

09/09/11

Application #

11500 27637

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

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

Application for Residential Building and Trades Permit

Owner's Name Bernard F. Young Date 10/5/11

Site Address _____ Phone _____

Directions to job site from Lillington 210 to Sheriff Johnson Rd turn right go to old stage Rd turn Right job on left

Subdivision Cathy P McLaime Lot 3

Description of Proposed Work New House # of Bedrooms 3

Heated SF 1315 Unheated SF 617 Finished Bonus Room? NO Crawl Space Slab _____

General Contractor Information

L.M Langdon Telephone 919-422-6946

Building Contractor's Company Name 150 Lansing Drive Benson, Email Address NA

Address 55716

License # _____

Electrical Contractor Information

Description of Work New House Service Size _____ Amps T-Pole Yes _____ No _____

RA JACKSON Electric, Inc Telephone 919 894 5367

Electrical Contractor's Company Name 9261 Raleigh Rd Benson NC 27504

Address _____ Email Address _____

License # 21144

Mechanical/HVAC Contractor Information

Description of Work New House

Beasley's H&A INC Telephone 894 ~~448~~ 4248

Mechanical Contractor's Company Name 57 Wc Beasley Lane Coats NC 27521

Address 9494 Email Address _____

License # _____

Plumbing Contractor Information

Description of Work New House # Baths 2

Mike Smith Plumbing Telephone 639 3117

Plumbing Contractor's Company Name Young Rd Angier NC 27501

Address 18200 Email Address _____

License # _____

Insulation Contractor Information

Insulation Co. GARNER NC. Telephone 919 772 9000

Insulation Contractor's Company Name & Address _____

*NOTE General Contractor must fill out and sign the second page of this application

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

L M Langdon
Signature of Owner/Contractor/Officer(s) of Corporation

10/13/11
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 L M Langdon

Sign w/Title L M Langdon, Owner Date 10/13/11

Plan Box # G-4

Date 10-3-11

Job Name Young

App # 1150027637

Valuation \$125,525

SQ Feet 1932

Inspections for SFD/SFA

Crawl

Slab _____

Mono _____

Footing	Footing	Plumbing Under Slab
Foundation	Foundation	Ele. Under Slab
Address	Address	Address
Open Floor	Slab	Mono Slab
Rough In	Rough In	Rough In
Insulation	Insulation	Insulation
Final	Final	Final

>2500 _____

>2500 _____

>2500 _____

Foundation Survey _____

Envir. Health

Other _____

Additions / Other

Footing _____

Foundation _____

Slab _____

Mono _____

Open Floor _____

Rough In _____

Insulation _____

Final _____