

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

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Application # 1050025145

Application for Residential Building and Trades Permit

Owner's Name: Wynn Construction, Inc. Date: _____
Site Address: 173 Cameron Pines Dr. Phone: 919 603-7965
Directions to job site from Lillington: 27 W to Buffalo Lakes Rd.
Left on Buffalo Lakes Rd, Left on Cameron Pines dr.
Down street on Left
Subdivision: Cameron Pines Lot: 6 0.42 ACRES.
Description of Proposed Work: New Construction # of Bedrooms: 3
Heated SF 1769 Inheated SF 598 Finished Bonus Room? N Crawl Space: Slab: _____

General Contractor Information

Wynn Construction, Inc. 919 603-7965
Building Contractor's Company Name Telephone
2550 Capitol Dr. Creedmoor, NC 27522
Address edward@wynnconstruct.com
Email Address
Edward Overt 46295
Signature of Owner/Contractor/Officer(s) of Corporation License #

Electrical Contractor Information

Description of Work New Construction Service Size: 200 Amps T-Pole: Yes No
R. A. Jackson 919 730-1251
Electrical Contractor's Company Name Telephone
9261 Raleigh Road Benson NC 27504
Address R. A. Jackson Email Address
Signature of Owner/Contractor/Officer(s) of Corporation License # 21144

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 Stephenson HVAC Email Address
Signature of Owner/Contractor/Officer(s) of Corporation License # 18644

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 Thorton's Plumbing Email Address
Signature of Owner/Contractor/Officer(s) of Corporation License # 22152

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.

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

9-2-10
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 Awcutt, COO Date: 9-2-10

Plan Box Number AA-13

Job Name Wynn Const

Date: 9-28-10

Required Inspections for SFA/SFD

Appl. # 10-5-25145
Valuation \$145,406
Sq. Feet 2238

Sequence

10		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