\* Each section below to be filled out by whomever performing work.

Must be owner or licensed contractor. Address, company name & phone must match

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

Application # 10500 253 05

 $\sum_{i,j=1}^{n}k^{-i}=0$ 

## Application for Residential Building and Trades Permit

Owner's Name: Wynn Construction, Inc.	Date: 10 - 8 - 18
Site Address: 124 Ook Leaf Dr.	20 - Q10 102 201 C
Directions to job site from Lillington: 40/N To for h	FI DEAM TONE PLAT
fork Mc Dougald Road for 2 4-	Sailasawarrot
30 (0 )	J MITCA COME STORY
Subdivision: Summer HIII	Lot: 31 Acres .56
Description of Proposed Work: New Construction Franklin	TT GP # of Redrooms: 3
Heated SF 1364 Inheated SF 609 Tinished Bonus R	Promise Africa Communication of the Communication o
General Contractor Info	ormation Crawl Space: V Slab:
Wynn Construction, Inc.	919 603-7965
Building Contractor's Company Name	Telephone
2550 Capitol Dr. Creedmoor, NC 27522	edward@wynriconstruct.com
Address Of A The	Email Address
H. aguer Cherry	46295
Signature of Owner/Contractor/Officer(s) of Corporation	License #
Description of Work New Construction Service	formation
R. A. Jackson	ce Size: <u>200</u> Amps T-Pole: ✓ Yes No 919 730-1251
Electrical Contractor's Company Name	Telephone
9261 Raleigh Road Benson NC 27564	( e)éblioile
Address	Email Address
LA Lucha	21144
Signature of Owner/Contractor/Officer(s) of Corporation	License #
Mechanical/HVAC Contracto	or 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 Addrèss
Signature of Owner/Contractor/Officer(s) of Corporation	18644
Plumbing Contractor Inf	License #
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	
Address	Email Address
Frod Note	22152
Signature of Owner/Contractor/Officer(s) of Corporation	License #
Insulation Contractor Inf	
Tatum Insulation	919 661-0999
Insulation Contractor's Company Name & Address	Telenhone

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

mmillion of Baltin agencies

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?YesNo		
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 <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.		
Signature of Owner/Contractor/Officer(s) of Corporation 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.		
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		

## Plan Box Number AA-13

Job Name Summer Holl

Date: 10-11-10

## Required Inspections for SFA/SFD

Appl. # 10-5-25305 Valuation \$122,926 Sq. Feet 1892

## Sequence

10	D# Dide Page
10-30	R* Bldg. Footing
20	R* Elec. Temp Service Pole
20	R* Building Foundation
30-999	Address Confirmation
	Open Floor
30-999	R* Bldg. Slab Insp.
30-999	R* Elec. Under Slab
30-999	R*Plumb. Under Stab
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
50	Two Trade Final > 2500
50	One Trade Final > 2500
50	· · · · · · · · · · · · · · · · · · ·
999	One Trade Final > 2500 Envir. Operations Permit