

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

Application # 11-500-26233

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

SCANNED
3/21/11
DATE

Application for Residential Building and Trades Permit

MAR 21 2011

Owner's Name: Bernard Young Date: 3-17-2011
Site Address: _____ Phone: 919 639 2934
Directions to job site from Lillington: 910 EAST 1st St ON SHERIFF
JOHNSON RD TO OLD STAGE ROAD TURN RIGHT SITE ON LEFT

Subdivision: Cathy McRamb Lot: 4
Description of Proposed Work: Spec House # of Bedrooms: 3
Heated SF: 1345 Unheated SF: _____ Finished Bonus Room? _____ Crawl Space: Slab: _____

General Contractor Information

L. M. Langdon 919-422-6946
Building Contractor's Company Name Telephone
150 Lansing Dr Benson, NC NA
Address Email Address
L M Langdon 55716
Signature of Owner/Contractor/Officer(s) of Corporation License #

Electrical Contractor Information

Description of Work Wiring Service Size: 200 Amps T-Pole: Yes No
9261 Relish Rd Benson N.C. 27504 919-730-1251
Electrical Contractor's Company Name Telephone
R.A. Jackson Electric INC
Address Email Address
Bell 211445FD
Signature of Owner/Contractor/Officer(s) of Corporation License #

Mechanical/HVAC Contractor Information

Description of Work Install heat pump
Boasley's Heating & Air
Mechanical Contractor's Company Name Telephone 919-894-4248
57 Wc Boasley Lane, Coats, NC 27501 boasleysheating@aol.com
Address Email Address
Mike W 9497
Signature of Owner/Contractor/Officer(s) of Corporation License #

Plumbing Contractor Information

Description of Work Plumb new house # Baths 2
Mike Smith Plumbing Telephone 919-639-3117
Plumbing Contractor's Company Name
109 Ablited Ln. Angier, N.C.
Address Email Address
Michael R. Smith 18200
Signature of Owner/Contractor/Officer(s) of Corporation License #

Insulation Contractor Information

Insulating Inc 919 772-9000
Insulation Contractor's Company Name & Address Telephone
1212 Home Court, Raleigh, NC 27603 800 443 7140

*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.

L M Langdon
Signature of Owner/Contractor/Officer(s) of Corporation

3/21/11
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: L M Langdon

Sign w/Title: L.M. Langdon, OWNER Date: 3/21/11