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

Application #

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

Application for Residential Building and Trades Permit
Owner's Name: Bill Clark Homes of Fayetheville, UC Date: 4/27/11
Site Address: 402 Carolina Oaks Circle Phone (910) 426-2898
Directions to job site from Lillington: TAKE Man Street /US 401 /NC 210 South to US 401 South
Turn Right onto Elliot Bridge Road, 60 to Will Livear Road of go Right into Siddingin
Subdivision: Carolina Oaks Lot: 26
Description of Proposed Work: Sizele Family Dwelling #Bedrooms: 3
Heated SF 2049 Unheated SF 1019 Finished Rec Room? yes Crawl Space (Slab & General Contractor Information
Bill Clark Hanne of Frankland 116 (210) (126 200
Bill Clark Homes of Foretteville, LLC (910) 426-2898 Building Contractor's Company Name Telephone
PO Box 87021 Fayetteville NC 28304 34592-BLD-U Address License #
Address License #
Must sign & fill out second page
Signature of Owirer/Contractor/Officer(s) of Corneration
Description of Work New Electrical Permit Information Service Size: 200 Amps TPole yes/no
Sandy Ridge Electeric, Anc. (910) 323-2458 Electrical Confractor's Company Name Telephone
Electrical Contractor's Company Name Telephone
454 Whitehead Rd. Faxetteville, NC 28312 10006-U
Address License #
Signature of Officer(s) of Corporation
Mechanical Permit Information
Description of Work New Heating of Cooling
Mark-Air Mac. (910) USU 1515
Mechanical Contractor's Company Name
5217-103 Raeford Rd. Fayotheville, NC28364 15874
Address License #
Signature of Officeral and SURES
Signature of Officer(s) of Corporation Plumbing Permit Information
Description of Work No. 1 Plus L
VANCE VOHNSON PLUMBERY
Plumbing Contractor's Company Name Telephone
3242 MID PINE OR FAY NC 28306 MM 56-P1
Address License #
William How S
Signature of Officer(s) of Corporation
IRICity Insolation 334 E. Mountain E. Haville N.C. (910) 486-805-
Insulation Contracted Company No.
Telephone

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)
Do you own the land on which this building will be constructed?yesno
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?
yesno
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. Signature of Owner/Contractor/Officer(s) of Corporation Date
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.
Company or Name: Bill Clark Homes of Fayetteville, LLC Sign w/Title: Kimbely Coy-New Home Coordinator Date: 4/27/11