

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

Application # 358604

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

**Application for Residential Building and Trades Permit**

Owner's Name: James L. Spencer Date: 27 Apr 2015

Site Address: Stockyard Rd Phone: \_\_\_\_\_

Directions to job site from Lillington: From Lillington -> take 401 S to Stockyard Rd -> Turn right onto Stockyard Rd -> 1st driveway on the left before 1st building on the left

Subdivision: NA Lot: \_\_\_\_\_

Description of Proposed Work: Move & setup single family home # of Bedrooms: 3

Heated SF: 2175 Unheated SF: -0- Finished Bonus Room? NO Crawl Space:  Slab: \_\_\_\_\_

**General Contractor Information**

James Spencer - owner Telephone: 910.916.3013  
Building Contractor's Company Name  
P.O. Box 1076 - Lillington, N.C. 27546 Email Address: jspencer\_nc@hotmail.com

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

**Electrical Contractor Information**

Description of Work: reconnect service Service Size: 200 Amps T-Pole:  Yes \_\_\_ No

same Telephone: same

Electrical Contractor's Company Name  
same Email Address: same

Address \_\_\_\_\_

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

**Mechanical/HVAC Contractor Information**

Description of Work: new ductwork & install air handler  
same Telephone: same

Mechanical Contractor's Company Name  
same Email Address: same

Address \_\_\_\_\_

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

**Plumbing Contractor Information**

Description of Work: reconnect county water/private sewer # Baths: 2 (1-unfinished)  
same Telephone: same

Plumbing Contractor's Company Name  
same Email Address: same

Address \_\_\_\_\_

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

**Insulation Contractor Information**

N/A Telephone: N/A  
Insulation Contractor's Company Name & Address

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

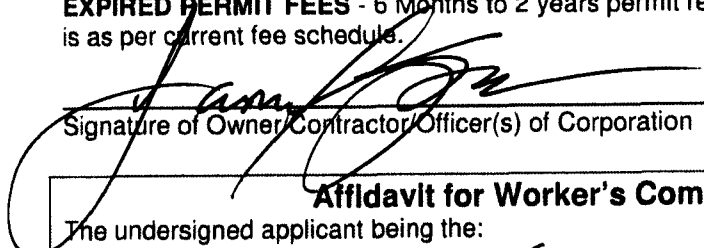
### Homeowners Applying to Build Their Own Home

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  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 that **by signing below I have obtained all subcontractors permission to obtain these permits** 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 of Owner/Contractor/Officer(s) of Corporation

27 Apr, 2015  
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 \_\_\_\_\_

Sign w/Title:  - Owner

Date: 27 Apr, 2015

STATE OF NORTH CAROLINA

OWNER EXEMPTION AFFIDAVIT  
PURSUANT TO G.S. 87-14(a)(1)

COUNTY OF Harnett

Harnett Inspections Department

Address and Parcel Identification of Real Property Where Building is to be Constructed or Altered:

Stockyard Rd - Lillington, N.C. Parcel 100559-0035.  
I, James L. Spencer - App # 1550035860  
(Print Full Name)

hereby claim an exemption from licensure under G.S. 87-1(b)(2) by initialing the relevant provision in paragraph 1 and initialing paragraphs 2-4 below and attesting to the following:

1. JS I certify that I am the owner of the property set forth above on which this building is to be constructed or altered;  
OR  
JS I am legally authorized to act on behalf of the firm or corporation which is constructing or altering this building on the property owned by the firm or corporation as set forth above (name of firm or corporation: \_\_\_\_\_);
2. JS I will personally superintend and manage all aspects of the construction or alternation of the building and that duty will not be delegated to any person not duly licensed under the terms of Article 1 of Chapter 87 of the General Statutes of North Carolina;
3. JS I will be personally present for all inspections required by the North Carolina State Building Code, unless the plans for the construction or alteration of the building were drawn and sealed by an architect licensed pursuant to Chapter 83A of the General Statutes of North Carolina;
4. JS I understand that a copy of this AFFIDAVIT will be transmitted to the North Carolina Licensing Board for General Contractors for verification that I am validly entitled to claim an exemption under G.S. 87-1(b)(2) for the building construction or alteration specified herein. I further understand that, if the North Carolina Licensing Board for General Contractors determines that I was not entitled to claim this exemption, the building permit issued for the building construction or alteration specified herein shall be revoked pursuant to G.S. 153A-362 or G.S. 160A-422.

[Signature]  
(Signature of Affiant)

27 Apr, 2015  
Date

Sworn to (or affirmed) and Subscribed before me this the 27 day of Apr., 2015

[Signature]  
Signature of Notary Public  
Jennifer S. Brock  
Printed Name of Notary Public

My Commission Expires: 9-30-2018 (Notary Stamp or Seal)

(NOTE: It is a Class F felony to willfully commit perjury in any affidavit taken pursuant to law—G.S. 14-209)