

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

Application # 1150027119

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: CHARLES & NATALIE QUINTAL Date: 7/1/11
Site Address: 639 EXECUTIVE PLACE Phone: 910-263-9013

Directions to job site from Lillington: HIGHWAY 401S TO BUNNLEVEL, RIGHT ON McLEAN CHAPEL CHURCH ROAD, GO TO 2nd INTERSECTION AND TURN LEFT ONTO RAYNOR McLAMB ROAD, PROPERTY IS LOCATED ABOUT 1 - 2 MILES ON THE RIGHT.

Subdivision: _____ Lot: 3

Description of Proposed Work: RESIDENTIAL # of Bedrooms: 4

Heated SF: 3255 Unheated SF: 1667 Finished Bonus Room? Yes _____ Crawl Space: _____ Slab:

General Contractor Information

CAVINNESS & CATES 910-481-0803
Building Contractor's Company Name Telephone
639 EXECUTIVE PLACE
Address Email Address
59586
License #

Electrical Contractor Information

Description of Work RESIDENTIAL Service Size: _____ Amps T-Pole: Yes No
PARNELL ELECTRIC 910-237-2751
Electrical Contractor's Company Name Telephone
6167 STEWART ROAD, GODWIN NC
Address Email Address
24236-U
License #

Mechanical/HVAC Contractor Information

Description of Work RESIDENTIAL
CHACCO 910-488-0318
Mechanical Contractor's Company Name Telephone
1910-B PAMELEE DR, FAYETTEVILLE NC
Address Email Address
2957PH-3
License #

Plumbing Contractor Information

Description of Work RESIDENTIAL # Baths 3.0
VANCE JOHNSON PLUMBING 910-424-6712
Plumbing Contractor's Company Name Telephone
3242 MIDPINE DRIVE FAYETTEVILLE NC
Address Email Address
7756-P1
License #

Insulation Contractor Information

CUMBERLAND INSULATION, FAYETTEVILLE NC 910-487-7118
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.

Natalie E. Quintal
Signature of Owner/Contractor/Officer(s) of Corporation

7-1-11
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: Natalie E. Quintal
Sign w/Title: owner Date: 7-1-11

9-8-11

Job application # 11-50027119

It will be changing the general
Contractor from Caumuss + Cates
to Sans Construction,

Natalie & Quintal
9-8-11

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Certification of Work Performed By Owner/Contractor
(Individual Trade Application)

Owner (s) of Structure Natalie Quintal Phone 910-263-9013
Owner (s) Mailing Address 161 Eulon Loop Raeford, NC 28376

Land Owner Name (s) VLS Real Estate, LLC Phone _____
Construction or Site Address Rainor McLamb Road, Bunnlevel
PIN or Parcel # from GIS 0556-02-0689000

Job Cost 150,000 Description of Work to be done Residential

Mechanical New Unit With Ductwork ___ New Unit Without Ductwork ___ Gas Piping ___
Electrical* 200 Amp ___ <200 Amp ___ Service Change ___ Service Reconnect ___ Other ___
* For Progress Energy customers we need the premise number
Plumbing Water/Sewer Tap ___ Number of Baths ___ Water Heater ___

Specific Directions to Job from Lillington
Highway 40 S Right on M'Lean Chapel Church road, Left on
Rainor McLamb road. Go about 2 miles, property is on left

Subdivision _____ Lot # 3

I _____ will provide the _____ labor on this structure
(Contractors Name) (Trade)

I am the building owner or my NC state license number is _____, which entitles me to
perform such work on the above structure legally All work shall comply with the State Building Code
and all other applicable State and local laws, ordinances and regulations

Structure owner(s) signature Natalie & Quintal Date 9-6-11

Company Name Sans Construction Company Inc Phone 910-237-7798
Address 3541 Harrisburg Dr Fay, NC 28330 County Cumberland
Contractor's License # 55507 Email Address mike@cannessandcates.com
Contractor's Signature [Signature] Date 9-6-11

*Company name, address, & phone must match information on license

