

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

Application # 10-50025081

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

SCANNED
8/23/10
DATE

Owner's Name: ABO INVESTMENTS Date: _____

Site Address: Kenlan Farms 254 Emma Ct. Phone: 910-237-5006

Directions to job site from Lillington: South 401 to Beeve Bridgerd
turn right 90 to Kenland Farms, Turn Left
go to Emma Ct House site on RIGHT *to Loggy Williams*

Subdivision: Kenlan Farms 254 Emma Ct Lot (24)

Description of Proposed Work: New Home #Bedrooms: 3

Heated SF 1400 Unheated SF _____ Finished Rec Room? Crawl Space Slab ()

General Contractor Information

Ramkewit Const Dnc. 910 237-5006
Building Contractor's Company Name Telephone

330 Byleshire Ct, Fay NC 28311 22992 NC.
Address License #

Must sign & fill out second page

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

Electrical Permit Information

Description of Work Complete Wiring Service Size: 200 Amps TPole: no

First Call Electric Telephone _____
Electrical Contractor's Company Name

1534 Londonderry Rd. 28301 Fay NC. 149354
Address License #

Michael Pester
Signature of Officer(s) of Corporation

Mechanical/HVAC Permit Information

Description of Work Supply Working System By-NC Code.

Jones & Jones 910 424-7702
Mechanical Contractor's Company Name Telephone

5217 marracco DR Hopeville NC 28348 11614 H2-3
Address License #

Diell Jones
Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work Complete Working System # Baths 2

Johnson Plumbing Co. 910-424-6712-3
Plumbing Contractor's Company Name Telephone

3242 mid Pine Rd 28306 Fay NC. 027.56-P1
Address License #

Tom Johnson
Signature of Officer(s) of Corporation

Insulation Permit Information

Blown Rite (910) 483 8191
Insulation Contractor's Company Name & Address Telephone

(24) - 254 Emma Ct
Kenlan Farms

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

8-20-10
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:

N/A Has three (3) or more employees and has obtained workers' compensation insurance to cover them.

N/A 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.

N/A 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: Wayne Rombaut

Sign w/Title: [Signature] Date: 8-20-10

