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

	23790
Application #	<u> </u>

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
Phone 910-893-7525 Fax 910-893-2793 www.harnett.org

Application for Residential	Building and Trades Permit
Owner's Name: New Century Homes, LLC	
Site Address: Lot # 97 Carolina Seaso	As Phone: <u>910-892-4345</u>
Directions to job site from Lillington: 27 West From	at Lillington, (TR) on
	lerasa Rd, (TL) isto S/D,
Stay Straight through existing	5/D. Lot an Left @ cutde-so
Subdivision: Lardina Seasons	Lot: <u>97</u>
Description of Proposed Work: Ranch w/	Boxus #Bedrooms: 3
Heated SF <u>1849</u> Unheated SF <u>440</u> Finished R General Contrac	tec Room? <u>288 &</u> Crawl Space () Slab (V Stor Information
Cumberland Homes	910-892-4345
Building Contractor's Company Name	Telephone
Po Box 727 Dunn, NC 28335	<u> 59493</u>
	License #
Harry Korres	Must sign & fill out second page
Electrical Perm	olt Information
Description of Work New Service	Size: 200 Amps TPole yesho
Wester + Pace	919 - 499 - 5389
Electrical Contractor's Company Name	Telephone
546 Leslie Dr. Sanford, NC	12007-U
Address ~	License #
William Wester	
Signature of Officer(s) of Corporation Mechanical Perr	nit Information
Description of Work <u>Ν</u> εω	
Jacksons Heating + Air	910-891-5410
Mechanical Contractor's Company Name	Telephone
Pa Box 82 Benson, NC	License #
Dud Juckson	Licerise #
Signature of Officer(s) of Corporation Plumbing Perm	it information
A A	# Baths 2
Description of Work New Clover Contract Plumbing	910-892-1612
Plumbing Contractor's Company Name	Telephone
Po Box 726 Coats, NC	23160
Address .	License #
Shown Morer	
Signature of Officer(s) of Corporation	
Insulation Permi	
Tri-City Insulation 418 Person St. Formulation Contractor's Company Name & Address	y, NC 910-486-8855
Insulation Contractor's Company Name & Address	Telephone

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Application #	<u> </u>		<u> </u>

Land Land Home
Homeowners Applying to Bulld 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)
Do you own the land on which this building will be constructed? yesno
2. Have you hired or intend to hire an individual to superintend and manage construction of the project?
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 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? yesno
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. Signature of Owner/Contractor/Officer(s) of Corporation 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.
them. Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance covering themselves.
Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance
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.
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