

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

A-6

Harnett County Central Permitting

PO Box 65 Lillington NC 27546

910 893 7525 Fax 910 893 2793 www.harnett.org/permits

Application # 07 500 17428

Application for Residential Building and Trades Permit

Owner s Name AQ Contracting Inc Date 6/8/11

Site Address 382 Strike Eagle drive Phone 919 656 6900

Directions to job site from Lillington Route 27 west to left on Tingen Road to left on Strike Eagle Drive (Pattons Point) lot 89 on the right

Subdivision Pattons Point Lot 89

Description of Proposed Work NEW SINGLE FAMILY RESIDENTIAL # of Bedrooms 3

Heated SF 1283 Unheated SF 478 Finished Bonus Room? No Crawl Space Slab

General Contractor Information

AQ Contracting Inc 919 542 9893

Building Contractor s Company Name Telephone

PO Box 1508 Pittsboro NC 27312 rick@aqcontracting.com

Address Email Address

47496

License #

Electrical Contractor Information

Description of Work Electrical Wiring Service Size 200 Amps T Pole Yes No

Maida Electric LLC 910 897 6216

Electrical Contractor s Company Name Telephone

34 Eagle Road Coats NC 27521

Address Email Address

23491L

License #

Mechanical/HVAC Contractor Information

Description of Work Residential HVAC

ARS / Rescue Rooter 919 828 5147

Mechanical Contractor s Company Name Telephone

517 Pylor Drive Raleigh NC 27606

Address Email Address

16245

License #

Plumbing Contractor Information

Description of Work Plumbing per code # Baths 2

Hares Plumbing Inc 919 774 2482

Plumbing Contractor s Company Name Telephone

412 Swaringen Lane Sanford NC 27330

Address Email Address

19443

License #

Insulation Contractor Information

Tn City Building Insulation & Building Products 910 486 8855

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 that **I affirm that I have obtained all listed contractors 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

6/8/11

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

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 AQ Contracting Inc

Sign w/Title  Date 6/8/11