

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

Application for Residential Building and Trades Permit

Owner's Name: Wynn Construction, Inc. Date: 7-27-10
Site Address: 45 Taft Ln. Phone: 919 603-7965
Directions to job site from Lillington: Take NC 27W to Hwy 87 Take Hwy 87 South to Hwy 24
Take Hwy 24 West to Marks Rd. 4-5miles on Marks Rd. Cooper Farms will be on right

Subdivision: Cooper Farms Lot: 39
Description of Proposed Work: New Construction # of Bedrooms: 3
Heated SF: 1409 Unheated SF: 542 Finished Bonus Room? N Crawl Space: Slab: check

General Contractor Information

Wynn Construction, Inc. 919 603-7965
Building Contractor's Company Name Telephone
2550 Capitol Dr. Creedmoor, NC 27522 edward@wynnconstruct.com
Address Email Address
Signature of Owner/Contractor/Officer(s) of Corporation License #

Electrical Contractor Information

Description of Work New Construction Service Size: 200 Amps T-Pole: check Yes No
R. A. Jackson 919 730-1251
Electrical Contractor's Company Name Telephone
9261 Raleigh Road Benson NC 27504
Address Email Address
Signature of Owner/Contractor/Officer(s) of Corporation License #

Mechanical/HVAC Contractor Information

Description of Work New Construction
Stephenson HVAC 919 329- 0686
Mechanical Contractor's Company Name Telephone
343 Shipwash Dr. Garner, NC 27529
Address Email Address
Signature of Owner/Contractor/Officer(s) of Corporation License #

Plumbing Contractor Information

Description of Work New Construction # Baths 3
Thorton's Plumbing 919 669-8655
Plumbing Contractor's Company Name Telephone
3160-A Omar Rd. Clayton, NC
Address Email Address
Signature of Owner/Contractor/Officer(s) of Corporation License #

Insulation Contractor Information

Tatum Insulation 919 661-0999
Insulation Contractor's Company Name & Address Telephone

\*NOTE: General Contractor must fill out and sign the second page of this application.

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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)

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

J. Edward Averett  
Signature of Owner/Contractor/Officer(s) of Corporation

7-27-10  
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: Wynn Construction, Inc.

Sign w/Title: J. Edward Averett

Date: 7-27-10

Plan Box Number AA-13

Job Name Cooper Farm #39

Date: 10-25-10

Required Inspections for SFA/SFD

Appl. # 10-5-24942

Valuation \$118,313

Sq. Feet 1821

Sequence

10		<del>R* Bldg. Footing</del>
10-30	✓	R* Elec. Temp Service Pole
20		<del>R* Building Foundation</del>
20	✓	Address Confirmation
30-999		<del>Open Floor</del>
30-999	✓	R* Bldg. Slab Insp. <i>monoslab</i>
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