

* 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.

SCANNED

4/14/10

DATE

Application # 10-500-24189

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: Wlyon Construction Inc. Date: 4-12-10

Site Address: 16 Harding Lane Phone: 919-796-3090

Directions to job site from Lillington: 27 West, 87 South, 24 West

Take left on Marks Rd go 4.5 miles and

Copper Farms is on the right

Subdivision: Copper Farms Lot: 1

Description of Proposed Work: New Construction #Bedrooms: 3

Heated SF 1401 Unheated SF - Finished Rec Room? no Crawl Space () Slab

General Contractor Information

Wlyon Construction Inc 919-528-1347
Building Contractor's Company Name Telephone

2550 Capital Drive suite 105 46295
Address License #

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

Electrical Permit Information

Description of Work New Construction Service Size: 200 Amps TPole: /no

R. A. Jackson 919-730-1251
Electrical Contractor's Company Name Telephone

9261 Raleigh Blvd Buxton NC 27504 21144
Address License #

[Signature]
Signature of Officer(s) of Corporation

Mechanical/HVAC Permit Information

Description of Work New Construction

Stephenson HVAC 919-329-0686
Mechanical Contractor's Company Name Telephone

343 Shipwash Ave Corner NC 27529 18644
Address License #

[Signature]
Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work New Construction # Baths 3

Thantons Plumbing 919-669-8655
Plumbing Contractor's Company Name Telephone

3160 FA Omsas Rd. Clayton NC 28152
Address License #

[Signature]
Signature of Officer(s) of Corporation

Insulation Permit Information

Tatum Insulation 919-661-0555
Insulation Contractor's Company Name & Address Telephone

APR 14 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 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.

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

Date

4-12-10

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:

Sign w/Title:

Date:

Wynn Construction Inc.

John D. Hales Prod. Mgr.

4-12-10