

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

Hamett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.hamett.org/permits

Application # 1050025249

Application for Residential Building and Trades Permit

Owner's Name: Michael + Shelley Pearson Date: 9/21/10

Site Address: 8521 Christian Light Rd. Phone: 868 8022

Directions to job site from Lillington: 401 north
left on Christian Light, 8 miles,
house is on the left

Subdivision: Mels Meadow Lot: 47

Description of Proposed Work: home addition # of Bedrooms: 1

Heated SF: 1470 Unheated SF: _____ Finished Bonus Room? _____ Crawl Space: Slab: _____

General Contractor Information

Building Contractor's Company Name: Owner Telephone: (919) 625-5757

Address: [Signature] Email Address: Shelleyp@dembergmail.com
License #: _____

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

Electrical Contractor Information

Description of Work: new electrical upfit Service Size: 200 Amps T-Pole: Yes No

Electrical Contractor's Company Name: CHURCH'S ELECTRIC Co INC Telephone: 919-868-9352

Address: 5592 CHRISTIAN LIGHT RD, Fuquay/Varina 27526 Email Address: robbie_church@yahoo.com

Signature of Owner/Contractor/Officer(s) of Corporation: [Signature] License #: 21305-U

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

Mechanical/HVAC Contractor Information

Description of Work: New air/heat system install
CB air Telephone: 919-4226862

Mechanical Contractor's Company Name: _____

Address: 5320 Pamela Dr. Raleigh, NC 27603 Email Address: _____

Signature of Owner/Contractor/Officer(s) of Corporation: [Signature] License #: 23548

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

Plumbing Contractor Information

Description of Work: ROUGH + TRIM ADDITION # Baths: 1.5

Plumbing Contractor's Company Name: WYN PLUMBING Co. INC Telephone: 919-657-0195

Address: PO Box 1239 ANSIEZ, N.C. Email Address: _____

Signature of Owner/Contractor/Officer(s) of Corporation: [Signature] License #: 14087

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

Insulation Contractor Information

Insulation Contractor's Company Name & Address: Magic Construction of NC Telephone: 919-255-4671

Insulation Contractor's Company Name & Address

*NOTE: General Contractor must fill out and sign the second page of this application.

app # 1050025249

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.

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

9-21-10
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: Shelley Pearson
Sign w/Title: [Signature] Owner Date: 9-21-10

Plan Box Number File

Job Name Mel's Meadows

Date: 10-1-10

Required Inspections for SFA/SFD

Appl. # 10-5-25249

Valuation \$ 95,508

Sq. Feet 1470

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 checked="" type="checkbox"/>	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
40	<input checked="" 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 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 checked="" type="checkbox"/>	R* Insulation
60	<input checked="" 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 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 checked="" type="checkbox"/>	Envir. Operations Permit