

SCANNED

4/6/10

DATE

Application # 08-500-2/037

* 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.

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

Owner's Name: Wyva Construction Date: 4/5/10

Site Address: _____ Phone: _____

Directions to job site from Lillington: Turn Rt on 27 7 miles on left

Subdivision: Tingha Pt Lot: _____

Description of Proposed Work: New Home #Bedrooms: _____

Heated SF _____ Unheated SF _____ Finished Rec Room? _____ Crawl Space () Slab ()

General Contractor Information

Wyva Construction Building Contractor's Company Name Telephone 919 528 1347

2550 Cap. Tol Dr. Suite 105 Creedmoor NC 27522 Address License # 46295

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

Electrical Permit Information

Description of Work New Home Service Size: _____ Amps TPole: yes/no

B.A Jackson Electric Electrical Contractor's Company Name Telephone 919 730 1251

9261 Raleigh Rd. Benson NC 27504 Address License # 21144

Signature of Officer(s) of Corporation

Mechanical/HVAC Permit Information

Description of Work New Construction

Stephenson Htg & Air Mechanical Contractor's Company Name Telephone 919 327 0686

343 Shipwash Dr. Garner NC 27529 Address License # 18644

Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work New Construction # Baths _____

Vance Johnson Plumbing Plumbing Contractor's Company Name Telephone 910 424 6712

3242 Mid River Pt. Fayetteville NC Address License # 07758-PI

Signature of Officer(s) of Corporation

Insulation Permit Information

Tatum Insulation 5190 Old Winston Rd. Grant NC 27529 Insulation Contractor's Company Name & Address Telephone 919-661-0999

APR X 6 ENT

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 (Forms 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.

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

4/5/10
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: Michael He Superintendent Date: 4/5/10