

\* 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 50021929  
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**

SCANNED  
4/17/09  
DATE

Owner's Name: Sher-Lock Homes DM Inc Date: \_\_\_\_\_

Site Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Directions to job site from Lillington: \_\_\_\_\_

Subdivision: \_\_\_\_\_ Lot: \_\_\_\_\_

Description of Proposed Work: \_\_\_\_\_ #Bedrooms: \_\_\_\_\_

Heated SF \_\_\_\_\_ Unheated SF \_\_\_\_\_ Finished Rec Room? \_\_\_\_\_ Crawl Space ( ) Slab ( )

**General Contractor Information**

Sher-Lock Homes DM 919-369-4345  
Building Contractor's Company Name Telephone

4805 Christian Chapel Rd 61035  
Address License #

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

**Electrical Permit Information**

Description of Work New SFD Service Size: 200 Amps TPole:  yes  no

Lite it 4u Electric 919-669-7209  
Electrical Contractor's Company Name Telephone

1140 Hwy 55 E. Coats, NC 27521 24450-L  
Address License #

[Signature]  
Signature of Officer(s) of Corporation

**Mechanical/HVAC Permit Information**

Description of Work New SFD

Stephenson Heating & Air 919-329-0686  
Mechanical Contractor's Company Name Telephone

343 Shipwash Dr Garner NC 27529 18644  
Address License #

[Signature]  
Signature of Officer(s) of Corporation

**Plumbing Permit Information**

Description of Work New SFD # Baths 2

Gilbert Plumbing 910-467-6361  
Plumbing Contractor's Company Name Telephone

1638 Timothy Rd Dunn NC 28334 10929  
Address License #

[Signature]  
Signature of Officer(s) of Corporation

**Insulation Permit Information**

Eastern Insulation  
Insulation Contractor's Company Name & Address Telephone

APR 17 2009

### 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.

*Daniel H. ...*  
Signature of Owner/Contractor/Officer(s) of Corporation

4-17-09  
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: Sher-Lock Homes DM Inc

Sign w/Title: *Daniel H. ...* Date: 9-25-08