

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 # 08 500 20918
Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

SCANNED
7/8/09
DATE

Application for Residential Building and Trades Permit

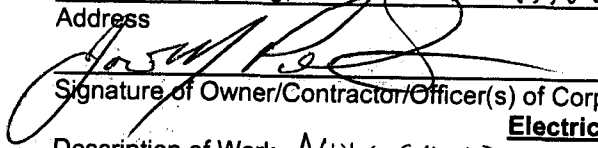
Owner's Name: FAMILY HOME CONSTRUCTION INC Date: 6/29/09
Site Address: JAYLIN OAKS SUBDIVISION Phone: 910-321-1002/797-6558
Directions to job site from Lillington: HWY 210 TO RAY RD. TO CREEKSVILLE
CHURCH ROAD

Subdivision: JAYLIN OAKS Lot: 3
Description of Proposed Work: NEW RES CONST #Bedrooms: 4
Heated SF 2049 Unheated SF 892 Finished Rec Room? YES Crawl Space () Slab (X)

General Contractor Information

FAMILY HOME CONSTRUCTION INC 910-321-1002/910-797-6558
Building Contractor's Company Name Telephone
2521 RAYFORD RD FAYETTEVILLE NC 28305 67949
Address License #

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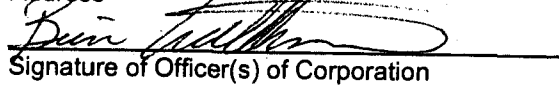


Must sign & fill out second page

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

Electrical Permit Information

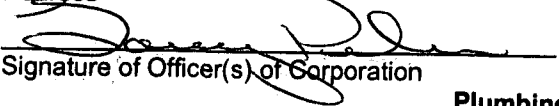
Description of Work NEW CONST Service Size: 200 Amps TPole: (yes)/no
ADVANCED ELECTRICAL SOLUTIONS 910-723-3293
Electrical Contractor's Company Name Telephone
5750-5 IVANHUE CT FAYETTEVILLE NC 28314 266275P SFD
Address License #



Signature of Officer(s) of Corporation

Mechanical/HVAC Permit Information

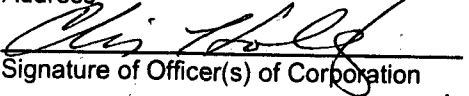
Description of Work NEW CONST
CERTIFIED HEATING AND AIR 910-858-0000
Mechanical Contractor's Company Name Telephone
PO BOX 1071 HOPE MILLS NC 28314 20012 H3C1
Address License #



Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work NEW CONST. # Baths 2
CHRIS HOLLOWAY PLUMBING INC 910-624-2670
Plumbing Contractor's Company Name Telephone
1112 HOPE MILLS RD FAYETTEVILLE NC 28304 28541
Address License #



Signature of Officer(s) of Corporation

Insulation Permit Information

BLOWN RITE PO BOX 450 FAYETTEVILLE NC 28302 910-483-8191
Insulation Contractor's Company Name & Address Telephone

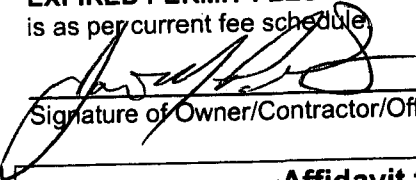
Homeowners Applying to Build Their Own Home

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.

EXPIRED PERMIT FEES - 6 Months to 2 years permit re-issue fee is \$150.00. After 2 years re-issue fee is as per current fee schedule.


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

6/29/09
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: FAMILY HOME CONSTRUCTION INC

Sign w/Title: 

Date: 6/29/09