

\* Each section below to be filled out by  
whomever performing work. Must be owner  
or licensed contractor. Address, company  
name & phone must match information on  
license.

Application # 16265

Harnett County Central Permitting  
PO Box 65 Lillington, NC 27545  
Telephone Number 910-863-7525 www.harnett.org  
**Application for Building and Trade Permit**

Owner's Name: HIGHLAND HOME BUILDERS Date: 11-27-06  
Address: 80 RIDGE VIEW DR CAMERON NC Phone: 9-499-2424

Directions to job site from Lillington: 27 TO 24W, GO 1 MILE AND  
TAKE LEFT INTO SUBDIVISION

Subdivision: THE HIGHLANDS AT SHEPHERD FOREST Lot B

Construction Type: (Please Check) Building Use: (Please Check)  
 New  Moved House  Residential  Commercial  
 Renovation  Addition  Other  Modular  Multi-Family

Total Project Cost: \$10,000 Description of Proposed Work: ATTACHED GARAGE

Heated SF  Crawl Space ( )  
Unheated SF  Slab ( )

**General Contractor Information**

Building Construction Cost \$ 10,000  
Acres Disturbed 919 770 2608 Stories 2

Building Contractor's Company Name ROBERT SMITH Telephone 204 MERSADRES LN CAMERON NC

Address Robert Smith License # PRIVELEGE

Signature of Owner/Contractor/Officer(s) of Corporation - Must sign back of form & workers comp

**Electrical Permit Information**

Description of Work OUTLETS LIGHTS Electrical Cost \$ 1,000

TS Pole: Yes ( ) No ( ) Underground ( ) Overhead ( )  
Permanent Service: Underground (M) Overhead ( ) Service Size: 200 Amps

Electrical Contractor's Company Name MID CAROLINA ELECTRIC Telephone 9-353-1122

Address 117 JACKSON ST. SANFORD, NC 28326 License # 26570-L

Signature of Officer(s) of Corporation Walter Spivey

**Mechanical Permit Information**

Description of Work \_\_\_\_\_ Mechanical Cost \$ \_\_\_\_\_  
Number of Units \_\_\_\_\_ Type System \_\_\_\_\_

Mechanical Contractor's Company Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_ License # \_\_\_\_\_

Signature of Officer(s) of Corporation \_\_\_\_\_

**Plumbing Permit Information**

Description of Work \_\_\_\_\_ Plumbing Cost \$ \_\_\_\_\_  
Number of Baths \_\_\_\_\_

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 \_\_\_\_\_

Application # \_\_\_\_\_

**Sprinkler System Information - Commercial**

\_\_\_\_\_  
Sprinkler Contractor's Company Name

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Contact Person

\_\_\_\_\_  
License #

\_\_\_\_\_  
Address

\_\_\_\_\_  
Signature of Officer(s) of Corporation

**Fire Alarm System Information - Commercial**

\_\_\_\_\_  
Fire Alarm Contractor's Company Name

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Contact Person

\_\_\_\_\_  
License #

\_\_\_\_\_  
Address

\_\_\_\_\_  
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 Department of any and all changes.

Terri L. Cieri  
Signature of Owner/Contractor/Officer(s) of Corporation

10/26/06  
Date

Application # \_\_\_\_\_

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

The undersigned applicant for Building Permit # \_\_\_\_\_ 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/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: HIGHLAND HOME BUILDERS

Sign/Title: Jeri L. Cieri / OWNER

Date: 10/26/06

E-9

GRACE  
ATTACHED  
TO MFG. HOME

JEFF GRU  
12-7-06

**Required Inspections for SFA/SFD**

Appl # 0650016265  
Valuation # 37,424  
Sq. Ft 576

<u>Seq</u>		<u>Seq</u>	
10	<input checked="" type="checkbox"/> R*Bldg Footing	60	<input type="checkbox"/> Two Trade Final > 2500
10-30	<input type="checkbox"/> R*Elec Temp Service Pole	60	<input type="checkbox"/> One Trade Final
20	<input checked="" type="checkbox"/> R*Bldg Foundation	60	<input type="checkbox"/> One Trade Final > 2500
20	<input type="checkbox"/> Address Confirmation	999	<input checked="" type="checkbox"/> Envir. Operations Permit
30-999	<input type="checkbox"/> R*Open Floor		
30-999	<input type="checkbox"/> R*Bldg Slab Insp		
30-999	<input type="checkbox"/> R*Elec Under Slab		
30-999	<input type="checkbox"/> R*Plumb under Slab		
30-999	<input type="checkbox"/> R*Bldg Water/Damp Proofing		
40	<input type="checkbox"/> Four Trade Rough In		
40	<input type="checkbox"/> Four Trade Rough In > 2500		
40	<input type="checkbox"/> Three Trade Rough In		
40	<input type="checkbox"/> Three Trade Rough In > 2500		
40	<input checked="" type="checkbox"/> Two Trade Rough In		
40	<input type="checkbox"/> Two Trade Rough In > 2500		
40	<input type="checkbox"/> One Trade Rough In		
40	<input type="checkbox"/> One Trade Rough In > 2500		
50	<input type="checkbox"/> R*Insulation Inspection		
60	<input type="checkbox"/> Four Trade Final		
60	<input type="checkbox"/> Four Trade Final > 2500		
60	<input type="checkbox"/> Three Trade Final		
60	<input type="checkbox"/> Three Trade Final > 2500		
60	<input checked="" type="checkbox"/> Two Trade Final		