

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

Application
Harnett County Central Permitting
PO Box 85 Lillington, NC 27546
Telephone Number 910-893-7525 www.hamett.org
Application for Building and Trade Permit

Owner's Name: GIL + BECKY STEADMAN Date: 20 JAN 09
Address: 305 BLUE PATCH LN CALIECH NC Phone: 919-395-1815

Directions to job site from Lillington: NC 210 WEST, TC ANDERSON CREEK RD.
T.P. LEMUEL BLACK RD, CATWEST ON RIGHT

Subdivision: CATWEST Lot: 13

Construction Type: (Please Check) Building Use: (Please Check)
 New Moved House Residential Commercial
 Renovation Addition Other Modular Multi-Family

Total Project Cost: 110000 Description of Proposed Work: _____

General Contractor Information

Heated SF 2611 Crawl Space Building Construction Cost \$ _____
Unheated SF 492 Slab () Acres Disturbed .06 Stories 2

THE QUEST DEVELOPMENT CO. OF DUNN INC, 910-237-1853
Building Contractor's Company Name Telephone

P.O. 2121 DUNN NC 28335 60521
Address License #

[Signature]
Signature of Owner/Contractor/Officer(s) of Corporation - Must sign back of form & workers comp

Electrical Permit Information

Description of Work _____ Electrical Cost \$ _____

TS Pole: Yes No () Underground Overhead ()

Permanent Service: Underground Overhead () Service Size: 200 Amps

GLEB SESSOMS ELECTRIC 910-567-5630
Electrical Contractor's Company Name Telephone

189 MARIE LANE APTXVILLE 18595-L
Address License #

[Signature]
Signature of Officer(s) of Corporation

Mechanical Permit Information

Description of Work _____

Number of Units 2 Type System HEAT PUMP Mechanical Cost \$ _____

JANM HEATING AND A/C 910-897-5501
Mechanical Contractor's Company Name Telephone

724 TULLINGTON RD. DUNN N.C. 28334 17164
Address License #

[Signature]
Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work _____

Number of Baths 2 Plumbing Cost \$ _____

Dale's Plumbing (910) 897-3310
Plumbing Contractor's Company Name Telephone

11640 Harnett-Dunn Hwy Dunn NC 12053
Address License #

[Signature]
Signature of Officer(s) of Corporation

Insulation Permit Information Residential () Other () Not Required ()

TRI-CITY INSULATION 1643 OLD WILMINGTON HWY 910-486-8855
Insulation Contractor's Company Name & Address Telephone

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

The undersigned applicant for Building Permit # _____ being the:

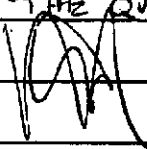
- General Contractor
- Owner
- Officer/Agent of the Contractor or Owner

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/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: THE QUEST DEVELOPMENT CO. OF DUNN INC.

Sign/Title:  PRESIDENT

Date: 22 JAN 07