

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

Application # 07-500-16521 RR

Harnett County Central Permitting
PO Box 85 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

A-7

Application for Residential Building and Trades Permit

Owner's Name: Keith Cummings Date: 2-25-11

Site Address: _____ Phone: _____

Directions to job site from Lillington: Hwy 27 West To Tiger T.R. Alpine To Summit Left on Right

Subdivision: Summit Lot: 114

Description of Proposed Work: New House # of Bedrooms: _____

Heated SF: 2214 Unheated SF: 500 Finished Bonus Room? yes Crawl Space: Stab: _____

General Contractor Information

CECC Const Building Contractor's Company Name Telephone 910 984 6765

630 Grubbin Rd Lillington NC 27546 Address Email Address

Keith Cummings Signature of Owner/Contractor/Officer(s) of Corporation License # 21326

Electrical Permit Information

Description of Work New House Service Size: 200 Amps TPole: yes/no

JM Pope Elect Electrical Contractor's Company Name Telephone 910 890 -3655

3483 Cameron Dr. Address License # 21326

James M. Pope # Signature of Officer(s) of Corporation

Mechanical Permit Information

Description of Work New House

Carolina Comfort Air Mechanical Contractor's Company Name Telephone 419 377 4320

5212 US 70 W Clayton NC 27520 Address License # H3-29077

Phillip Powell Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work New House # Baths _____

Jamie Johnson Plumbing Plumbing Contractor's Company Name Telephone 910 984 6277

1490 Clark Rd Lillington NC 27546 Address License # 21645

Jamie Johnson Signature of Officer(s) of Corporation

Insulation Permit Information

Alvin D. Co 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 ___ 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

2-25-11
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: CRDLO HUNT FINE

Sign w/Title: *[Signature]* V.P. Date: 2-25-11

