

whomever performing work. Must be owner or licensed contractor. Address, company name & phone must match information on license.

Application # 09-500-21670  
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: H+H Constructors, Inc. Date: 4-24-09  
Site Address: 306 BASKET OAK DR. Phone: 910-486-4864  
Directions to job site from Lillington:  Hwy 27 W to Nursery Rd (SR 1117),  
Left on Nursery Road; Left on Lemuel Black Rd (SR 1125),  
Left on Valley Oak Dr. into Forest Oaks SD.  
Subdivision: Forest Oaks Lot: 121  
Description of Proposed Work: New Single Family Dwelling #Bedrooms: 3  
Heated SF 1878 Unheated SF 605 Finished Rec Room? NO Crawl Space ( ) Slab

**General Contractor Information**

H+H Constructors, Inc. 910-486-4864  
Building Contractor's Company Name Telephone  
2919 Breezewood Ave., Ste 400 31554-U  
Address License #

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

**Electrical Permit Information**

Description of Work \_\_\_\_\_ Electrical Cost \$ \_\_\_\_\_  
TS Pole: Yes ( ) No ( ) Underground ( ) Overhead ( )  
Permanent Service: Underground ( ) Overhead ( ) Service Size: \_\_\_\_\_ Amps  
T & N Electric Corp. 910-487-5000  
Electrical Contractor's Company Name Telephone  
4341 Swinton Dr., Fay., NC 28312 25333 U  
Address License #

[Signature]  
Signature of Officer(s) of Corporation

**Mechanical Permit Information**

Description of Work \_\_\_\_\_ Number of Units \_\_\_\_\_ Type System \_\_\_\_\_ Mechanical Cost \$ \_\_\_\_\_  
Carolina Comfort Air, Inc. 528 W Market St, Smithfield, NC 27577  
Mechanical Contractor's Company Name Address  
[Signature] H-3-I 919-934-1060  
Signature of Officer(s) of Corporation License # Telephone

**Plumbing Permit Information**

Description of Work \_\_\_\_\_ Number of Baths \_\_\_\_\_ Plumbing Cost \$ \_\_\_\_\_  
VANCE JOHNSON PLUMBING 3242 MID PINE DR., FAYETTEVILLE, NC 28306  
Plumbing Contractor's Company Name Address  
[Signature] 7756 P1 910-424-6712  
Signature of Officer(s) of Corporation License # Telephone

**Insulation Permit Information** Residential ( ) Other ( ) Not Required ( )

Tri City Insulation-418 Person St, Fay., NC 28301 910-486-8855  
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.

**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.

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

4-24-09  
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: H & H Constructors, Inc.

Sign w/Title: Maurice Turner / Permitting    Date: 4-24-09

