\* 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 21382

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
Phone 910-893-7525 Fax 910-893-2793 www.harnett.org

Application for Residential Building and	d Trades Permit
Owner's Name: Woodshire Partners LLC	Date: 13/15/08
Site Address: 408 BOSKet OOK DrivePh	one: 481-0505
Directions to job site from Lillington: Set from page	٤,
•	
Subdivision: Forest Cars	Lot: 12Le
Description of Proposed Work: Residential	#Bedrooms: <u>3</u>
Heated SF \CO Unheated SF Finished Rec Room?_	NA Crawl Space ( ) Slab (4)
General Contractor Informa	
Building Contractor's Company Name  Telephone	<u>0503</u>
639 Executive Place	37485
Address	License #
Must sign &	fill out second page
Signature of Owner/Contractor/Officer(s) of Corporation  Electrical Permit Informat	ion
Description of Work Service Size:	Amps TPole:@e3/no
TEN Electrical Contractor's Company Name  Telephone	5000
Electrical Contractor's Company Name Telephone	。タフィフ <b>クチクスクル</b>
Address Swindow De FAY NC	License #
Address	
Signature of Officer(s) of Corporation	
Mechanical Permit Informa	<u>ition</u>
Description of Work	150 AZIR
Chacco  Mechanical Contractor's Company Name  Te	488-0318 elephone
1910-B Pamalee Drive Fay, NC 28	
Address // //	License #
Signature of Officer(s) of Corporation  Plumbing Permit Informat	ion
	# Baths
Description of Work	119) 868-0959
Plumbing Contractor's Company Name	elephone
PO BOX 724 Coats, NC 27521	23140
Address	License #
Signature of Officer(s) of Corporation	
Insulation Permit Informat	ión ( ¬ · · · ·
Cumberland Insulation	484-1118
Inculation Contractor's Company Name & Address	l elephone

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)
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?
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.
Signature of Owner/Contractor/Officer(s) of Corporation Date
Signature of Owner/Contractor/Officer(s) of Corporation Date
Affidavit for Worker's Compensation N.C.G.S. 87-14
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:
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
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:
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
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:
Affidavit for Worker's Compensation N.C.G.S. 87-14  The undersigned applicant being the:
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
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.
Affidavit for Worker's Compensation N.C.G.S. 87-14  The undersigned applicant being the: