

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

Application # _____
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

11/14/11
~~11/11/11~~

Owner's Name Caviness Land Development Date 11/14/11
Site Address 75 Parkview Lane Phone 9103396332
Directions to job site from Lillington From 87 S make a left onto Nursery Road and then continue to the left on Nursery Road Make a right onto Parkview Lane Lot is the 4th on the left

Subdivision Rosemont Lot 19
Description of Proposed Work Building House # of Bedrooms 3
Heated SF 2037 Unheated SF 746 Finished Bonus Room? Yes Crawl Space _____ Slab ✓
General Contractor Information Raised slab

Caviness Land Development 910 339 6330
Building Contractor's Company Name Telephone
559 Executive Place Suite 101 janine@cavinessland.com
Address Email Address
37485
License #

Electrical Contractor Information

Description of Work electrical Service Size _____ Amps T Pole ✓ Yes ___ No
B&N Electric 910 531-4913
Electrical Contractor's Company Name Telephone
5449 Hwy 210 South Stedman NC 28391 tnelectric@intrstar.net
Address Email Address
09622 L
License #

Mechanical/HVAC Contractor Information

Description of Work heating & air
CHACCO 910 488 0318
Mechanical Contractor's Company Name Telephone
1910 B Pamalee Drive chacco@wmbarrmail.com
Address Email Address
2957ph: 3
License #

Plumbing Contractor Information

Description of Work plumbing # Baths 2 1/2
Glover Plumbing Inc 919 868 0959
Plumbing Contractor's Company Name Telephone
PO Box 726 Coats NC 27521 gloverplumbinginc@rocketmail.com
Address Email Address
23160
License #

Insulation Contractor Information

Cumberland Insulation 4205 Clinton Road Fayetteville NC 28312 910 424 7118
Insulation Contractor's Company Name & Address Telephone

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

Roemont # 19

Plan Box # A-3

Date 11-16-11

Job Name Crown Land Per

App # 1150027856 Valuation \$16,775.00

SQ Feet 2585

Inspections for SFD/SFA

Crawl _____

Raised 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 No

Envir. Health Yes

Other _____



Additions / Other

Footing _____

Foundation _____

Slab _____

Mono _____

Open Floor _____

Rough In _____

Insulation _____

Final _____

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? ___ Yes ___ No
- 2 Have you hired or intend to hire an individual to superintend and manage construction of the project? ___ Yes ___ No
- 3 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 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? ___ Yes ___ No

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 **I affirm that I have obtained all listed contractors 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

Signature of ~~Owner/Contractor/Officer(s)~~ of Corporation Date 11/14/11

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 Caviness Land Development
 Sign w/Title [Signature] Date 11/14/11