* 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 # <u>OQ 50002056</u> Harnett County Central Permitting PO Box 65 Lillington, NC 27546 910-893-7525 Fax 910-893-2793 www.hamett.org/permits

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ADDIIGALIOII	. IVI IXESIUEIILIAI	Building and Trades Permit

910-893-7525 Fax 910-893-2793 www.hamett.org/permits	SCANNED
Application for Residential Building and Trades Permit	126/09
Owner's Name: Treprensity Builder's Time Date: 4-04-09 -	DATE
Site Address: 112 Derby Lane Lillington Phone: 919 730 7802	
Directions to job site from Lillington: 210 to Angrer. Left on Bruce	
Johnson Rd. Lot 28.	
Subdivision: Johnson Ferms Lot: 28	
Description of Proposed Work:	
Heated SF 1800 Unheated SF General Contractor Information Crawl Space (Slab	()
Stephengary Ruildons Inc. 919-730-7802	
Building Contractor's Company Name Telephone	
1187 N Raleigh St. 53404	
Address License #	
Signature of Owner/Contractor/Officer(s) of Corporation Must sign & fill out second page	
Electrical Permit Information	
Description of Work New Service Size: 200 Amps TPole: (es)ho	
Electrical Contractor's Company Name Fig. 19-553-4383 Telephone	
8039 Kenneber Rd. Willow Serm NC 27592 05748	*
Address License #	
- Rey Dan	
Signature of Officer(s) of Corporation Mechanical/HVAC Permit Information	
Description of Work	
TC's HV AC 919-552-62	58
Mechanical Contractor's Company Name Telephone	
1539 Wade Stephenson Rd. Hally Sorris NC 27540 12455	
Address License #	
Signature of Officer(s) of Corporation	
Plumbing Permit Information	
Description of Work New #Baths 2 WW Plumbing Foc 919- (39-0)95	
Plumbing Contractor's Company Name Telephone	
10 Box 1004 Angrey NC 27501 14087	
Signature of Officer(s) of Corporation	
Inculation Dermit Information	
Insulation Permit Information Old 222 900	
Insulation Contractor's Company Name & Address 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?
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
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 <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.
Signature of Owner/Contractor/Officer(s) of Corporation 4. 29 - 09 Date
Signature of Owner/Contractor/Officer(s) of Corporation Date
'Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:
The undersigned applicant being the:
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
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:
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
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
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.
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