\* 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. license.

Application #
Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Ounce's Name of Parties of the Parti
Owner's Name: Bradley Built Tuc. Date:
Site Address: Tactions Point Subdering phone 919 - 1.20 200
The state of the s
I Subdivision on left
Subdivision: Pattons Point
Description of Proposed Work: New Have #Bedrooms: 3
Heated SE 7704
Heated SF 7 11 Finished Rec Room? No Crawl Space (VSlab ( )
Scale and the second contractor information
Building Contractor's Company Name  919-639-2073
$\mathbf{G}(\mathbf{M})$
1.00,000
License #
Signature of Owner/Contractor/Officer(s) of Corporation  Must sign & fill out second page
Description of Work New House Service Size: 200 Amps TPole: (e)/no
Stancil-Owen Electric 917-639-2073
Electrical Contractor's Company Name
Hole Strail Rd. Almorer NC 27501 13075-L
Budy Shari
Signature of Officer(s) of Corporation
Mechanical/HVAC Permit Information
Description of Work //w beinge
TC's Heating Cooling 919-552-6758  Mechanical Contractor's Company Name Talanta
Mechanical Contractor's Company Name  1539 Wacle - Stephenson Rd Holly Springs 17655-H3  Address
Address Wale-Stephenson Rd Holly Spring 17655-H3
License #
Signature of Officer(s) of Corporation
Plumbing Permit Information
Description of Work / Lea & bitages
Barne Planton # Baths C
Plumbing Contractor's Company Name  Telephone
P.O. Bux 1207 An in NL 2750 PIDD 2-
Auditors ()
License #
Signature of Officer(s) of Corporation
Insulation Permit Information
Insulating One. 1612 How Ct Balein 772- GOOD
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)
Do you own the land on which this building will be constructed? yes no
Have you hired or intend to hire an individual to superintend and manage construction of the project?  yes no
Do you intend to directly control & supervise construction activities?yes no
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? yesno
yes10
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.
Britis Stuil 08-24-09
Signature of Owner/Contractor/Officer(s) of Corporation  O8 - 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: <u>Bradley Bnilt Inc.</u> Sign w/Title: <u>Bridley Striv</u> Date: DF-24-09