

* 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 # 0850019301

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

Application for Residential Building and Trades Permit

Owner's Name: Kenneth Cummings Date: 2-18-09
Site Address: Lillington NC 27546 Phone: 910 984-6765
Directions to job site from Lillington: Hwy 274037 Tido Nursery
T.L. Lemuel T.L. Woodshire T.R. Sonora T.L. Kimbrough
T.R. Wood Sage Houston on right
Subdivision: Woodshire Lot: 204
Description of Proposed Work: New Home #Bedrooms: 4
Heated SF 2137 Unheated SF 576 Finished Rec Room? no Crawl Space (+Slab ())

General Contractor Information

CEBCC CONST 910 984-6765
Building Contractor's Company Name Telephone
670 Bristol Rd Lillington NC 27546 14856
Address License #

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

Electrical Permit Information

Description of Work _____ Electrical Cost \$ _____
TS Pole: Yes (+) No () Underground (+) Overhead ()
Permanent Service: Underground () Overhead () Service Size: 200 Amps
JM Pope Elect 910 850 2655
Electrical Contractor's Company Name Telephone
3483 Cameron Drive 21226
Address License #
[Signature]
Signature of Officer(s) of Corporation

Mechanical Permit Information

Description of Work _____
Number of Units _____ Type System _____ Mechanical Cost \$ _____
JONES & JONES 910 484-7702
Mechanical Contractor's Company Name Telephone
5217 Mahaccor Hope Mills NC 28348 4203 11614
Address License #
[Signature]
Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work _____
Number of Baths _____ Plumbing Cost \$ _____
Richard Allen Cochran 910 473-2441
Plumbing Contractor's Company Name Telephone
318 Penn St St Pauls NC 28380 91-26497
Address License #
[Signature]
Signature of Officer(s) of Corporation

Insulation Permit Information

Residential (+) Other () Not Required ()
Down RITE
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

3-18-09
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: PEBLU EAST

Sign w/Title: [Signature] V.P. Date: 3-18-09

