* Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address, company name & phone must match Application # ___ Harnett County Central Permitting PO Box 65 Lillington, NC 27546 910-893-7525 Fax 910-893-2793 www.hamett.org/permits

25774

Application for Residential Building and Trades Permit

Owner's Name: RUSSELL GILCHOIST	Date:
Site Address: 21037 Hur 24/27, CAMBROW NC	
Directions to job site from Lillington: TAKE HWY 27 aut o	FLAUENCTON RIGHT ONTO
HUT 24/27 LOT ON LEFT	
Subdivision: r/A	Lot:
Description of Proposed Work: MODNLAR HOME TUSTALL	# of Bedrooms: 4
Heated SF: 2305 Unheated SF: Finished Bonus Room? General Contractor Informa	Crawl Space: X Slab:
ADVANTAGE PLUS HOUSENG	(910)692-3334
Building Contractor's Company Name	Telephone
539,5 451 HWY, VASS NC 28394	APLUSHOUSTAGE YALOO CON Email Address
San Barla Olicina Callina	
Signature of Owner Contractor/Officer(s) of Corporation Electrical Contractor Information	License #
	ze: <u>200</u> Amps T-Pole:Yes X No
TRIPLE "A" BLECTEIC	(919)498-2624
Electrical Contractor's Company Name	Telephone
P.O. BOX 494, LEMON SPRINGS NC 2535	
Address ,	Email Address
Signature of Owner/Contractor/Officer(s) of Corporation	License #
Mechanical/HVAC Contractor Info	
Description of Work HEAT PUMP INSTALLATION	
CAROLINA AIR	(910) 585-2425
Mechanical Contractor's Company Name	Telephone
370 JAMBS HPD, CAMPRON NC 28326	Email Address
Hawf Holm	TZUA
Signature of Owner/Contractor/Officer(s) of Corporation	License #
Plumbing Contractor Informa	ation
Description of Work Drofs AND CONNECTEONS	# Baths
MCDONALD PLUMBERF, NIEL MODONALD	(919)498-0512
Plumbing Contractor's Company Name	Telephone 1530 LCOMER 442 6 aoL
5321 SUMPUS STETZON RD, SONFORD NCJC	Email Address
h. alland	1/82U
Signature of Owner/Contractor/Officer(s) of Corporation	License #
Insulation Contractor Information	.)
N/A	N/A
Insulation Contractor's Company Name & Address	Telephone

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

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 X No					
4. Do you intend to schedule, contract, or directly pay for all phases of construction work to be done? Yes X 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. Machanical codes, and the Harnett County Zoning or 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. Display the permitting Department of Department of Contractor (Officer(s)) of Corporation Date					
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:					
General Contractor OwnerX_ 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: ADVANTAGE PLUS HOUSTNE Sign w/Title: Mel RB~Molle / Lalas Manage Date: 12/15/2010					
Sign w/Title: Mel RB mall / Salas Manage Date: 12/15/2010					

NORTH CAROLINA MODULAR BUILDING SET-UP CONTRACTOR LICENSE BOND

			# B 109	0294	
Advantage	Plus Housing			as universal leasted at	
5395 US 1 Hwy.	Vass	NC	and Selective Insura	nce Company of America (surety)	
of 40 Wantage Avenue	Branchville, NJ 0789	00	(-44)		
State of New Jersey are indebted and bound to the	Harnett County, Der	and duly licensed to ot. of Plannin		on incorporated under the laws of the le State of North Carolina as surety, ity inspection department) in the sum of everally.	
		JCH, that whereas	the principal has entered into a	contract for the set-up and installation of	
the modular building describe NOW. THEREFO		agents and employ	vees shall set-up and install said	modular building in compliance with the	
· ·	ina State Building Code gover		·	gation shall be null and void; otherwise, it	
It is expressly provided that:					
1. This bond is ex	ecuted by the said principal an	id surety to enable	the principal to set-up one North	n Carolina labeled modular building.	
North Carolina	full force and effect as to the a labeled modular building at the 21037 Hwy. 24/27	following address	ng Code obligations of the princip s:	al for the set-up of one	
	ameron		th Carolina		
3. This bond will r	emain in full force and effect fo	r one year following	ng the issuance of the certificate	of compliance for the modular building. (city or county inspection dept.).	
				by reason of any act or omission covered	
	ay, in addition to any other ren			name on this bond for the recovery of	
6. It is further und	lerstood and agreed that this b		to successive claims up to the fabond amount, regardless of the r	ace value of the bond. The number of claims made against the bond.	
October	re bounden parties have executed. 1.10, the name and corporate bursuant to authority of its gove	e seal of each corp	at under their several seats, this the porate party being hereto affixed	ne6th day of and these presents duly signed to be its	
0		owene	Signature of Principal		
	Surety by	Smil	(signalure)		
	Selective Insura	ance Compan	y of America (printed name)		
	_{Title} Bonnie B. H	liggins	, Attorney-in	-Fact	
	Address 40 Want	age Avenue	Branchville, NJ 07890		
	STANTON TA	YLOR AGEN	NCY, INC. N.C. Resident Agent		
	PO BOX 18106	RALEIGH,	NC 27619-8106 Address		

Power of Attorney Attached

3° '



Selective Insurance Company of America 40 Wantage Avenue Branchville, New Jersey 07890 973-948-3000

BondNo.B 1090294

POWER OF ATTORNEY

Modular Buidling Set-Up

SELECTIVE INSURANCE COMPANY OF AMERICA, a New Jersey corporation having its principal office at 40 Wantage Avenue, in Branchville, State of New Jersey ("SICA"), pursuant to Article VII, Section 1 of its By-Laws, which state in pertinent part:

The Chairman of the Board, President, Chief Executive Officer, any Executive Vice President, any Senior Vice President or any Corporate Secretary may, from time to time, appoint attorneys in fact, and agents to act for and on behalf of the Corporation and they may give such appointee such authority, as his/her certificate of authority may prescribe, to sign with the Corporation's name and seal with the Corporation's seal, bonds, recognizances, contracts of indemnity and other writings obligatory in the nature of a bond, recognizance or conditional undertaking, and any of said Officers may, at any time, remove any such appointee and revoke the power and authority given him/her.

, its true and lawful attorney(s)-in-fact, full authority to execute on SICA's behalf fidelity and surety bonds or undertakings

does hereby appoint Bonnie B. Higgins

and other documents of a similar character issued by SICA in the course of its business, and to bind SICA thereby as fully as if such instruments had been duly executed by SICA's regularly elected officers at its principal office, in amounts or penalties not exceeding the sum of: Five Thousand Dollars (\$5,000.00) Signed this 6th day of October onio C. Albanese Senior Vice President **STATE OF NEW JERSEY:** :ss. Branchville COUNTY OF SUSSEX On this 6th day of _ October __, before me, the undersigned officer, personally appeared Antonio C. Albanese, who acknowledged himself to be the Senior Vice President of SICA, and that he, as such senior Vice President of SICA, and that he, as such senior Vice President of SICA, and that he, as such senior Vice President of SICA, and that he, as such senior Vice President of SICA, and that he, as such senior Vice President of SICA, and that he, as such senior Vice President of SICA, and that he, as such senior Vice President of SICA, and that he, as such senior Vice President of SICA, and that he, as such senior Vice President of SICA, and that he, as such senior Vice President of SICA, and that he, as such senior Vice President of SICA, and that he, as such senior Vice President of SICA, and that he, as such senior Vice President of SICA, and that he, as such senior Vice President of SICA, and that he, as such senior Vice President of SICA, and that he, as such senior Vice President of SICA, and that he is the senior Vice President of SICA, and the senior Vice Pres President, being authorized so to do, executed the foregoing instrument for the purposes therein contained, or signing the name of the corporation by himself as Senior Vice President and that the same was his free act and deed and the free act and deed of SICA. SUSAN NEYENS NOTARY PUBLIC OF NEW JERSEY Notar Public MY COMMISSION EXPIRES 12/12/2012 The power of attorney is signed and sealed by facsimile under and by the authority of the following Resolution the Board of Directors of SICA at a meeting duly called and held on the 6th of February 1987, to wit: "RESOLVED, the Board of Directors of Selective Insurance Company of America authorizes and approves the use of a facsimile corporate seal, facsimile signatures of corporate officers and notarial acknowledgements thereof on powers of attorney for the execution of bonds, recognizances, contracts of indemnity and other writing obligatory in the nature of a bond, recognizance or conditional undertaking." CERTIFICATION I do hereby certify as SICA's Corporate Secretary that the foregoing extract of SICA's By-Laward etill in force and effect and this Power of Attorney issued pursuant to and in accordance with the By Michael H. Lanza, SICA Corporate Important Notice: If the bond number embedded within the Notary Seal does not match the

number in the upper right-hand corner of this Power of Attorney, contact us at 973-948-3000.

B91 (04-07)