

* Each section below to be filled out by whoever performing work. Must be owner or licensed contractor. Address, company name & phone must match information on license.

Application # 10-500-23624
Harnett County Central Permitting
PO Box 66 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Application for Residential Building and Trades Permit

Owner's Name: CHARLES L. GALLOWAY Date: 27 FEB 2010

Site Address: _____ Phone: _____

Directions to job site from Lillington: US. 401 N. (L) ON RP 1412; (D) ON RP 1403;
TRAVEL 5.9 MILES NORTH; TURN (L) INTO ~~DRIVEWAY~~ DRIVEWAY
BETWEEN 5951 & 5981 COKESBURY RD. & PROPERTY IS \approx 250' WEST OF HWY.

Subdivision: N/A Lot: 5

Description of Proposed Work: SINGLE STORY RESIDENCE #Bedrooms: 3

Heated SF 1,624 Unheated SF _____ Finished Rec Room? _____ Crawl Space Slab ()

General Contractor Information
CHARLES L. GALLOWAY 910-890-4594
Building Contractor's Company Name Telephone
104 RUDOLPH RD. DUNN 28334-8200 OWNER
Address License #

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

Electrical Permit Information
Description of Work ELECTRICAL Service Size: 200 Amps TPole yes/no
CHARLES L. GALLOWAY 910-890-4594
Electrical Contractor's Company Name Telephone
104 RUDOLPH RD. DUNN 28334-8200 OWNER
Address License #

Signature of Officer(s) of Corporation _____
Mechanical/HVAC Permit Information
Description of Work HVAC
HVAC SPECIALISTS 919-669-9509
Mechanical Contractor's Company Name Telephone
5843 Cokesbury Rd FV, NC. 27526 22035
Address License #
Tom Galloway
Signature of Officer(s) of Corporation _____

Plumbing Permit Information
Description of Work PLUMBING # Baths _____
D & V REPAIR SERVICE 919-552-6011
Plumbing Contractor's Company Name Telephone
288 BAKERTOWN RD, FURQUAY-VARINA, NC 27526 15986
Address License #
Don L Cain
Signature of Officer(s) of Corporation _____

Insulation Permit Information
Insulating Inc. 1212 Home Ct Raleigh 27603 919-772-9000
Insulation Contractor's Company Name & Address Telephone
11972
License #

SCANNED
2/27/10
DATE
FEB 22 2010


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 Hamett 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 Hamett 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.


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

22 FEB 2010
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: CHARLES L. GALLOWAY

Sign w/Title: 

Date: 22 FEB 2010