*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 # <u>OS 50013109</u> Hamett County Central Permitting PO Box 65 Lillington, NC 27546 910-893-7525 Fax 910-893-2793 www.hamett.org/permits Application for Residential Building and Trades Permit

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12/29	09
12/2	

2	advictor Demanting and Ti	ades Permit
Owner's Name: CHAISTOPHER HAHLEY DBH	TOP HAT RIVERIS QUANT	Date:
Site Address: Lot 1 Jay 14 096	Phone Phone	: 910 273-411
Directions to job site from Lillington: 2	105 Right of	n Rav Rd
Left on Creeksville	Church Rd H	ouse on last
Corner lot		
Subdivision: Jay 14 09ks		I ot:
Description of D. 1144 A		
Heated SF Fin	ished Rec Room?	Crawl Space (
		-273-4/10
CHRISTOPHER D. Hatky Building Contractor's Company Name	Telephone	
Address		Owner License #
On So RAG		2,00,100 M
Signature of Owner/Contractor/Officer(s) of Corpo	Must sign & fill out	second page
Electrica	Permit Information	
Description of vvork	Service Size:	Amps TPole: yes/no
O dell Electrie Electrical Contractor's Company Name	910-391-4	859
	Telephone	C12511
240 Stauton St Fayethenine	18704	5 / 2 5 6/ License #
D'dell of malost		License #
ignature of Officer(s)/of Corporation		
	VAC Permit Information	n
escription of Work		
COSS Creek HTG 4 A/C echanical Contractor's Company Name	910-42	3-032#
echanical Contractor's Company Name	Telephone	8
2767 braham Rd For Wetterili	1 NC78304	9920
Idress SEE Followin		License #
gnature of Officer(s) of Corporation		
Plumbing)	Permit Information	
escription of Work Run plumbing For	Addithon tex. 41,#1	Baths
miles L. Harrs Imbing Contractor's Company Name	7.11	
	Telephone	<u> </u>
Stor Toggel Ave Fay ,	NC 28306 1-2	20056
SEE FOLLOWING PAGES		License #
nature of Officer(s) of Corporation	ermit Information	
Rlown right South	mint information	1 (/ 15-2 -22
Blown right insulation Contractor's Company Name & Address	<u>/ / / / / / / / / / / / / / / / / / / </u>	Telephone
an any use Cont	fordly 26200	i diapitoria
PO BOX 450 Fayet	NE ZOJUE	
	100	

ı	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		
	3. Do you intend to directly control & supervise construction activities? X yes no		
	4. Do you intend to schedule, contract, or directly pay for all phases of construction work to be done?		
	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		
	A STATE OF THE STA		
	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. Discontinuous Contractor/Officer(s) of Corporation 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.		
Ū	Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover ham.		
ā	Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance overing themselves.		
_	Has no more than two (2) employees and no subcontractors.		
to	fhile working on the project for which this permit is sought it is understood that the Central Permitting epartment issuing the permit may require certificates of coverage of worker's compensation insurance prior issuance of the permit and at any time during the permitted work from any person, firm or corporation rrying out the work.		
Со	ompany or Name: CHRISTOPHER D. Hatley On w/Title: Dec 157 2009		
Sig	n w/Title: Dec 157 2009		

DEC-3-2009 10:29A FROM:

TO:ESA FROM

Accident below to be 40cd and by Adver performing work. Shed be certain toppost contractor. Address, company spind it promo must match belomization on

Application # OS 50013109 RR RR

Hornet County Central Pariniting PO Ser 68 Listean, NG 27946

193-7636 Fix 910-653-2793 vary homes or posmise

Owner's Name: CHRESTEPMER LAMEAU	
Site Address: Lat 1 Tay 14	Onks Phone: 910 373.4110
Directions to job site from Lillington:	2105 Right an Ray Rd
Left on Crestsu	'Ye Church Kd. House are Left
Canan lat	
Subdivision: Javily Daks	Lot
Description of Proposed Work:	#Bedrooms:
Heated SF Unheated SF	Finished Rec Room? Crewl Space () Slab ()
CHRISTOPHER & Hatty	9/0-273-4/10
Building Contractor's Company Name	Tulsphone .
Address.	Owner Domes
- Contract	Minds align & fill out second posso.
Signature of Comprice (a) (a)	of Corporation Senting Picture Information
LIGHERT WHEN THE PROPERTY OF T	The state of the s
odell Electria	910-391-4859
Electrical Contractor's Company Nertic	Telephone C13 C14
2240 Stanton St Fullyth	1 1 2 5 64 Learnes 8
Odell Be probert?	
	oland/MAG Perraik information
Description of West I 1/5+4/1	
CCDSS Cresk HT6 & A./C.	9/0- 423-0328 Telephone
2767 broken Rd For yo	
Address	License #
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	orking Carroll, before then
description of Work Run pelsonholes	Fee Hadiston 1 world
rumbing Contractor's Company Name	Telephone
derega (2 Offerni	Fay NC 2896 P 2 2056 License #
Specture of Officer(s) of Corporation	afler Patriit Information
eulation Contractor's Company Name & Ad	
	Cayetteville 28302

8/21/08

ATTN: miles Hams

Please Fax Back: 497-3 497-3401