

Application for Building and Trade Permit

Owner's Name: Whitewater Builders Date: 8-06-07
Address: 1055 Highman Rd Dunn, N.C. Phone: (919) 427-8464
Directions to job site: 28334

Subdivision: Cave Mill Estates Lot: #24
Construction Type: (Please Check) Building Use: (Please Check)
 New Residential
 Renovation Modular
 Addition Commercial
 Moved House Multi-Family
 Other

Description of Proposed Work:
Total Project Cost: 350,000.00
found 2850 Garage 590 4 Bedrooms 3 1/2 baths

Blind 1697-894-5591 Telephone: (919) 427-8464
Address: Dunn, N.C. 28331 License # 48607
Signature of Officer(s) of Corporation: [Signature]

Electrical Permit Information

Description of Work: New Units Electrical Cost \$ _____
TS Poles: Yes () No () Underground () Overhead ()
Permanent Service: Underground () Overhead () Service Size: 200 Amps
Electrical Contractor's Company Name: Bryden's Electrical & Repair Serv Telephone: 919-894-3139
Address: 1430 WINSY Rd Benson NC 27504 License # 20256-1
Signature of Officer(s) of Corporation: [Signature]

Mechanical Permit Information

Description of Work: Install HVAC Mechanical Cost \$ _____
Number of Units: 2 Type System: Heat Pumps
Mechanical Contractor's Company Name: Bearley's Heating & AC, Inc. Telephone: 919-894-4248
Address: 57 W.C. Bearley Ln Coats, N.C. 27521 License # 9497
Signature of Officer(s) of Corporation: [Signature]

Plumbing Permit Information

Description of Work: New Plumbing Plumbing Cost \$ _____
Number of Baths: 2
Plumbing Contractor's Company Name: Steven Stanley Plumbing Telephone: 919-894-1884
Address: 1257 Bannor Falls Rd License # 20013
Signature of Officer(s) of Corporation: [Signature]

Insulation Permit Information

Residential () Other () Not Required ()
Insulation Contractor's Company Name: Tatum Insulation Address: _____ Telephone: _____

Commercial Jobs must fill out this portion
Sprinkler System Information

Sprinkler Contractor's Company Name _____ Contact & Telephone _____

Address _____ License # _____

Signature of Officer(s) of Corporation _____

Fire Alarm System Information

Fire Alarm Contractor's Company Name _____ Contact & Telephone _____

Address _____ License # _____

Signature of Officer(s) of Corporation _____

Driveway Access - NC Department of Transportation Driveway Access/Permit? Yes No

Homeowners Applying to Build Their Own Home

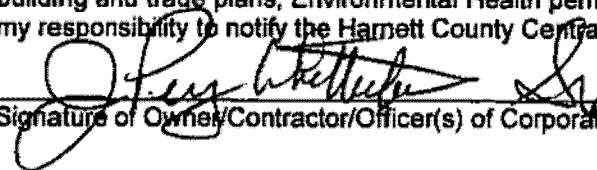
Please answer the following questions then see a Permit Technician to determine if you qualify for permit under Owners Exemption.

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

Sign & date _____

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

8-06-07
Date

**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: Whittenton Builders Interprises LLC
Sign/Title: J. Perez Whittenton Presi
Date: 8-08-07

