or licensed contractor. Address company name & phone must match information on Cense

Application # 09-500-2272

Harnett County Central Permitting

PO Box 65 Littington, NC 27546 910-893-7525 Fax 910-893-2793 www.hamett.org/permits Application for Residential Building and Trades Permit Owner's Name: Accorded to Site Address: Directions to job site from Lillington: 1111 Halle Subdivision 19 Shall of Lot: Description of Proposed Work: 1 C 48 مے کی ہے کہوسہ #Bedrooms: Heated SF 45 Unheated SF Finished Rec Room? 29/ __ (Crawl Space () Slab () General Contractor Information 66115% 5/6 Building Contractor's Company Name Telephone 616 Griddin Aduress icense # 1100 A.O. Must sign & fill out second page Signature of Owner/Contractor/Officer(s) of Corporation **Electrical Permit Information** Description of Work Electrical Cost \$ TS Pole: Yes (4) No () Underground (4) Overheard () Permanent Service: Underground () Overhead () Service Size: 200 TM PORCE ELECT
Electrical Contractor's Company Name 910 850 365 Telephone 3483 Cameron Prive Address Bignature of Officer(s) of Corporation Mechanical Permit Information Description of Work Number of Units Type System Mechanical Cost \$ Jones + Jones 510 424- 7702 Mechanical Contractor's Company Name Telephone 5217 Marraccopy Hope MILLS NE 28348 H2 & 3 Address License # Signature of Officer(s) of Corporation Plumbing Permit Information Description of Work Plumbing Cost \$ Number of Baths Richard Allen Callanan 910 475 -2441 Plumbing Contractor's Company Name Telephone PI 2 28748 318 DONN AST ST. Pauls License # Address Filewal laiden Callechan Signature of Officer(s) of Corporation **Insulation Permit Information**

Residential (*) Other () Not Required ()

Blown RITE

Insulation Contractor's Company Name

Address

12/04

Telephone

Page 1 of 3

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?no
4. Do you intend to schedule, contract, or directly pay for all phases of construction work to be done?
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
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.
8-27-09 Dote
Signature of Owner/Contractor/Officer(s) of Corporation Date
Signature of Owner/Contractor/Officer(s) of Corporation Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:
Signature of Owner/Contractor/Officer(s) of Corporation Date Affidavit for Worker's Compensation N.C.G.S. 87-14
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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
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:
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
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
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:
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