

SCANNED
7/20/10
DATE

Application # 08-500-21039

* 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 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Application for Residential Building and Trades Permit

JUL 2X 8:10

Owner's Name: Wynn Construction Date: 7/20/10
Site Address: 635 Omaha DR, Broadway N.C. Phone: 919-539-2070
Directions to job site from Lillington: Turn Rt off 27 7 miles on left

Subdivision: Tingen PT. Lot: 65
Description of Proposed Work: New Home # of Bedrooms: 3
Heated SF: _____ Unheated SF: _____ Finished Bonus Room? _____ Crawl Space: Slab: _____

General Contractor Information

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

Electrical Contractor Information

Description of Work New Home Service Size: 200 Amps T-Pole: Yes _____ No
R.A. Jackson Electric Telephone: 919-730-1251
Electrical Contractor's Company Name
9261 Raleigh Rd. Benson N.C. 27504
Address Email Address
R.A. Jackson License # 21144
Signature of Owner/Contractor/Officer(s) of Corporation

Mechanical/HVAC Contractor Information

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

Plumbing Contractor Information

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

Insulation Contractor Information

Tatum Insulation Telephone: 919-661-8999
Insulation Contractor's Company Name & Address
519 Old Drug Store Rd. Garner 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 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.

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

7/20/10
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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: Myan Construction

Sign w/Title: Mich He Superintendent

Date: 7/20/10

✓

CRAWL

Plan Box Number AA9

Job Name Tinger Pt.

Date: 7-21-10

Required Inspections for SFA/SFD

08

Appl. # 10-50021034

Valuation 118313

Sq. Feet 1821

Sequence

10	<u>✓</u>	R* Bldg. Footing
10-30	<u>✓</u>	R* Elec. Temp Service Pole
20	<u>✓</u>	R* Building Foundation
20		Address Confirmation
30-999	<u>✓</u>	Open Floor
30-999		R* Bldg. Slab Insp.
30-999		R* Elec. Under Slab
30-999		R* Plumb. Under Slab
40	<u>✓</u>	Four Trade Rough In
40		Four Trade Rough In > 2500
40		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	<u>✓</u>	R* Insulation
60	<u>✓</u>	Four Trade Final
60		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		Envir. Operations Permit