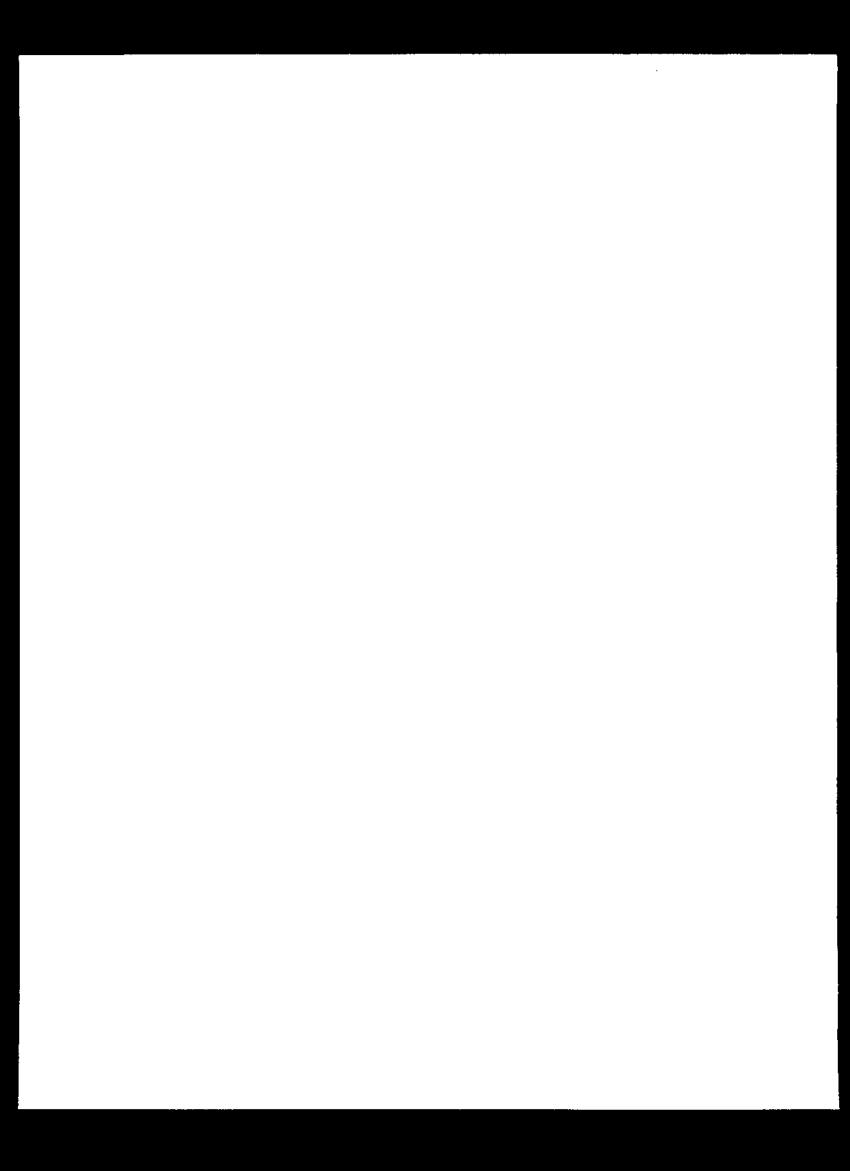
\* Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address, company name a phone must match information on license.

Application #

Harnett County Central Permitting
PO 80x 85 Lillington, NC 27548
Phone 910-893-7525 Fax 910-893-2793 www.hamett.org

Application for Residential Building and Trades Permit
CWhare Name: Will Look \\
Site Address: 366 Carolina Oaks Circle Phone (910) 426-2898
Directions to job site from Liftington: TAKE Man Constitution
Directions to job site from Lillington: TAKE MANN STREET US 401/NC 210 South to 401
Turn Right into Carolina Oaks Sobdivision. Take Caroline Oaks Circle to back Lot
LOT: ~44
Description of Proposed Work: Single Family Dwelling #Bedrooms: 3
Heated SF 1902 Unheated SF 656 Finished Rec Room? 1901 Crawl Space ()(Slab (4) PAISED
Dill Charles Add to the control of t
Building Contractor's Company Name (910) 426-2898 Telephone
Address 1 Fayetteville NC 28304 34592-BLD-U
Address 34542-BCD-U
Signature of Own Control of Contr
oncornation
Description of Work New Electrical Permit Information Service Size: 200 Amps TPole (yes) no
Sandy Ridge Electer, Anc. (910) 323-2458
Electronic Company Name Telephone
454 Whitebook 2d James Landley 25212
Address License #
Signature of Officer(s) of Corporation
Description of Work New Heating + Cooling
**************************************
Mechanical Control of S
Lelophone
Address 13879
Chandles sikes
Signature of Officer(s) of Corporation
Plumbing Permit Information
Description of Work New Plants 2
HACE SOHNSON PLIMANIA QUA HOUS COM
Plumbing Contractor's Company Name Telephone
Address AD PINE DR FAYNC 2836 7756-PI
License #
Signature of Officer(s) of Corporation
Insulation Permit Information
TRICity Insulation 334 E. Mountain E 11 11 (21) 401
nsulation Contractor's Company Name & Address Dr. Fayether Ile, NC (910) 486-8855
CD20D readuling



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 requestions).
Do you own the land on which this building will be constructed?yes no
Have you hired or intend to hire an individual to superintend and manage construction of the project? yes no
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 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?
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.
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