

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

Application # 1150026540⁽²⁾

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

Owner's Name _____ Date _____
Site Address _____ Phone _____
Directions to job site from Lillington _____

Subdivision _____ Lot _____
Description of Proposed Work _____ # of Bedrooms _____
Heated SF _____ Unheated SF _____ Finished Bonus Room? _____ Crawl Space _____ Slab _____

General Contractor Information

As Owner
Building Contractor's Company Name _____ Telephone _____
Address _____ Email Address _____
License # _____

Electrical Contractor Information

Description of Work _____ Service Size _____ Amps T Pole ___ Yes ___ No
As Owner
Electrical Contractor's Company Name _____ Telephone _____
Address _____ Email Address _____
License # _____

Mechanical/HVAC Contractor Information

Description of Work _____
As Owner
Mechanical Contractor's Company Name _____ Telephone _____
Address _____ Email Address _____
License # _____

Plumbing Contractor Information

Description of Work _____ # Baths _____
As Owner
Plumbing Contractor's Company Name _____ Telephone _____
Address _____ Email Address _____
License # _____

Insulation Contractor Information

As Owner
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 that **by signing below I have obtained all subcontractors permission to obtain these permits** 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

Jonathan Keith Greer
Signature of Owner/Contractor/Officer(s) of Corporation

Nov 4, 2011
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 Jonathan Keith Greer

Sign w/Title Jonathan Keith Greer / owner Date Nov 4, 2011

STATE OF NORTH CAROLINA

115 00 26540
OWNER EXEMPTION AFFIDAVIT
PURSUANT TO G S 87-14(a)(1)

COUNTY OF Harnett

Harnett Inspections Department

Address and Parcel Identification of Real Property Where Building is to be Constructed or Altered

05 0626 0059 09

I, Jonathan Keith Greer
(Print Full Name)

hereby claim an exemption from licensure under G S 87 1(b)(2) by initialing the relevant provision in paragraph 1 and initialing paragraphs 2-4 below and attesting to the following

- 1. JKG I certify that I am the owner of the property set forth above on which this building is to be constructed or altered,

OR

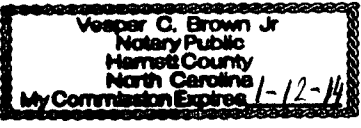
- JKG I am legally authorized to act on behalf of the firm or corporation which is constructing or altering this building on the property owned by the firm or corporation as set forth above (name of firm or corporation _____),
- 2. JKG I will personally superintend and manage all aspects of the construction or alternation of the building and that duty will not be delegated to any person not duly licensed under the terms of Article 1 of Chapter 87 of the General Statutes of North Carolina,
- 3. JKG I will be personally present for all inspections required by the North Carolina State Building Code, unless the plans for the construction or alteration of the building were drawn and sealed by an architect licensed pursuant to Chapter 83A of the General Statutes of North Carolina,
- 4. JKG I understand that a copy of this AFFIDAVIT will be transmitted to the North Carolina Licensing Board for General Contractors for verification that I am validly entitled to claim an exemption under G S 87 1(b)(2) for the building construction or alteration specified herein I further understand that, if the North Carolina Licensing Board for General Contractors determines that I was not entitled to claim this exemption, the building permit issued for the building construction or alteration specified herein shall be revoked pursuant to G S 153A-362 or G S 160A 422

Jonathan K. Greer
(Signature of Affiant)

Nov 7, 2011
Date

Sworn to (or affirmed) and Subscribed before me this the 7 day of 11, 2011

Vesper C. Brown Jr
Signature of Notary Public
Vesper C. Brown Jr
Printed Name of Notary Public



My Commission Expires 1-12-14

(Notary Stamp or Seal)

(NOTE It is a Class F felony to willfully commit perjury in any affidavit taken pursuant to law—G S 14-209)

Basement

Plan Box # A-6

Date 11-4-11
Job Name Greer

App # 1150026540

Valuation \$ 271841

SQ Feet 4184

Inspections for SFD/SFA

Basement

Crawl

Slab

Mono

Footing	Footing	Plumbing Under Slab
Foundation	Foundation	Ele Under Slab
Address	Address	Address
Open Floor	Slab	Mono Slab
Rough In	Rough In	Rough In
Insulation	Insulation	Insulation
Final	Final	Final

>2500

>2500

>2500

Foundation Survey No

Envir Health Yes

Other Basement



Additions / Other Basement

Footing ✓

Foundation ✓

Slab ✓

Mono

Open Floor ✓

Rough In ✓

Insulation ✓

Final ✓