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\* 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 # 1050024704  
Harnett County Central Permitting  
PO Box 66 Lillington, NC 27546  
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

**Application for Residential Building and Trades Permit**

Owner's Name: Annie Hawkins Date: 6-22-10  
Site Address: 451 Senter Lane Phone: 910-893-9133  
Directions to job site from Lillington: \_\_\_\_\_

Subdivision: Senter Lane Lot: \_\_\_\_\_  
Description of Proposed Work: Garage 24x26 #Bedrooms: \_\_\_\_\_  
Heated SF \_\_\_\_\_ Unheated SF  Finished Rec Room? \_\_\_\_\_ Crawl Space ( ) Slab ( )

**General Contractor Information**

American Handicraft Inc 910-850-5096  
Building Contractor's Company Name Telephone  
7611 Atkins Dr., Fay, NC 28311  
Address License #

[Signature]  
Signature of Owner/Contractor/Officer(s) of Corporation

Must sign & fill out second page

**Electrical Permit Information**

Description of Work Wiring to Existing Service Size: \_\_\_\_\_ Amps TPole: yes/no  
Hooker's Electric 919-770-1071  
Electrical Contractor's Company Name Telephone  
7203 Broadway Rd. Sanford 27332 10657-L  
Address License #

David Hooker  
Signature of Officer(s) of Corporation

**Mechanical/HVAC Permit Information**

Description of Work \_\_\_\_\_  
Mechanical Contractor's Company Name Telephone \_\_\_\_\_  
Address License # \_\_\_\_\_  
Signature of Officer(s) of Corporation \_\_\_\_\_

**Plumbing Permit Information**

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

**Insulation Permit Information**

Insulation Contractor's Company Name & Address Telephone \_\_\_\_\_

### Homeowners Applying to Build Their Own Home

Please answer the following questions then see a Permit Technician to determine if you qualify for permit under Owners Exemption. Questionnaire per G.S. 87-14 Regulations as to Issue of Building Permits (Memo available upon request)

1. Do you own the land on which this building will be constructed?  yes  no
2. Have you hired or intend to hire an individual to superintend and manage construction of the project?  yes  no
3. Do you intend to directly control & supervise construction activities?  yes  no
4. Do you intend to schedule, contract, or directly pay for all phases of construction work to be done?  yes  no
5. Do you intend to personally occupy the building for at least 12 consecutive months following completion of construction and do you understand that if you do not do so, it creates the presumption under law that you fraudulently secured the 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, 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.

Jared Bethune  
Signature of Owner/Contractor/Officer(s) of Corporation

6-27-10  
Date

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

The undersigned applicant being the:

PRIVILEGE ~~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: American Handicraft Inc.

Sign w/Title Jared Bethune / President Date: 6-27-10



## PRIVILEGE LICENSE

One year privilege license for projects under \$30,000. License must be renewed each year. This is not a business license. Does not cover work in Angier, Dunn or Erwin zoning. Only for Building Permits, not trade work.

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Date: 6-28-10

Name: Fred Bethune

Company Name: American Handicraft Inc.


Address: 7611 Atkins Dr.

Mailing Address: P.O. Box 9632

City, State, Zip: Fay, NC. 28311

Phone Number: 910-488-4335 Fax: 488-2038

Type of Business/Work Performed: Home Improvements

Signature of Applicant: 

Plan Box Number File

Job Name Fred Bathum

Date: 6-29-10

**Required Inspections for SFA/SFD**

Appl. # 10-5-24704

Valuation \$16281

Sq. Feet 624

**Sequence**

10	<input checked="" type="checkbox"/>	R* Bldg. Footing
10-30	<input type="checkbox"/>	R* Elec. Temp Service Pole
20	<input checked="" type="checkbox"/>	R* Building Foundation
20	<input type="checkbox"/>	Address Confirmation
30-999	<input type="checkbox"/>	Open Floor
30-999	<input checked="" type="checkbox"/>	R* Bldg. Slab Insp.
30-999	<input checked="" type="checkbox"/>	R* Elec. Under Slab
30-999	<input type="checkbox"/>	R*Plumb. Under Slab
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
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
60	<input type="checkbox"/>	Two Trade Final > 2500
60	<input type="checkbox"/>	One Trade Final
60	<input type="checkbox"/>	One Trade Final > 2500
999	<input type="checkbox"/>	Envir. Operations Permit