

* 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 # 20833
Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
Telephone Number 910-893-7525 www.harnett.org

Application for Building and Trade Permit

Owner's Name: Brian Johnson Builders Inc Date: 8-22-08
Address: 635 Chisenhall Rd Phone: 427 2976

Directions to job site from Lillington: take 210 to Angier T/R on 55 T/L on McIver ST it turns into Benson Rd go 4-5 miles lot is on Right

Subdivision: N/A Lot: 3

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

Total Project Cost: 109000 Description of Proposed Work: New House

Building Permit Information

Heated SF 1200 Crawl Space Unheated SF Slab
Building Construction Cost \$ 70,000
Acres Disturbed .05 Stories 1
Building Contractor's Company Name: Brian Johnson Builders Inc Telephone: 427 2976
Address: 635 Chisenhall Rd Angier License #: 41348
Signature of Officer(s) of Corporation: [Signature]

Electrical Permit Information

Description of Work: wire New House Electrical Cost \$ 3800
TS Pole: Yes No Underground Overhead
Permanent Service: Underground Overhead Service Size: 200 Amps
Electrical Contractor's Company Name: Rex Dean Ele Telephone: 552 4282
Address: 8039 Kennebec Rd Willow Springs License #: 5748L
Signature of Officer(s) of Corporation: [Signature]

Mechanical Permit Information

Description of Work: Heat + Air in New House Mechanical Cost \$ 3500
Number of Units: 2 Type System: Heat pump
Mechanical Contractor's Company Name: JC's Heating + Air Cond. Service Telephone: 552 3053
Address: 1539 Wade Stephenson Rd Holly Springs License #: 12655
Signature of Officer(s) of Corporation: [Signature]

Plumbing Permit Information

Description of Work: Plumb New House Plumbing Cost \$ 4000
Number of Baths: 2
Plumbing Contractor's Company Name: w + w Plumbing Co Inc. Telephone: 639 0195
Address: Po Box 1239 Angier NC License #: 14087
Signature of Officer(s) of Corporation: [Signature]

Insulation Permit Information

Residential Other Not Required
Insulation Contractor's Company Name: Insulation Inc Address: 1212 Home Ct Raleigh Telephone: 772 9000

Sprinkler System Information

Sprinkler Contractor's Company Name

Telephone

Contact Person

Address

License #

Signature of Officer(s) of Corporation

Fire Alarm System Information

Fire Alarm Contractor's Company Name

Telephone

Contact Person

Address

License #

Signature of Officer(s) of Corporation

Driveway Access

NC Department of Transportation Driveway Access/Permit? Yes ___ No X

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 Division of any and all changes.

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

Date

8-22-08

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

The undersigned applicant for Building Permit # _____ being the:

- 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: Brian Johnson Builders Inc

Sign/Title: Brian Johnson President

Date: 8-22-08