· 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.



10-500-23557 Application #_

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 Pe

Owner's Name: Wynn Construction Site Address:	Date:
Directions to job site from Lillington:	Prione:
Take RA De Al (30	C Dougald Rd. Wests
Take Rt on Adoch Rol Su	5 18 es the left.
Subdivision:	Ameron Pives Lot: 14
Description of Proposed Work: New Home	40.
Heated SF Finis	shod Des Des
Wyww Construction Building Contractor's Company Name 200 (20 't) De Contractor	919 51× 1347
Building Contractor's Company Name	Telephone
250 Cap. 101 Dr. Su. te 105 Cm	esdmine NC 27523 W. a.C.
hodress	License #
Sidestare of Owner/Control	
Signature of Owner/Contractor/Officer(s) of Corpor	ration
	Permit Information
S.A Jackson Electric	Amps Pole: Jesino
Electrical Contractor's Company Name	919 730 1251 Telephone
Trol Kalend Dd. Ra.	Can
Address DANA NE 21	21/44
R.A. Oadson (ighature of Officer(s) of Corporation	License #
ignature of Officer(s) of Corporation	
Mechanical/HV	AC Permit Information
escription of Work New Constractor	
echanical Contractor's Company Name	919 329 0686
243 5/ 5 / Carractor's Company Name	Talant
13 Shipwork Do Garner NC 2.	7529 18644
	License #
gnature of Officer(s) of Corporation	
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scription of Work New Construction	·
	# Baths
10 Departer Plant	
mbing Contractor's Company Name	960 424 67/2
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imbing Contractor's Company Name 192 Mid Divo R. Funth will NC dress Land Manager of Officer(s) of Corporation Insulation Page	Talast

Homeowners Applying to Build Please answer the following questions then see a Permit Technician to determ	Their Own Mome Their Own rupity for permit under Owners Exemption.
Questionnaire per G.S. 87-14 Regulations as to Issue of B	uilding Permits (Memo available upon request)
1. Do you own the land on which this building will be constr	ructed? yes no
2. Have you hired or intend to hire an individual to superinte project?	end and manage construction of the yes no
3. Do you intend to directly control & supervise construction	n activities? yes no
4. Do you intend to schedule, contract, or directly pay for all done?	I phases of construction work to be yes no
5. Do you intend to personally occupy the building for at lea completion of construction and do you understand that if you presumption under law that you fraudulently secured the per	a do not do so, it creates the
	yesno
I hereby certify that I have the authority to make necessary applicand that the construction will conform to the regulations in the Mechanical codes, and the Harnett County Zoning Ordinance. I contractors is correct as known to me and if any changes occur in number of bedrooms, building and trade plans, Environmental Heachanges, I certify it is my responsibility to notify the Harnett Countary and all changes. EXPIRED PERMIT FEES - 6 Months to 2 years permit re-issue fee is as per current fee schedule.	state the information on the above including listed contractors, site plan, alth permit changes or proposed use ty Central Permitting Department of is \$150.00. After 2 years re-issue fee
	2-3-10
Signature of Owner/Contractor/Officer(s) of Corporation Da	ate
Affidavit for Worker's Compensation The undersigned applicant being the:	
General Contractor Owner Officer/Ag	ent of the Contractor or Owner
Do hereby confirm under penalties of perjury that the person(s), firm set forth in the permit:	(s) or corporation(s) performing the work
Has three (3) or more employees and has obtained workers' of	compensation insurance to cover them.
Has one (1) or more subcontractors(s) and has obtained work them.	ters' compensation insurance to cover
Has one (1) or more subcontractors(s) who has their own polic covering themselves.	cy of workers' compensation insurance
Has no more than two (2) employees and no subcontractors.	
While working on the project for which this permit is sought it is undersometries to issuance of the permit and at any time during the permitted work from carrying out the work.	worker's compensation insurance prior
$=$ \cdot $=$ \cdot	
Company or Name:	Tra
Company or Name: Construction C	Date: 2-3-10