\* Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address, company name & phone must match Application # 24732

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: Wynn Construction, Inc.	Date: <b>8-25-10</b>	
Site Address: 26 Gibert Ct.	Phone: 9/19 603-7965	
Directions to job site from Lillington: 276 To But		
Left on Baffaloe Lakes Rd.	LetTon Cameron PINESH	
RIGHTON ALBERT CT.	Lect ble Care or Privest	
Subdivision: <u>Cameton</u> PINES	Lot: 16 Anthony GI	
Description of Proposed Work: New Construction EL	e," A" # of Bedrooms: 3	
Heated SF 1929 Inheated SF 614 Tinished Bonus Ro	# of Bedrooms.	
General Contractor Info	ermation Crawl Space: Slab:	
Wynn Construction, Inc.	919 603-7965	
Building Contractor's Company Name	Telephone	
2550 Capitol Dr. Creedmoor, NC 27522	edward@wynnconstruct.com	
Address 0.1	Email Address	
I agher Cherle	46295	
Signature of Owner/Contractor/Officer(s) of Corporation	License #	
Electrical Contractor Info	ormation	
Description of Work New Construction Service  R. A. Jackson	e Size: 200 Amps T-Pole: ✓ Yes No	
	919 730-1251	
Electrical Contractor's Company Name	Telephone	
9261 Raleigh Road Benson NC 27504 Addressı /		
The state of the s	Email Address	
Signature of Owner/Contractor/Officer(s) of Corporation	2114	
Mechanical/HVAC Contractor	License #	
Description of Work New Construction	- THOMBUSH	
Stephenson HVAC	0.0000000000000000000000000000000000000	
Mechanical Contractor's Company Name	919 329- 0686	
343 Shipwash Dr. Garner, NC 27529	Telephone	
Address	Email Address	
Tou Start	18644	
Signature of Owner/Contractor/Officer(s) of Corporation	License #	
Plumbing Contractor Info		
Description of Work New Construction	# Baths <sup>3</sup>	
Thorton's Plumbing	919 669-8655	
Plumbing Contractor's Company Name	Telephone	
3160-A Omar Rd. Clayton, NC	· - repriserve	
Address	Email Address	
Front Note	22152	
Signature of Owner/Contractor/Officer(s) of Corporation	License #	
Insulation Contractor Info		
Tatum Insulation	919 661-0999	
Insulation Contractor's Company Name & Address	Telephone	

Homeowners Applying to Build Their Own I Please answer the following questions then see a Permit Technician to determine if you qualify for puestionnaire per G.S. 87-14 Regulations as to Issue of Building Permits (Mem	ermit under Owr			
1. Do you own the land on which this building will be constructed?	Yes	No		
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 consect months following completion of construction and do you understand that you do not do so, it creates the presumption under law that you frauduler secured the permit?	if ntly	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 <u>any</u> 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.  8-25-10				
Signature of Owner/Contractor/Officer(s) of Corporation Date				
Affidavit for Worker's Compensation N.C.G.S  The undersigned applicant being the:	i. 87-14			
Affidavit for Worker's Compensation N.C.G.S		Owner		
Affidavit for Worker's Compensation N.C.G.S The undersigned applicant being the:	ontractor or C			
Affidavit for Worker's Compensation N.C.G.S  The undersigned applicant being the:  General Contractor  Owner  Officer/Agent of the Co	ontractor or C	orming the work		
Affidavit for Worker's Compensation N.C.G.S  The undersigned applicant being the:  General Contractor  Owner  Officer/Agent of the Contractor  Do hereby confirm under penalties of perjury that the person(s), firm(s) or corposet forth in the permit:	ontractor or C ration(s) perfo on insurance	orming the work		
Affidavit for Worker's Compensation N.C.G.S  The undersigned applicant being the:  General Contractor Owner Officer/Agent of the Component	ontractor or C ration(s) perfo on insurance nsation insura	to cover them.		
Affidavit for Worker's Compensation N.C.G.S  The undersigned applicant being the:  General Contractor  Owner  Officer/Agent of the Compensation of	ontractor or C ration(s) perfo on insurance nsation insura	to cover them.		
Affidavit for Worker's Compensation N.C.G.S  The undersigned applicant being the:  General Contractor  Owner  Officer/Agent of the Compensation of	ontractor or C ration(s) perform on insurance insation insurance rs' compensation the Central Prompensation	to cover them.  ance to cover  ation insurance		
Affidavit for Worker's Compensation N.C.G.S  The undersigned applicant being the:  General Contractor  Owner  Officer/Agent of the Compensation of the permit of the permit of the compensation of the permit of the compensation of the permit of the compensation of the compensation of the compensation of the compensation of the permit of the compensation of the compe	entractor or Coration(s) performance insurance insation insurance insation insurance insation insurance insation insurance in the Central Prompensation inson, firm or core	to cover them.  ance to cover  ation insurance		

## SLAB ELevation A.

Plan Box Number AA 13

Job Name Cameran Pines

Date: 8-26-10

Required Inspections for SFA/SFD

Appl. # 10,5 00 2 473 2 Valuation 4/6 6 479 Sq. Feet 2 470

## Sequence

10	D* Dida Facting
<del></del>	R* Bldg. Footing
10-30	R* Elec. Temp Service Pole
20	R* Building Foundation
20	Address Confirmation
30-999	Open Floor
30-999	R* Bldg. Slab Insp.
30-999	R* Elec. Under Slab
30-999	R*Plumb. Under Slab
40	Four Trade Rough In
40	Four Trade Rough In> 2500
40	Three Trade Rough In
40	Three Trade Rough In> 2500
40	Two Trade Rough In
40	Two Trade Rough In> 2500
40	One Trade Rough In
40	One Trade Rough In > 2500
50	R* Insulation
60	Four Trade Final
60	Four Trade Final > 2500
60	Three Trade Final
60	Three Trade Final > 2500
60	Two Trade Final
60	Two Trade Final > 2500
60	One Trade Final
60	One Trade Final > 2500
999	Envir. Operations Permit