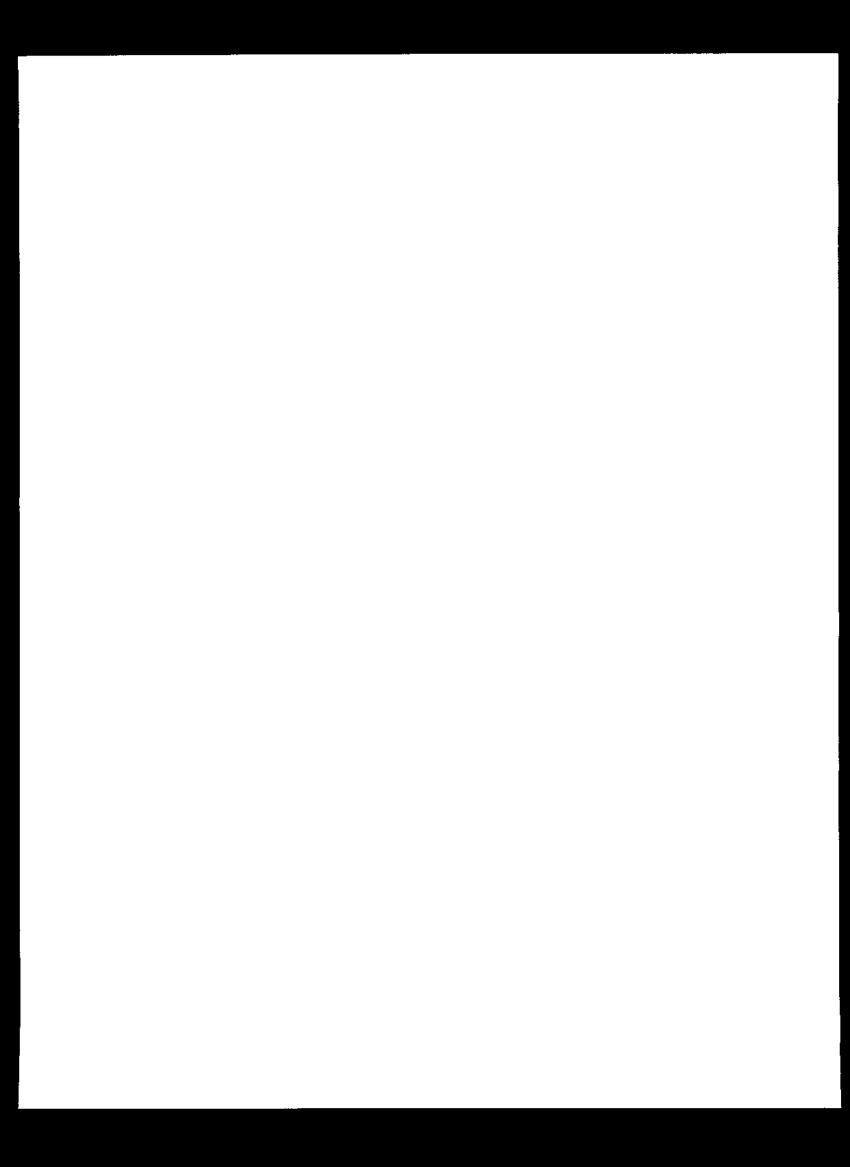
* Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address, company name & phone must match information on license.

Application # 1.50027159

Harnett County Central Permitting PO Box 65 Littington, NC 27548

Application for Regidential Dutter
Owner's Name: Bill Clark Homes of Twetteville, UC Date: 7/14/11
Site Address: 294 Fifty Caliber Drive Phone (910) 426-2898
Directions to job site from Lillington:Phone (910) 426-2898
Hwy 27 toward Huy B7 To 10:
on Strike Easle into Subdances T I I I To Tingen Road. Turn left
on Strike Eagle into Subdavision Turn left on Bunkerbuster & then Right on Fifty Cal Subdivision: Patton Point
Description of Proposed Work: Single Family Dwelling #Bedrooms: 3
Heated SF 2049 Unheated SF 1019 Finished Rec Room? 4es Crawl Space () Slab & Record
Bill Clark Honor of Fartherille 116 (Qua) 1126 2000
Building Contractor's Company Name
Address Regetteritle NC 28304 34592-BLD-U
License #
Signature of Owner/Contractor/Officer(s) of Corporation Must sign & fill out second page
// \
Service Size: 200 Amps TPole yes no
Electrical Contractor's Company Name Telephone
454 Whitehead Rd Favetherelle ACC 28212
Address License #
Signature of Officer(s) of Corporation
Mechanical Permit Information
Description of Work New Heating of Cooling
Mechanical Contractor's Company Name (910) 484-6565 Telephone
5217-103 Raeford Rd. Faxetheville, NC28364 15874
License #
Signature of Officer(s) of Corporation
Plumbing Permit information
Description of Work 4 / 2011
NANCE JOHNSON PLUMBENG QUE HOU COM
Plumbing Contractor's Company Name 301/0 Telephone
Address AD FAY NC 28306 7756-PI
License #
Signature of Officer(s) of Corporation
Insulation Permit Information
74. A) /
Insulation Contractor's Company Name & Address Dr. Fayetterille, NC (910) 486-8855 ZB306 Telephone
€ Market and the company of the com



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
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? 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 <u>any</u> 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 7/14/11 Date
Signature of Owner/Coritractor/Officer(s) of Corporation Date
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:
General Contractor Owner Money 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.
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

