

A-7

App # 12 5002 8117

Harnett County Central Permitting  
PO Box 65 Lillington NC 27546  
Telephone Number 910-893-4759

**Application for Building and Trade Permit**

Owner's Name Kath Bullock Builders INC Date 1-26-2012  
Address 72 Overlook at Angier NC Phone 919-427-4629  
Directions to job site  Hwy 210 N - left on Bruce Johnson Rd - left on Saddle Lane - left on Dersley - lot 31 on left

Subdivision Johnson Farms Lot 31

Construction Type (Please Check) Building Use (Please Check)  
 New  Residential  
 Renovation  Modular  
 Addition  Commercial  
 Moved House  Multi-Family  
 Other

Description of Proposed Work Single Family  
Total Project Cost 125,000.

**Building Permit Information**

Heated SF 1900 Crawl Space   
Unheated SF 400 Slab   
Building Construction Cost \$ 125000  
Acres Disturbed 5 Stories 1  
Building Contractor's Company Name Kath Bullock Builders INC Telephone 919-427-4629  
72 Overlook at Angier Telephone 42504  
Address [Signature] License #  
Signature of Officer(s) of Corporation

**Electrical Permit Information**

Description of Work New Electrical Cost \$ \_\_\_\_\_  
TS Pole Yes  No  Underground  Overhead   
Permanent Service Underground  Overhead  Service Size 200 Amps  
Ted Dean Electrical Telephone 552-4282  
Electrical Contractor's Company Name 8039 Willow Springs Telephone 5748  
Address [Signature] License #  
Signature of Officer(s) of Corporation

**Mechanical Permit Information**

Description of Work New  
Number of Units 2 Type System HP Mechanical Cost \$ \_\_\_\_\_  
Young's Electrical INC Telephone 438-2297  
Mechanical Contractor's Company Name PO Box 398 Angier Telephone 404469  
Address Ted Young License #  
Signature of Officer(s) of Corporation

**Plumbing Permit Information**

Description of Work New  
Number of Baths 2 Plumbing Cost \$ \_\_\_\_\_  
W & W Plumbing INC Telephone 639-0195  
Plumbing Contractor's Company Name PO Box 1004 Angier Telephone 14087  
Address [Signature] License #  
Signature of Officer(s) of Corporation

**Insulation Permit Information**

Residential  Other  Not Required   
Insulating INC Telephone 772-9000  
Insulation Contractor's Company Name 1212 Home at Raleigh Address Telephone

**Affidavit for Worker's Compensation  
N C G S 87-14**

The undersigned applicant for Building Permit # \_\_\_\_\_ being the

  X   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/have three (3) or more employees and has/have obtained workers' compensation insurance to cover them

\_\_\_\_\_ Has/have one (1) or more subcontractors(s) and has/have obtained workers' compensation insurance to cover them

  X   Has/have one (1) or more subcontractors(s) who has/have their own policy of workers' compensation insurance covering themselves

\_\_\_\_\_ Has/have not 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

Firm Name   Keith Bullock Builders, Inc  

By/Title   President  

Date   1-27-12

**Sprinkler System Information**

\_\_\_\_\_  
Sprinkler Contractor's Company Name

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Contact Person

\_\_\_\_\_  
Address

\_\_\_\_\_  
License #

\_\_\_\_\_  
Signature of Officer(s) of Corporation

**Fire Alarm System Information**

\_\_\_\_\_  
Fire Alarm Contractor's Company Name

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Contact Person

\_\_\_\_\_  
Address

\_\_\_\_\_  
License #

\_\_\_\_\_  
Signature of Officer(s) of Corporation

**Driveway Access**

NC Department of Transportation Driveway Access/Permit?    Yes \_\_\_ No X

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 any changes occur including listed contractors, site plan, 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 Division of any and all changes.

\_\_\_\_\_  
Signature of Owner/Contractor/Officer(s) of Corporation

\_\_\_\_\_  
Date

1-27-12