

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.

Application # 04011
Harnett County Central Permitting

PO Box 86 Lillington, NC 27548
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Application for Residential Building and Trades Permit

Owner's Name: BRADLEY JOHN MERZ Date: 8 APR 2010

Site Address: 1200 ELYNN McPherson Rd, CAMERON Phone: 499-2901

Directions to job site from Lillington: 24/27 WEST TO JOHNSONVILLE, STOP AT "T" BY VETERANS MEMORIAL, TAKE RIGHT ON 24/27, PROCEED 1/2 MILE TO NEXT LEFT ON Hillman Grove Church Rd, proceed 3 miles to Intersection of Cameron

Subdivision: hill road & Elynn - McPherson road Lot: _____

Description of Proposed Work: _____ #Bedrooms: _____

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

General Contractor Information

BRADLEY JOHN MERZ
Building Contractor's Company Name Telephone _____

Address _____ OWNER
License # _____

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

Electrical Permit Information

Description of Work _____ Service Size: _____ Amps TPols: yes/no

BRADLEY JOHN MERZ
Electrical Contractor's Company Name Telephone _____

Address _____ owner
License # _____

Bradley John Merz
Signature of Officer(s) of Corporation

Mechanical/HVAC Permit Information

Description of Work _____
BRADLEY JOHN MERZ

Mechanical Contractor's Company Name Telephone _____

Address _____ owner
License # _____

Bradley John Merz
Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work _____ # Baths _____

BRADLEY JOHN MERZ
Plumbing Contractor's Company Name Telephone _____

Address _____ owner
License # _____

Bradley John Merz
Signature of Officer(s) of Corporation

Insulation Permit Information

Insulation Contractor's Company Name & Address Telephone _____

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 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.

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.

Bradley J. Merz
Signature of Owner/Contractor/Officer(s) of Corporation

8 APRIL 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: BRADLEY J. MERZ

Sign w/Title: Bradley J. Merz Date: 8 APRIL 2010

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Application # 1050024079

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 Permit

Owner's Name: Carl + Barbara Wilson Date: 5-26-10

Site Address: 136 Regal Crest Dr Phone: _____

Directions to job site from Lillington: 401 North RT ON Christian Light Rd LT ON River Rd RT ON Regal Crest

Subdivision: Regal Crest Dr Lot: 11

Description of Proposed Work: Residence #Bedrooms: 4

Heated SF 2889 Unheated SF _____ Finished Rec Room? Crawl Space (w/Slab) _____

General Contractor Information

Dennis McLaurin 919 917-9141
Building Contractor's Company Name Telephone

7527 Christian Light Rd Fuquay NC 29421
Address License #

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

Electrical Permit Information

Description of Work Wiring House Service Size: 400 Amps TPole: yes no
Hair Electric Inc 919-331-2431
Electrical Contractor's Company Name Telephone

188 Medical Dr. Angier NC 27501 3726-J
Address License #

John Michael Davis VP
Signature of Officer(s) of Corporation

Mechanical/HVAC Permit Information

Description of Work New House

SKUMATE MECHANICAL-RALEIGH, INC. 919-662-8040
Mechanical Contractor's Company Name Telephone

5201 OLD POOLE ROAD, ST-110 RALEIGH, NC 27610 27546
Address License #

Wally [Signature] VP
Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work New House # Baths 3 1/2

D + V Repair service
Plumbing Contractor's Company Name Telephone

288 Bakro town Rd FU 15986
Address License #

Don Cain
Signature of Officer(s) of Corporation

Insulation Permit Information

Insulating Inc 772-9000
Insulation Contractor's Company Name & Address Telephone

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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)

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

6-1-10
Date

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

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General Contractor Owner Officer/Agent of the Contractor or Owner

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

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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: Dennis McLaurin

Sign w/Title: Dennis McLaurin Owner Date: 5-26-10