

* 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 # 21778

Harnett County Central Permitting
PO Box 65 Lillington, NC 27548
910-893-7525 Fax 910-893-2783 www.harnett.org/permits

Application for Residential Building and Trades Permit

Owner's Name: Wyan Construction Date: 3-20-09
Site Address: 45 Latchum Lane Phone: 919-756-3050
Directions to job site from Lillington: Take Mc Dougald Rd. West
Take Rt. on Alcoa Rd. Sub. 18 on the left.

Subdivision: Pioneer Farms Lot: 3
Description of Proposed Work: New Home #Bedrooms: _____
Heated SF 1870 Unheated SF _____ Finished Rec Room? — Crawl Space Slab ()

General Contractor Information

Wyan Construction Building Contractor's Company Name Telephone 919 524 1347
2550 Cap. '01 Dr. Suite 105 Creedmoor NC 27521 Address License # 46295

[Signature] 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: Res No
B.A Jackson Electric Electrical Contractor's Company Name Telephone 919 730 1251
9261 Raleigh Rd. Benson NC 27504 Address License # 21144

B.A Jackson Signature of Officer(s) of Corporation

Mechanical/HVAC Permit Information

Description of Work New Construction
Stephens Heating & Air 1 Mechanical Contractor's Company Name Telephone 919 327 0056
343 Shipwash Rd. Garner NC 27529 Address License # 18644

Tom Stephens Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work New Construction # Baths _____
Vance Johnson Plumbg. Plumbing Contractor's Company Name Telephone 919 464 6712
3242 Mid Pine Rd. Fayetteville NC Address License # 07753-P1

Vance Johnson Signature of Officer(s) of Corporation

Insulation Permit Information

Faton Insulation Insulation Contractor's Company Name & Address Telephone 519 Old Wagon Store Rd. Grant NC 27529 919-661-0999

(5)

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

[Handwritten Signature]

3-20-09

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: Wynn Constructors Inc.

Sign w/Title: [Signature] Production Manager Date: 3-20-09

[Handwritten Mark]

