

Harnett County Central Permitting  
PO Box 65 Lillington, NC 27546  
Telephone Number 910-893-4759

**Application for Building and Trade Permit**

Owner's Name: Bochey + Carol Stone Date: 12.21-06  
Address: P.O. Box 1473 Coats, N.C. Phone: 919-201-4034  
Directions to job site: \_\_\_\_\_

Subdivision: \_\_\_\_\_ Lot: \_\_\_\_\_  
Construction Type: (Please Check) Building Use: (Please Check)  
 New  Residential  
 Renovation  Modular  
 Addition  Commercial  
 Moved House  Multi-Family  
 Other  
Description of Proposed Work: \_\_\_\_\_  
Total Project Cost: \_\_\_\_\_

**Building Permit Information**

Heated SF \_\_\_\_\_ Crawl Space ( ) Building Construction Cost \$ \_\_\_\_\_  
Unheated SF \_\_\_\_\_ Slab ( ) Acres Disturbed \_\_\_\_\_ Stories \_\_\_\_\_  
CMN Builders Inc. 919 796-1300  
Building Contractor's Company Name Telephone 59282  
345 Cottle Lake Dr. Coats, NC 27521 License # \_\_\_\_\_  
Address \_\_\_\_\_  
Signature of Officer(s) of Corporation \_\_\_\_\_

**Electrical Permit Information**

Description of Work Electrical Electrical Cost \$ \_\_\_\_\_  
TS Pole: Yes (M) No ( ) Underground ( ) Overhead ( )  
Permanent Service: Underground (M) Overhead ( ) Service Size: 200 Amps  
Mabry's Electrical Service (919) 639-4837  
Electrical Contractor's Company Name Telephone 15077-4  
731 Mabry Rd., Angier License # \_\_\_\_\_  
Address \_\_\_\_\_  
Signature of Officer(s) of Corporation \_\_\_\_\_

**Mechanical Permit Information**

Description of Work HVAC Mechanical Cost \$ 9350.00  
Number of Units 2 Type System Heat Pumps 919-894-4248  
Beasley's Heat A/C, Inc. Telephone \_\_\_\_\_  
Mechanical Contractor's Company Name 9497  
57 W. C. Beasley Ln. Coats, N.C. License # \_\_\_\_\_  
Address \_\_\_\_\_  
Signature of Officer(s) of Corporation \_\_\_\_\_

**Plumbing Permit Information**

Description of Work Plumbing Plumbing Cost \$ 6000  
Number of Baths 3 910-893-2642  
Straight Flush Plumbing Telephone \_\_\_\_\_  
Plumbing Contractor's Company Name 23655  
978 Mitchell Rd Lillington License # \_\_\_\_\_  
Address \_\_\_\_\_  
Signature of Officer(s) of Corporation \_\_\_\_\_

**Insulation Permit Information**

Residential ( ) Other ( ) Not Required ( )  
Tatum Insulation  
Insulation Contractor's Company Name Address Telephone

**Commercial Jobs must fill out this portion**  
**Sprinkler System Information**

_____ Sprinkler Contractor's Company Name	_____ Contact & Telephone
_____ Address	_____ License #
_____ Signature of Officer(s) of Corporation	

**Fire Alarm System Information**

_____ Fire Alarm Contractor's Company Name	_____ Contact & Telephone
_____ Address	_____ License #
_____ Signature of Officer(s) of Corporation	

**Driveway Access** - NC Department of Transportation Driveway Access/Permit?      Yes      No

**Homeowners Applying to Build Their Own Home**

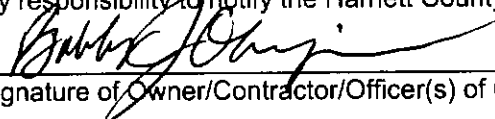
Please answer the following questions then see a Permit Technician to determine if you qualify for permit under Owners Exemption.

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

\_\_\_\_\_  
Sign & date

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, 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.

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

12-28-06  
\_\_\_\_\_  
Date

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

The undersigned applicant for Building Permit # \_\_\_\_\_ being the:

- \_\_\_\_\_ 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/have three (3) or more employees and has/have obtained workers' compensation insurance to cover them.
- \_\_\_\_\_ Has/have one (1) or more subcontractors(s) and has/have obtained workers' compensation insurance to cover them.
- \_\_\_\_\_ Has/have one (1) or more subcontractors(s) who has/have their own policy of workers' compensation insurance covering themselves.
- \_\_\_\_\_ Has/have not 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.

Firm Name: Rodney Stone

By/Title: \_\_\_\_\_

Date: 12-29-06

