

* 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 # 09-500-23492

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: nu 27 - right onto Heaven rd - left onto Trail Rider Lane - left onto old Bald way
Subdivision: Persimmon Hill Lot: 54

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

Total Project Cost: 166,500 Description of Proposed Work: new construct

Heated SF 2496 Craw Space () Building Construction Cost \$ 141,500.00
Unheated SF 25 Slab () Acres Disturbed .47 Stories 2

General Contractor Information

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

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

Electrical Permit Information

Description of Work new construct Electrical Cost \$ 5180.00
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]
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 11614
Address License #

[Signature]
Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work new construction
Number of Baths 2 1/2 Plumbing Cost \$ 5850.00

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

[Signature]
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

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**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: *Ma [Signature]* - President

Date: 12/29/09