

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

Application # 11500 27716  
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: Wynn Construction, Inc. Date: 11-15-11  
Site Address: 256 Oak Leaf Drive Phone: 919-603-7965  
Directions to job site from Lillington: 401 N, take left fork McDougald Rd  
subdivision is 4-5 miles on the right

*Cancelled  
11.17.11*

Subdivision: Summerhill Lot: 12  
Description of Proposed Work: New Construction # of Bedrooms: 3  
Heated SF: 1416 Unheated SF: 604 Finished Bonus Room? N Crawl Space:  Slab:

**General Contractor Information**

Wynn Construction, INC. 919 603-7965  
Building Contractor's Company Name Telephone  
2550 CAPITOL DR. edward@wynnconstruction.com  
Address Email Address  
46295  
License #

**Electrical Contractor Information**

Description of Work New Construction Service Size: 200 Amps T-Pole:  Yes  No  
R. A. JACKSON 919 730-1251  
Electrical Contractor's Company Name Telephone  
9261 Raleigh Road Benson, NC 27504  
Address Email Address  
21144  
License #

**Mechanical/HVAC Contractor Information**

Description of Work New Construction  
Carolina Comfort A/C INC. 919 550-7716  
Mechanical Contractor's Company Name Telephone  
5212 US Hwy 70 Bus W. Clayton, NC carolinacomfortair@yahoo.com  
Address Email Address  
29077  
License #

**Plumbing Contractor Information**

Description of Work New Construction # Baths 3  
Thornton's Plumbing  
Plumbing Contractor's Company Name Telephone  
3160A Omar Rd Clayton NC  
Address Email Address  
22152  
License #

**Insulation Contractor Information**

Tatum Insulation 919 661-0999  
Insulation Contractor's Company Name & Address Telephone

\*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

J. Edward Averitt  
Signature of Owner/Contractor/Officer(s) of Corporation

11-15-11  
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 Wynn Construction, Inc.

Sign w/Title

J. Edward Averitt

Date 11-15-11

Plan Box # AAB

Date 11/17/11

Job Name WYUNA

App # 11 50027716 Valuation 120522 SQ Feet 1855

**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 \_\_\_\_\_