

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

Application # 0750018628

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
Phone 910-893-7525 Fax 910-893-2793 www.harnett.org

Application for Residential Building and Trades Permit

Owner's Name: Wynn Construction Date: 10-5-07
Site Address: 25 Letcher Lane Phone: 919-669-3813
Directions to job site from Lillington: Take old US 421 from Lillington and Turn left on McDougal and go to stop sign. Right on Adair. Pioneer Farms is on left.
Subdivision: Pioneer Farms Lot: 2
Description of Proposed Work: new Residential #Bedrooms: 3
Heated SF 1196 Unheated SF 109 Finished Rec Room? Crawl Space Slab ()

General Contractor Information

Wynn Construction, Inc. (919) 528-1347
Building Contractor's Company Name Telephone
11696 Hayes Road Creedmoor NC 46295
Address License #

[Signature] Must sign & fill out second page
Signature of Owner/Contractor/Officer(s) of Corporation

Electrical Permit Information

Description of Work New Construction Service Size: 200 Amps TPole no
RA JACKSON ELECTRIC, INC 919 894-5367
Electrical Contractor's Company Name Telephone
9261 Raleigh Rd Benson, NC 27504 21144-550
Address License #

[Signature]
Signature of Officer(s) of Corporation

Mechanical Permit Information

Description of Work New Construction
STEPHENSON HVAC, INC 919 329-0686
Mechanical Contractor's Company Name Telephone
343 SHAWASH DRIVE GARNER, NC 27529 18644
Address License #

[Signature]
Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work New Construction # Baths 2
R.D. White 919 556-6082
Plumbing Contractor's Company Name Telephone
310 Boardwalk Dr Youngsville NC 16941
Address License #

[Signature]
Signature of Officer(s) of Corporation

Insulation Permit Information

Smith Insulation P.O. Box 790 Louisburg N.C. 27549 496-3512
Insulation Contractor's Company Name & Address Telephone

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

10/8/07
Date

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

The undersigned applicant being the:

___ General Contractor ___ Owner X 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.
- X 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: WYNNA CONSTRUCTION
Sign w/Title: [Signature] - Manager Date: 10/8/07

**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: Wynn Construction Inc

Sign/Title: [Signature] Manager

Date: 10/18/07

Plan Box Number B-7

Job Name PIONEER FARMS

Date: 10-9-07

Required Inspections for SFA/SFD *

Appl. # 0750018628

Valuation \$ 77,706

Sq. Feet 1196

Sequence

10	<input checked="" type="checkbox"/>	R* Bldg. Footing
10-30	<input checked="" type="checkbox"/>	R* Elec. Temp Service Pole
20	<input checked="" type="checkbox"/>	R* Building Foundation
20	<input checked="" type="checkbox"/>	Address Confirmation
30-999	<input checked="" type="checkbox"/>	Open Floor
30-999	<input type="checkbox"/>	R* Bldg. Slab Insp.
30-999	<input type="checkbox"/>	R* Elec. Under Slab
30-999	<input type="checkbox"/>	R*Plumb. Under Slab
40	<input checked="" type="checkbox"/>	Four Trade Rough In
40	<input type="checkbox"/>	Four Trade Rough In > 2500
40	<input type="checkbox"/>	Three Trade Rough In
40	<input type="checkbox"/>	Three Trade Rough In > 2500
40	<input type="checkbox"/>	Two Trade Rough In
40	<input type="checkbox"/>	Two Trade Rough In > 2500
40	<input type="checkbox"/>	One Trade Rough In
40	<input type="checkbox"/>	One Trade Rough In > 2500
50	<input checked="" type="checkbox"/>	R* Insulation
60	<input checked="" type="checkbox"/>	Four Trade Final
60	<input type="checkbox"/>	Four Trade Final > 2500
60	<input type="checkbox"/>	Three Trade Final
60	<input type="checkbox"/>	Three Trade Final > 2500
60	<input type="checkbox"/>	Two Trade Final
60	<input type="checkbox"/>	Two Trade Final > 2500
60	<input type="checkbox"/>	One Trade Final
60	<input type="checkbox"/>	One Trade Final > 2500
999	<input checked="" type="checkbox"/>	Envir. Operations Permit