

* 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
Telephone Number 910-893-7525 www.harnett.org
Application for Building and Trade Permit

Application # 09-500-23491

SCANNED
12/29/09
DATE

Owner's Name: WM Kent Pierce Inc Date: 12/29/09
Address: PO BOX 42535 FAYETTEVILLE NC 28309 Phone: 910-424-1294

Directions to job site from Lillington: NL 27 - right onto Hoover Rd -
left onto Trail Rider Ln - left onto old Field Loop
Subdivision: Presimman Hills Lot: 31

Construction Type: (Please Check) Building Use: (Please Check)
 New Moved House Residential Commercial
 Renovation Addition Other Modular Multi-Family

Total Project Cost: 168,500.00 Description of Proposed Work: new construction

Heated SF 2545 Crawl Space () Building Construction Cost \$ 143,500.00
Unheated SF 645 Slab () Acres Disturbed .53 Stories 2

WM KENT PIERCE INC 910-424-1294
Building Contractor's Company Name Telephone
PO BOX 42535 FAYETTEVILLE NC 28309 29733
Address License #

Signature of Owner/Contractor/Officer(s) of Corporation -- Must sign back of form & workers comp

Electrical Permit Information
Description of Work new construction Electrical Cost \$ 5100.00
TS Pole: Yes () No () Underground () Overhead ()
Permanent Service: Underground () Overhead () Service Size: 200 Amps

JRN ELECTRIC 910-424-0264
Electrical Contractor's Company Name Telephone
2753 LAKE UPCHURCH DR PARKTON NC 28371 09132
Address License #

Signature of Officer(s) of Corporation

Mechanical Permit Information
Description of Work new construction
Number of Units 2 Type System Heat pump Mechanical Cost \$ 6150.00

JONES & JONES HEATING AND AIR 910-424-7702
Mechanical Contractor's Company Name Telephone
5217 MARRACCO DRIVE HOPE MILLS NC 28348 11814
Address License #

Signature of Officer(s) of Corporation

Plumbing Permit Information
Description of Work new construction
Number of Baths 2 1/2 Plumbing Cost \$ 5780.00

LARRY LEE PLUMBING 910-424-1766
Plumbing Contractor's Company Name Telephone
6417 BAROUR LAKE RD FAYETTEVILLE NC 28306 05274
Address License #

Signature of Officer(s) of Corporation

Insulation Permit Information Residential () Other () Not Required ()
CUMBERLAND INSULATION FAYETTEVILLE NC 910-484-7118
Insulation Contractor's Company Name & Address Telephone

DEC 29 2009

Application # _____

Commercial Jobs must fill out this portion
Sprinkler System Information

Sprinkler Contractor's Company Name	Contact & Telephone
Address	License #
Signature of Officer(s) of Corporation	

Fire Alarm System Information

Fire Alarm Contractor's Company Name	Contact & Telephone
Address	License #
Signature of Officer(s) of Corporation	

Driveway Access - NC Department of Transportation Driveway Access/Permit? Yes No

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

Sign & date

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, 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.

Signature of Owner/Contractor/Officer(s) of Corporation

12/29/09

Date

Application # _____

**Affidavit for Worker's Compensation
N.C.G.S. 87-14**

The undersigned applicant for Building Permit # _____ 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/have three (3) or more employees and has/have obtained workers' compensation insurance to cover them.

_____ Has/have one (1) or more subcontractors(s) and has/have obtained workers' compensation insurance to cover them.

Has/have one (1) or more subcontractors(s) who has/have their own policy of workers' compensation insurance covering themselves.

_____ Has/have not 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.

Firm Name: WM KENT PIERCE INC

Sign/Title: *Wm Kent Pierce* - President

Date: 12/29/09