Application # 11 500 27656

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

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 Highway 210 Development	Date(D () () ()
Site Address 384 Tactical Drive Bunnlevel	Ne 26323 Phone
Directions to job site from Lillington Hwy 210 5 approx	14 miles on left
Subdivision Gwen Oaks	Lot <u>25</u>
Description of Proposed Work New Construction	# of Bedrooms 3
Heated SF 3037 Unheated SF 558 Finished Bonus Room?	~./
General Contractor Informatio	
Gary Robinson Homes	910-977-2562
Building Contractor's Company Name	Telephone
55,11 Ramsey St, Su, te 100, Fay, NC28311	gary robinsonhames e yahoo com Emathaddress
Address	Email-Address
Day hope	67530 unlimited
Signature of Owner/Contractor/Officer(s) of Corporation Electrical Contractor Information	License #
Description of Work New Construction Service Size	200 Amps T-Pole / Yes No
Current Technologies	919-278-8894
Electrical Contractor's Company Name	Telephone
3818 Blano Road, Raleigh, N. 27609	
Address	Email Address
My	23963 L
Signature of Owner/Contractor/Officer(s) of Corporation Mechanical/HVAC Contractor Infor	License #
	<u>mation</u>
Description of Work New Construction	919-820-7063
Custom Heating + air	Telephone
Mechanical Contractor's Company Name	Tolephone
276 Jernigon Rd, Dunn, NC	Email Address
Address	N4508 H31
Signature of Owner/Contractor/Officer(s) of Corporation	License #
Plumbing Contractor Informat	<u>ion</u>
Description of Work New Construction	# Baths
Dell Haire Plumbing	910-429-9939
Plumbing Contractor's Company Name	Telephone
7612 Documentary Drive, Fay NC 28311	
Address	Email Address
Voll Harry	24204 P-1 License #
Signature of Owner/Contractor/Officer(s) of Corporation Insulation Contractor Informa	
Mucha la ITamil Co Tora 4205 Clinto	mP1910 - 484-7118_
Insulation Contractor's Company Name & Address Fay NC283	Telephone Telephone
Manager Samuel Care	512 higense # 901046

*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?YesNo		
2 Have you hired or intend to hire an individual to superintend and manage construction of the project? YesNo		
3 Do you intend to directly control & supervise construction activities?YesNo		
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? 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. EXPIRED PERMIT FERMS - 6 Months to 2 years permit re-issue fee is \$150.00. After 2 years re-issue fee is as per current fee schedule.		
Signature of Owner/Contractor/Officer(s) of Corporation 16 17 11 Date		
Signature of Owner/Contractor/Officer(s) of Corporation Affidavit for Worker's Compensation N C G S 87-14 The undersigned applicant being the		
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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		
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Date	7-19-11
Job Name_	Gary Robinson to
√ Valuation <u># 233,5</u> 7	3 SQ Feet 3595
Slab	Mono
Footing	Plumbing Under Slab
· · · · · · · · · · · · · · · · · · ·	Ele. Under Slab
	Address
	Mono Slab
	Rough In
	Insulation
	Final
>2500	>2500
Envir. Health <u>/e5</u>	Other
	Job Name_ Valuation \$\frac{1}{23357}\$ Slab Footing Foundation Address Slab Rough In Insulation Final >2500

Final_