

Each item below to be filled out by
whomever performing work. Must be owner
licensee of contractor. Address company
name & phone must match information on
1

Application # 07 500 175 65

Harnett County Central Permitting
POB x 65 Lillington NC 27648
Ph n 910 893 7525 F 910 893 2793 www.harnett.org

Application for Residential Building and Trades Permit

Owner's Name Duncan Development Date 4 8 11
Site Address 750 Cokesbury Park Lane Phone 919 639 2073
Directions to job site from Lillington Take 401 Toward Christ an high
Turn L Cokesbury Rd. SD on L Cokesbury Park
lane
Subdivision Cokesbury Park Lot 79
Description of Proposed Work Residential Home #Bedrooms 3
Heated SF 1196 Unheated SF _____ Finished Rec Room? NO Crawl Space Slab ()

General Contractor Information

Stancil Builders, Inc. 919-639-2073
Building Contractor's Company Name Telephone
466 Stancil Rd Angier NC 27501 034533
Address License #
[Signature] Must sign & fill out second page
Signature of Owner/Contractor/Officer(s) of Corporation

Electrical Permit Information

Description of Work New Residential Service Size 200 Amps TPole yes/no
Stancil-Owen Electrical, Inc 919-639-2073
Electrical Contractor's Company Name Telephone
466 Stancil Rd Angier NC 27501 13075-L
Address License #
[Signature]
Signature of Officer(s) of Corporation

Mechanical Permit Information

Description of Work Residential
JC s Heating & Air 919-552-6258
Mechanical Contractor's Company Name Telephone
1539 Wade Stephenson Rd Holly Springs NC 12655-H3
Address License #
[Signature]
Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work Residential # Baths _____
Barnes Plumbing Inc 919-639-0935
Plumbing Contractor's Company Name Telephone
PO Box 1207 Angier NC 27501 P17735
Address License #
[Signature]
Signature of Officer(s) of Corporation

Insulation Permit Information

Insulating, Inc 1212 Home Ct, Raleigh, NC 919-772-9000
Insulation Contractor's Company Name & Address Telephone
27603

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

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

Date

Affidavit for Worker s Compensation N C G \$ 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 Stancil Builders Inc
Signature *[Signature]* Title President Date 4 8 11

