

* 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 # 09 500 214 87

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: Jeff Lucas Date: 6-18-08

Site Address: _____ Phone: 910 892 6436

Directions to job site from Lillington: Hwy 27 west to Hoover Rd. Turn Right to Persimmon Hills Subdivision on the Left Turn Left, 1st street TK to 2nd street Turn Left Lot 29

Subdivision: Persimmon Hills Lot: 29

Description of Proposed Work: Home #Bedrooms: 4

Heated SF 2876 Unheated SF 528 Finished Rec Room? Yes Crawl Space Slab ()

General Contractor Information

Lucas Builders 910-892-6436
Building Contractor's Company Name Telephone

161 Fowler Lane Dunn NC 28339 63097
Address License #

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

Electrical Permit Information

Description of Work Electrical Service Size: 200 Amps TPole: yes/no

Wester + Pace Electrical 919 499 5389
Electrical Contractor's Company Name Telephone

546 Leslie Rd Sanford NC 12007-U
Address License #

[Signature]
Signature of Officer(s) of Corporation

Mechanical/HVAC Permit Information

Description of Work HVAC

Beasley's Heating + Air 919 894 4298
Mechanical Contractor's Company Name Telephone

57 WC Beasley Ln. Coats NC 27521 9997
Address License #

[Signature]
Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work Plumbing # Baths 2.5

Grady's Plumbing 919-289-3093
Plumbing Contractor's Company Name Telephone

PO Box 228 Micro NC 27555 19805
Address License #

[Signature]
Signature of Officer(s) of Corporation

Insulation Permit Information

Insulation Inc. 919-772-9010
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.

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

Date

2-4-09

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: _____

Sign w/Title: _____

Date: _____

2-4-09

