

Application # 09 500 23 063

* 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.

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

Owner's Name: G. S. Langdon Inc Date: 10/14/09
Site Address: Nordica Ct Anderson Creek Phone: 910-527-8898
Directions to job site from Lillington: Take 210S then LEFT on Elk St Bridge Rd
Then left on Will Lucas Rd, Subdivision will be about
1/2 mile down on right
Subdivision: Carolina Oaks Lot: 41
Description of Proposed Work: New Home Const #Bedrooms: 4
Heated SF 1731 Unheated SF 506 Finished Rec Room? N/A Crawl Space () Slab

General Contractor Information

G. S. Langdon Inc 910-527-8898
Building Contractor's Company Name Telephone
P.O. Box 996 Hope Mills NC 28348 53857
Address License #

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

Electrical Permit Information

Description of Work _____ Service Size: _____ Amps TPole: yes/no
Ronnie's Electric 910-858-7300
Electrical Contractor's Company Name Telephone
P.O. Box 747 Parkton NC 28371-0747 05800 EL-U
Address License #

[Signature]
Signature of Officer(s) of Corporation

Mechanical Permit Information

Description of Work _____
Ranco 910-858-7300
Mechanical Contractor's Company Name Telephone
P.O. Box 747 Parkton NC 28371-0747 16556 H 1231
Address License #

[Signature]
Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work _____ # Baths _____
Hallock Plumbing 910-858-4139
Plumbing Contractor's Company Name Telephone
24218 NC Hwy 71N Parkton NC 24037 P11
Address License #
28371-9684

[Signature]
Signature of Officer(s) of Corporation

Insulation Permit Information

Cumberland Insulation 4205 Clinton Rd Fay NC 28312 910-484 7118
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? 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.

Danny J. Langdon
Signature of Owner/Contractor/Officer(s) of Corporation

10/16/09
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: G. S. Langdon Inc

Sign w/Title: *Danny J. Langdon Pres* Date: 10/16/09