | necessary application, that the application is correct gulations in the Building, Electrical, Plumbing and ng Ordinance. I state the information on the above changes occur including listed contractors, site plan, invironmental Health permit changes or proposed use the Harnett County Central Permitting Department of it re-issue fee is \$150.00. After 2 years re-issue fee |
| Signature of Owner/Contractor/Officer(s) of Corpor | ration Building Date |
| Affidavit for Worker's The undersigned applicant being the: | Compensation N.C.G.S. 87-14 |
| General Contractor Owner | Officer/Agent of the Contractor or Owner |
| Do hereby confirm under penalties of perjury that t set forth in the permit: | he person(s), firm(s) or corporation(s) performing the work |
| Has three (3) or more employees and has o | obtained workers' compensation insurance to cover them. |
| Has one (1) or more subcontractors(s) and them. | has obtained workers' compensation insurance to cover |
| Has one (1) or more subcontractors(s) who covering themselves. | has their own policy of workers' compensation insurance |
| Has no more than two (2) employees and n | o subcontractors. |
| Department issuing the permit may require certifica | s sought it is understood that the Central Permitting ates of coverage of worker's compensation insurance prior e permitted work from any person, firm or corporation |
| | P'Il' UN |

8/21/08

| | _ | m # 10 5 24 8 | 40 | |
|----------------------------------------------------------------------------|---------------------------------------------------------------------------|------------------------------|---------------------------|--|
| below to be filled out by coming work. Must be owner address company | Applicatio Harnett County Central Permitt | in #_ <u>10 0 210</u> ing | | |
| | PO Box 65 Lillington, NC 27546 | | | |
| none must match information on | 910-893-7525 Fax 910-893-2793 www.harnett COMMERCIAL | l.org/permits | SCANNED | |
| | Application for Building and Trade | es Permit | DATE | |
| Owner's Name: <u>James</u> | | - J.Date: 10.8-10 | $\underline{\mathcal{O}}$ | |
| | er: HJODUSON Rd Pho | one: 910.893.5 | <u>29</u> 6 | |
| Directions to job site from Lilli | | words Augier, | | |
| Righton Did (D) | sts Rd. Crossover D | | Rd | |
| tuessinte obecit | H Johnson Rd, just 1 perty on right | ocyond Mitche | 11 Rd | |
| Subdivision: <u>NIC</u> | perty on right | Lot: | | |
| Description of Proposed Work | : Automotive Repair | Shop | | |
| 12. 2. 2. 1. 1. | | | | |
| Gener | al Contractor Information Building C | Cost \$ 1.30, 500 | | |
| | | 776-2623 | <u>_</u> | |
| Building Contractor's Compar | | 6103 | 8 | |
| 1414 rammer | Rd. Sanford, NC 27330 | License | # | |
| Address Att | Must sign & | fill out second page | | |
| Signature of Owner/Contract | or/Officer(s) of Corporation ectrical Permit Information Elec Cos | + \$ 9 050 00 | | |
| Ele Description of Work | Service Size | Amps #TPoles | | |
| DATRICK ELEC | T: Cout ILL 293. | -5-114 | | |
| Electrical Contractor's Comp | any Name Telephone | 1 LIAIN | | |
| 1309 N XAC | TIN SA LILANGIO | | # | |
| Address | Hord | Elionico | | |
| Signature of Officer(s) of Con | rooration | | | |
| Signature of Childer (3) of Con | hanical Permit Information Mech Co | ost \$ 4000.20 | | |
| | | | (9 | |
| BRUSTE-US Htg | 42 <u>HAIC, JUL.</u> mpany Name Te Hy La Coats, N.C. 275 D | 1/4-899-9-24 | 0 | |
| Mechanical Contractor's Con | npany Name | 521 949 | 7 | |
| <u>5700, C, Deus la</u> Address | The cours, we have | License | e # | |
| R. Burot Blas | Que . | | ~ | |
| Simplure of Officer(s) of Co | rperation | act ¢ | | |
| | umbing Permit Information Plumb Co | # Baths | | |
| Description of Work | | # Datito | | |
| Plumbing Contractor's Com | pany Name Te | elephone | | |
| Flumbing Contractor & Com | | <u></u> | | |
| Address | | Licens | e # | |
| | | | | |
| Signature of Officer(s) of Corporation Insulation Permit Information | | | | |
| | | | | |
| Insulation Contractor's Corr | ipany Name & Address | Telephone | • | |

24840

WEDTEC, INC. P.A. CONSULTING ENGINEERING AND LAND SURVEYING 2927 MIDDLESEX ROAD FAYETTEVILLE, N. C., 28306 PHONE \ FAX (910) 425-1941 CELL PHONE – (910) 624 -4779

OCTOBER 27, 2010

HARNETT COUNTY BUILDING INSPECTIONS DEPARTMENT P.O. BOX 65 LILLINGTON, NORTH CAROLINA 27546

ATTENTION: MR. KEN SLATTUM

RE: JAMES W. AND RENEE D. WALKER, JR. 1129 SHERIFF JOHNSON ROAD LILLINGTON, NORTH CAROLINA

DEAR SIR:

IN RESPONSE TO YOUR PLAN REVIEW I AM SUBMITTING HEREWITH MY REVISED DRAWING SHEETS W-1, P-1 AND THE CODE SUMMARY SHEET.

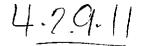
ON THE CODE SUMMARY SHEET I REVISED THE BUILDING CLASSIFICATION TO S-1 AND REVISED THE ALLOWABLE BUILDING SQUARE FOOTAGE.

ON SHEET W-1 I REVISED THE BATH ROOM DETAILS TO INDICATE THAT ADA COMPLIANCE MUST MEET ANSI A117.1 REQUIREMENTS.

ON SHEET P-1 I REVISED THE NORTH CAROLINA PLUMBING CODE TO THE 2009 EDITION. I ALSO ADDED THE NOTE THAT ALL WATER PIPING SHALL BE CPVC MATERIALS.

SHOULD YOU HAVE ANY QUESTIONS, PLEASE DO NOT HESITATE TO CONTACT ME.

SINCERELY. WILBUR E. DEES, P.E. P.L.S.



M.C. Quiny Walker did not do any work on blog. app.# 10.50024840. Contractor pulled out n/o coelecting problems.

J. Jell.