Dec 20

\* Each section below to be fitted out by whomever performing work. Must be owner or licensed contractor. Address, company name & phone must match information on license. Application # (1-500-26909

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

\_\_\_\_ 910-893-7525 Fax 910-893-2793 www.hamett.org/permits
Application for Residential Building and Trades Permit

SPANNED GIS 11

Owner's Name: Watermark Homes, Inc.		Date:	
Site Address: 88 Wildwood Way - Cameron, NC 28326	Phone:	(910) 48	3-2229
Directions to job site from Lillington:			
From NC-87, turn left on Milton Welch Road - drive 1.5 r drive 0.04 miles, turn right on Ponderosa Trail - drive 0.2 right.			
Subdivision: Carolina Seasons Community		Lot: 4	<del> </del>
Description of Proposed Work: New Residential Constru	uction	_#Bedroo	oms:3
Heated SF 1833 Unheated SF 2315 Finished Re General Contract			Crawl Space (X) Slab (
Watermark Homes, Inc.	(910) 483-2229		
Building Contractor's Company Name	Telephone		·
1308 Fort Bragg Road, Fayetteville, NC 28305		_	49261BLD-U
Address			License #
Signature of Owner/Contractor/Officer(s) of Corporation  Electrical Permi	Must sign & fill ou t Information	ıt second p	page
Description of WorkService	Size:	_Amps 1	Pole: yes/no
Sandy Ridge Electric	(910) 323-2458	3	
	Telephone		
454 Whitehead, Road, Fayetteville, NC 28305			10006EL-U
Address			License #
Signature of Officer(s) of Corporation  Mechanical/HVAC P	ermit informati	on	
Description of Work			
Simmon's Heating, Cooting & Electric		17-5242	
Mechanical Contractor's Company Name	Telepho		
1110 East 2nd Street, Lumberton, NC 28358	·		02875
Signature of Officer(s) of Corporation  Plumbing Perm	t Information		License #
Description of Work		_# Baths_	
Bass Plumbing	/910\ 2	_# Dailis_ 237-7996	· · · · · · · · · · · · · · · · · · ·
Plumbing Contractor's Company Name	Telepho		<del></del>
406 Dehavilland Drive, Fayetteville, NC 28311		22895-	P1
Address Sim	<del></del>		License #
Signature of Officer(s) of Corporation Insulation Permi	t Information		
Cumberland Insulation - 4205 Clington Rd. Fayetteville,			(910) 484-7118
Insulation Contractor's Company Name & Address		<del></del>	Telephone

Application #	11-500-26909

Homeowners A	
Please answer the following questions then see a	Applying to Build Their Own Home  Permit Technician to determine if you qualify for permit under Owners Exemption.  The properties of Building Permits (Memo available upon request)
1. Do you own the land on which this t	building will be constructed? yes no
2. Have you hired or intend to hire an project?	individual to superintend and manage construction of the yes no
3. Do you intend to directly control & s	supervise construction activities? yes no
Do you intend to schedule, contract done?	t, or directly pay for all phases of construction work to be yes no
	the building for at least 12 consecutive months following understand that if you do not do so, it creates the lently secured the permit?  yes no
and that the construction will conform to Mechanical codes, and the Harnett Coun- contractors is correct as known to me and number of bedrooms, building and trade pi changes, I certify it is my responsibility to	o make necessary application, that the application is correct to the regulations in the Building, Electrical, Plumbing and the Zoning Ordinance. I state the information on the above of if any changes occur including listed contractors, site plan, lans, Environmental Health permit changes or proposed use notify the Harnett County Central Permitting Department of Section 1.
Affidavit for Wo The undersigned applicant being the:	rker's Compensation N.C.G.S. 87-14
The undersigned applicant being the:	rker's Compensation N.C.G.S. 87-14
The undersigned applicant being the:  X General Contractor Ow	·
The undersigned applicant being the:  X General Contractor Ow  Do hereby confirm under penalties of perjuset forth in the permit:	ner Officer/Agent of the Contractor or Owner
The undersigned applicant being the:  X General Contractor Ow  Do hereby confirm under penalties of perjuset forth in the permit:  X Has three (3) or more employees as	oner Officer/Agent of the Contractor or Owner ury that the person(s), firm(s) or corporation(s) performing the work
The undersigned applicant being the:  X General Contractor Ow  Do hereby confirm under penalties of perjuset forth in the permit:  X Has three (3) or more employees at X Has one (1) or more subcontractors them.	onerOfficer/Agent of the Contractor or Owner ury that the person(s), firm(s) or corporation(s) performing the work and has obtained workers' compensation insurance to cover them.
The undersigned applicant being the:  X General Contractor Ow  Do hereby confirm under penalties of perjuset forth in the permit:  X Has three (3) or more employees at X Has one (1) or more subcontractors them.  X Has one (1) or more subcontractors	Officer/Agent of the Contractor or Owner by that the person(s), firm(s) or corporation(s) performing the work and has obtained workers' compensation insurance to cover them.  (s(s) and has obtained workers' compensation insurance to cover solve) who has their own policy of workers' compensation insurance
The undersigned applicant being the:  X General Contractor Ow  Do hereby confirm under penalties of perjuset forth in the permit:  X Has three (3) or more employees at them.  X Has one (1) or more subcontractors them.  X Has one (1) or more subcontractors covering themselves.  Has no more than two (2) employee While working on the project for which this Department issuing the permit may require	Officer/Agent of the Contractor or Owner by that the person(s), firm(s) or corporation(s) performing the work and has obtained workers' compensation insurance to cover them.  (s(s) and has obtained workers' compensation insurance to cover solve) who has their own policy of workers' compensation insurance
The undersigned applicant being the:  X General Contractor Ow  Do hereby confirm under penalties of perjuset forth in the permit:  X Has three (3) or more employees at X Has one (1) or more subcontractors them.  X Has one (1) or more subcontractors covering themselves.  Has no more than two (2) employee While working on the project for which this Department issuing the permit may require to issuance of the permit and at any time of	Officer/Agent of the Contractor or Owner by that the person(s), firm(s) or corporation(s) performing the work and has obtained workers' compensation insurance to cover them.  (a) and has obtained workers' compensation insurance to cover (s) who has their own policy of workers' compensation insurance es and no subcontractors.  (a) permit is sought it is understood that the Central Permitting es certificates of coverage of worker's compensation insurance prior during the permitted work from any person, firm or corporation

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