

Application for Building and Trade Permit

Owner's Name: JEREMY Bloom Date: 7/21/06
Address: 2920 STR + 395 Shelby OH 44875 Phone: 910 960 8390
Directions to job site: Hwy 27 turn Right on Spri

Subdivision: _____ Lot: _____
Construction Type: (Please Check) Building Use: (Please Check)
 New Residential
 Renovation Modular
 Addition Commercial
 Moved House Multi-Family
 Other
Description of Proposed Work: 8x16 Patio
Total Project Cost: _____

Building Permit Information

Heated SF _____ Crawl Space () Building Construction Cost \$ 800.00
Unheated SF _____ Slab () Acres Disturbed _____ Stories _____
Vision Homes
Building Contractor's Company Name Telephone _____
2965 Gillespie St Fayetteville NC PL LICENSE
Address 24306 License # _____
Paula Emerson
Signature of Officer(s) of Corporation

Electrical Permit Information

Description of Work _____ Electrical Cost \$ _____
TS Pole: Yes () No () Underground () Overhead ()
Permanent Service: Underground () Overhead () Service Size: _____ Amps
Electrical Contractor's Company Name Telephone _____
Address License # _____
Signature of Officer(s) of Corporation

Mechanical Permit Information

Description of Work _____
Number of Units _____ Type System _____ Mechanical Cost \$ _____
Mechanical Contractor's Company Name Telephone _____
Address License # _____
Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work _____
Number of Baths _____ Plumbing Cost \$ _____
Plumbing Contractor's Company Name Telephone _____
Address License # _____
Signature of Officer(s) of Corporation

Insulation Permit Information

Residential () Other () Not Required ()
Insulation Contractor's Company Name Address Telephone

Sprinkler System Information

Sprinkler Contractor's Company Name Telephone _____

Contact Person

Address License # _____

Signature of Officer(s) of Corporation

Fire Alarm System Information

Fire Alarm Contractor's Company Name Telephone _____

Contact Person

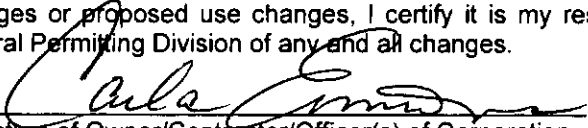
Address License # _____

Signature of Officer(s) of Corporation

Driveway Access

NC Department of Transportation Driveway Access/Permit? Yes ___ No ___

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 if any changes occur including listed contractors, site plan, 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 Division of any and all changes.



Signature of Owner/Contractor/Officer(s) of Corporation Date 7/21/06

**Affidavit for Worker's Compensation
N.C.G.S. 87-14**

The undersigned applicant for Building Permit # _____ being the:

- _____ 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/have three (3) or more employees and has/have obtained workers' compensation insurance to cover them.

_____ Has/have one (1) or more subcontractors(s) and has/have obtained workers' compensation insurance to cover them.

_____ Has/have one (1) or more subcontractors(s) who has/have their own policy of workers' compensation insurance covering themselves.

_____ Has/have not 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.

Firm Name: Vision Homes

By/Title: Carla Cannon Managing member

Date: 7/21/06