

* 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 # _____
Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
Phone 910-893-7525 Fax 910-893-2793 www.harnett.org
Application for Building and Trades Permit

Owner's Name: Wynn Construction Date: 7-28-08
Site Address: 15 Juno Dr. Broadway NC 27522 Phone: 919 426 5560
Directions to job site from Lillington: Take Hwy 27 w go 3 miles past W. Harnett High School Subdivision is on the Left.
Subdivision: Tinga Pointe Lot: 34

Construction Type: (Please Check) Building Use: (Please Check)
 New Moved House Residential Commercial
 Renovation Addition Other Modular Multi-Family

Total Project Cost: _____ Description of Proposed Work: New Home
Heated SF 1444 Unheated SF 349 Finished Rec Room? NO Crawl Space Slab ()

General Contractor Information Building Cost \$ _____
Wynn Construction 919-528-1347
Building Contractor's Company Name Telephone
1696 Hayes Rd. Creedmoor NC 27522 46295
Address License #

T. Wynn Must sign second page & fill out third page
Signature of Owner/Contractor/Officer(s) of Corporation

Electrical Permit Information Elec Cost \$ _____
Description of Work New Construction Service Size: 200 Amps #TPoles YES
R.A. Jackson 919 730 1251
Electrical Contractor's Company Name Telephone
414 Pine Dr. Four Oaks NC 27524 21144
Address License #

R.A. Jackson
Signature of Officer(s) of Corporation

Mechanical Permit Information Mech Cost \$ _____
Description of Work New Construction # Units _____
Stephanson Hts + Air 919 329 0686
Mechanical Contractor's Company Name Telephone
1051-B Honeycutt Rd. B 18644
Address License #

Tom Stephanson
Signature of Officer(s) of Corporation

Plumbing Permit Information Plumb Cost \$ _____
Description of Work New Construction # Baths 2
Vence Johnson Plumbing Co. 910-424-6712
Plumbing Contractor's Company Name Telephone
3242 Mid Pine Rd. Fayetteville 07752-P1
Address License #

Vence Johnson
Signature of Officer(s) of Corporation

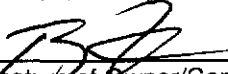
Insulation Permit Information
Tatum Insulation 579 Old Dunes Str. Rd. 919-661-0999
Insulation Contractor's Company Name & Address Telephone
Garner NC. 27529

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 of Owner/Contractor/Officer(s) of Corporation

7-28-08
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: Wynn Construction

Sign w/Title:  Superintendent Date: 7-28-08

Plan Box Number AA-B

Job Name WYNN

Date: 7-30-08

Required Inspections for SFA/SFD

Appl. # 0850020640
Valuation \$153,000
Sq. Feet 2355

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 |

CRAWL

Plan Box Number AA-13

Job Name WYNN CONSTRUCTION

Date: 11-13-08

Required Inspections for SFA/SFD

Appl. # 0850020640
Valuation \$ 141,295
Sq. Feet 1892

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		R* Bldg. Slab Insp.
30-999		R* Elec. Under Slab
30-999		R* Plumb. Under Slab
40	<input checked="" type="checkbox"/>	Four Trade Rough In
40		Four Trade Rough In > 2500
10		Three Trade Rough In
40		Three Trade Rough In > 2500
40		Two Trade Rough In
40		Two Trade Rough In > 2500
40		One Trade Rough In
40		One Trade Rough In > 2500
50	<input checked="" type="checkbox"/>	R* Insulation
60	<input checked="" type="checkbox"/>	Four Trade Final
50		Four Trade Final > 2500
60		Three Trade Final
60		Three Trade Final > 2500
60		Two Trade Final
60		Two Trade Final > 2500
60		One Trade Final
60		One Trade Final > 2500
999	<input checked="" type="checkbox"/>	Envir. Operations Permit