

* Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address, company name & phone must match

Harnett County Central Permitting
PO Box 65 Lillington, NC 27548
910-893-7525 Fax 910-893-2793 www.harnett.org/permits
Application # 08-500-21024

Application for Residential Building and Trades Permit

Owner's Name: Wynn Construction Date: 5/26/10
Site Address: 315 Sund DR Phone: _____
Directions to job site from Lillington: Tucco Rt 0027 ? miles on left

Subdivision: Tingen PT. Lot: 41
Description of Proposed Work: New Home # of Bedrooms: 3
Heated SF: _____ Unheated SF: _____ Finished Bonus Room? _____ Crawl Space: Slab: _____

General Contractor Information

Wynn Construction Building Contractor's Company Name Telephone 919-528-1347
2550 Capital DR Suite 105 Creedmoor N.C. Address Email Address _____
Wynn Construction Signature of Owner/Contractor/Officer(s) of Corporation License # 46295

Electrical Contractor Information

Description of Work New Home Service Size: 200 Amps T-Pole: Yes ___ No
R.A. Jackson Electric Electrical Contractor's Company Name Telephone 919-720-1251
9261 Raleigh Rd. Benson N.C. 27504 Address Email Address _____
R.A. Jackson Signature of Owner/Contractor/Officer(s) of Corporation License # 81144

Mechanical/HVAC Contractor Information

Description of Work New Home
Stephenson HVAC Air Mechanical Contractor's Company Name Telephone 919-329-0686
343 Shipwash DR Garner N.C. 27529 Address Email Address _____
Tony Stephenson Signature of Owner/Contractor/Officer(s) of Corporation License # 18644

Plumbing Contractor Information

Description of Work New Home # Baths 3
Thordens Plumbers Plumbing Contractor's Company Name Telephone 919-550-4833
3160 A Vinson Rd. Clayton N.C. 27527 Address Email Address _____
Andy Thordens Signature of Owner/Contractor/Officer(s) of Corporation License # 22152

Insulation Contractor Information

Tatum Insulation 579 Old Drug Store Rd. Garner Insulation Contractor's Company Name & Address Telephone 919-666-8999
N.C. 27529

*NOTE: General Contractor must fill out and sign the second page of this application.

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 Hamett 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 Hamett 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.

Wade H. [Signature]
Signature of Owner/Contractor/Officer(s) of Corporation

5/26/10
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: Wade H. [Signature] Superintendent Date: 5/26/10