

*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 # 09-50021916

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits
ication for Residential Building and Trades Parmit

	Application for Residential Building and Trades Permit	
	Owner's Name: Woodshire Partners LLC Date: 5-12-09	
	Site Address: 472 Basket Oak Drue Phone: 481-0503	
	Directions to job site from Lillington:	
	-see directions on back-	
	Subdivision: Forest Oaks Lot: 130	
	Description of Proposed Work:	
	Heated SF 1885 Unheated SF 676 Finished Rec Room? 1885 Crawl Space () Slab (X	
2	Caviness Land Development 481-0503	
5	Building Contractor's Company Name Telephone	
14 (9)	639 Executive Place Suite 400 Fay. NC 28305 37485	. •
Ī	Address License #	
-	Must sign & fill out second page	
	Signature of Owner/Contractor/Officer(s) of Corporation	
	Description of Work Color Service Size:Amps TPole: Ves/no	
	TEN Electric	
÷	Electrical Contractor's Company Name Telephone	
	4341 Swindon Dr. Fay NC 28312 28098-4	
	Address License #	
	- 10 de 1	
	Signature of Officer(s) of Corporation	* 71
	Mechanical/HVAC Permit Information Description of Work HVAC	
	<u> </u>	
- 4	1910-B Pamalee Dr. Fay NC 28303 2957PHI-3	•
- 1	Address License #	
÷	Signature of Officer(s) of Corporation	
	Plumbing Permit Information	
	Description of Work Plumbing. #Baths &	
	Glover Plumbina (919) 868-0959	
	Plumbing Contractor's Company Name Telephone	
	7.0. Box 726 Coats, NC 27521 23160	
	Address License #	
	Signature of Officer(s) of Corporation	
	Insulation Permit Information	:
	Cumberland Insulation 484-7118	
		12/1
	Insulation Contractor's Company Name & Address Telephone Lich Set 90	1046

	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 reques
	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?
	3. Do you intend to directly control & supervise construction activities? yesno
	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
(((((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 <u>any</u> 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.
5	Signature of Owner/Contractor/Officer(s) of Corporation Date
\int_{T}	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
0	to hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work et forth in the permit:
_	Has three (3) or more employees and has obtained workers' compensation insurance to cover them.
th	Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover em.
co	Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance vering themselves.
<u>.,</u>	Has no more than two (2) employees and no subcontractors.
De to	partment issuing the permit may require certificates of coverage of worker's compensation insurance prior issuance of the permit and at any time during the permitted work from any person, firm or corporation trying out the work.
Co	in w/Title: President Date: 5-12-09
Sig	in w/Title: President Date: 5-12-09