

09/09/11

Application #

12500 28489

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 MYERS JAMES ADAM Date 03/26/12
Site Address Hillman Grove Rd Phone 9103668760
Directions to job site from Lillington Rt 27

Subdivision _____ Lot _____
Description of Proposed Work LOG Home # of Bedrooms 4
Heated SF 2981 Unheated SF _____ Finished Bonus Room? _____ Crawl Space Slab _____

General Contractor Information

C&S LOG Homes INC 919-455-6181
Building Contractor's Company Name Telephone
7933 CLEVELAND Rd CLAYTON, CS Perry 2006 @YAHOO.COM
Address NC, 27520 Email Address
650-10

License # _____

Electrical Contractor Information

Description of Work Wire - House Service Size 200 Amps T-Pole Yes No

Donald Armstrong / Electrician 910 308 9701
Electrical Contractor's Company Name Telephone
Address armstrong.d53@yahoo.com
Email Address

License # _____

Mechanical/HVAC Contractor Information

Description of Work By Owner

Mechanical Contractor's Company Name Telephone
Address Email Address
License # _____

Plumbing Contractor Information

Description of Work By Owner # Baths _____

Plumbing Contractor's Company Name Telephone
Address Email Address
License # _____

Insulation Contractor Information

By Owner
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

Curt Perry
Signature of Owner/Contractor/Officer(s) of Corporation

3/26/12
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 TRAVELERS

Sign w/Title Curt Perry / OWNER Date 03/26/12

09/09/11

Application #

12-50028489

Harnett County Central Permitting

PO Box 65 Lillington NC 27546

910 893 7525 Fax 910 893 2793 www.harnett.org/permits

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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 James & Juliana Myers Date April 2012
Site Address Hillman Grove Road Phone 910 306-8760 HIS
910 261-8903 HERS
Directions to job site from Lillington ON FILE

Subdivision N/A Lot 2 A
Description of Proposed Work HOUSE FOUNDATION ^{George} ~~Harrison III~~ # of Bedrooms _____
Heated SF _____ Unheated SF _____ Finished Bonus Room? _____ Crawl Space _____ Slab _____

General Contractor Information

C & S LOG HOMES, INC (Curtis Perry) (919) 300-1120
Building Contractor's Company Name Telephone (919) 455-6181
Clayton, NC Email Address Csperry3006@yahoo.com
Address NC. 65010 FAX 919 300-1121
License # _____

Electrical Contractor Information

Description of Work _____ Service Size _____ Amps T-Pole Yes No
Electrical Contractor's Company Name Juliana Myers Telephone _____
Address _____ Email Address _____
License # _____

Mechanical/HVAC Contractor Information

Description of Work _____
Mechanical Contractor's Company Name Juliana Myers Telephone _____
Address _____ Email Address _____
License # _____

Plumbing Contractor Information

Description of Work _____ # Baths _____
Plumbing Contractor's Company Name Juliana Myers Telephone _____
Address _____ Email Address _____
License # _____

Insulation Contractor Information

Insulation Contractor's Company Name & Address Juliana Myers 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

Juliana Myers
Signature of Owner/Contractor/Officer(s) of Corporation

April 10, 2012 Tues
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 _____

Sign w/Title *Juliana Myers* Date *April 10, 12*

32 X 56 4 Bdr Log Home

Plan Box # C-5

Date 3-26-12

Job Name _____

App # 1250028489

Valuation 193,224

SQ Feet 2974

Inspections for SFD/SFA

Crawl X

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 New Tanks

Other _____

Additions / Other

Footing _____

Foundation _____

Slab _____

Mono _____

Open Floor _____

Rough In _____

Insulation _____

Final _____

Application # _____

Harnett County Central Permitting

PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 910-893-2793 - www.harnett.org/permits
Certification of Work Performed By Owner/Contractor
(Individual Trade Application)

Owner (s) of Structure: _____ Phone: _____

Owner (s) Mailing Address: _____

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: _____

PIN # _____ Parcel # _____

Job Cost: _____ Description of Work to be done _____

Mechanical: New Unit With Ductwork ___ New Unit Without Ductwork ___ Gas Piping ___ Other ___

Electrical*: 200 Amp ___ <200 Amp ___ Service Change ___ Service Reconnect ___ Other ___
* For Progress Energy customers we need the premise number

Plumbing: Water/Sewer Tap ___ Number of Baths ___ Water Heater ___

Specific Directions to Job from Lillington:

Subdivision: _____ Lot #: _____

I MIKE MARSH will provide the ELECTRICAL labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 16002, which entitles me to perform such work on the above structure legally. All work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations.

CAROLINA CURRENT
Contractor's Company Name

919-422-0719
Telephone

2420 THURROCK DR APEX NC 27539
Address

CAROLINA CURRENT @GMAIL.COM
Email Address

16002
License #

Structure Owner / Contractor Signature: JIM MYERS Date: 08/22/12

By signing this application you affirm that you have obtained permission from the above listed license holder to purchase permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or sell the listed property for 12 months after completion of the listed work.

***Company name, address, & phone must match information on license**

489

Application # 125 28490

Harnett County Central Permitting

PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 910-893-2793 - www.harnett.org/permits

**Certification of Work Performed By Owner/Contractor
(Individual Trade Application)**

Owner (s) of Structure: James & Julian Meyer Phone: 919-366-8760

Owner (s) Mailing Address: 6492 Phillip church Rd Rutherford N.C.
28376

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: 4220 - Hillman Grove church Rd. Cameron N.C.

PIN # _____ Parcel # _____

Job Cost: 12,500.00 Description of Work to be done Install 3 1/2 - Ten-unit
Down stairs and 2 - Ten - upstairs

Mechanical: New Unit With Ductwork New Unit Without Ductwork _____ Gas Piping _____ Other _____

Electrical*: 200 Amp _____ <200 Amp _____ Service Change _____ Service Reconnect _____ Other _____
* For Progress Energy customers we need the premise number

Plumbing: Water/Sewer Tap _____ Number of Baths _____ Water Heater _____

Specific Directions to Job from Lillington:

Subdivision: _____ Lot #: _____

I Randell Richula will provide the Heat & Air-Conditioning labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 20014, which entitles me to perform such work on the above structure legally. All work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations.

Randell Richula Heat & Air Conditioning
Contractor's Company Name

252-445-4630/252-883-5029
Telephone

462-Will Richardson Rd. Enfield N.C. 27833
Address

Email Address

20014
License #

Structure Owner / Contractor Signature: Randell Richula Date: 9-26-12

By signing this application you affirm that you have obtained permission from the above listed license holder to purchase permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or sell the listed property for 12 months after completion of the listed work.

*Company name, address, & phone must match information on license

Added 1-24-13

Application # 1250028489

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 910-893-2793 - www.harnett.org/permits
Certification of Work Performed By Owner/Contractor
(Individual Trade Application)

Owner (s) of Structure: _____ Phone: _____

Owner (s) Mailing Address: _____

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: _____

PIN # _____ Parcel # _____

Job Cost: _____ Description of Work to be done _____

Mechanical: New Unit With Ductwork ___ New Unit Without Ductwork ___ Gas Piping ___ Other ___

Electrical*: 200 Amp ___ <200 Amp ___ Service Change ___ Service Reconnect ___ Other ___
* For Progress Energy customers we need the premise number

Plumbing: Water/Sewer Tap ___ Number of Baths ___ Water Heater ___

Specific Directions to Job from Lillington:

Subdivision: _____ Lot #: _____

I Abraham Lynch will provide the Plumbing labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 24256, which entitles me to perform such work on the above structure legally. All work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations.

Abe's Plumbing
Contractor's Company Name
19271 Hwy 418 F. Raleigh N.C. 27823
Address
24256
License #

252-813-1824
Telephone

Email Address

Structure Owner / Contractor Signature: Abraham Lynch Date: 1-16-13

By signing this application you affirm that you have obtained permission from the above listed license holder to purchase permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or sell the listed property for 12 months after completion of the listed work.

*Company name, address, & phone must match information on license

Faxed on 6-25-13

Application # 1250024489

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 910-893-2793 - www.harnett.org/permits
Certification of Work Performed By Owner/Contractor
(Individual Trade Application)

Owner (s) of Structure: James Meyers Phone: 910-366-8760

Owner (s) Mailing Address: 4067 Hillman Grove Ch. Rd
Cameron, NC 28326

Land Owner Name (s): James Meyers Phone: 910-366-8760

Construction or Site Address: 4067 Hillman Grove Rd Cameron, NC

PIN # _____ Parcel # _____

Job Cost: 1200.00 Description of Work to be done Propane Gas pipping to gas
logs + generator (appliances installed by General Contractor) + all ready in place

Mechanical: New Unit With Ductwork _____ New Unit Without Ductwork _____ Gas Piping Other _____

Electrical*: 200 Amp _____ <200 Amp _____ Service Change _____ Service Reconnect _____ Other _____
* For Progress Energy customers we need the premise number

Plumbing: Water/Sewer Tap _____ Number of Baths _____ Water Heater _____

Specific Directions to Job from Lillington:
24127 to Cameron/Johnsonville, @ stop sign take Rt, 1st left on
Hillman Grove Rd, 2-3 miles on left

Subdivision: _____ Lot #: _____

I Dave Rouse will provide the Gas pipping labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 22196, which entitles me to
perform such work on the above structure legally. All work shall comply with the State Building Code and all
other applicable State and local laws, ordinances and regulations.

Hunter Oil + Propane
Contractor's Company Name
1703 S. Horner Blvd, Sanford
Address
22196
License #

919-775-5651
Telephone

Email Address

Structure Owner / Contractor Signature: [Signature] Date: 6-25-13

By signing this application you affirm that you have obtained permission from the above listed license holder to
purchase permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or sell
the listed property for 12 months after completion of the listed work.

*Company name, address, & phone must match information on license

Change of Contractor
Plub 6-27-13

Application # 1250028489

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 910-893-2793 - www.harnett.org/permits
Certification of Work Performed By Owner/Contractor
(Individual Trade Application)

Owner (s) of Structure: _____ Phone: _____

Owner (s) Mailing Address: _____

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: _____

PIN # _____ Parcel # _____

Job Cost: _____ Description of Work to be done _____

Mechanical: New Unit With Ductwork ___ New Unit Without Ductwork ___ Gas Piping ___ Other ___

Electrical*: 200 Amp ___ <200 Amp ___ Service Change ___ Service Reconnect ___ Other ___
* For Progress Energy customers we need the premise number

Plumbing: Water/Sewer Tap ___ Number of Baths ___ Water Heater ___

Specific Directions to Job from Lillington:

Subdivision: _____ Lot #: _____

I Mike Simpson will provide the Plumbing labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 12-5-00-28489 which entitles me to perform such work on the above structure legally. All work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations.

Simpson Backhoe
Contractor's Company Name

9102453483
Telephone

288 Eddie M Lane Vass 28394
Address

Email Address

14496
License #

Structure Owner / Contractor Signature: Jane Amy Date: 21 June 13

By signing this application you affirm that you have obtained permission from the above listed license holder to purchase permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or sell the listed property for 12 months after completion of the listed work.

*Company name, address, & phone must match information on license

Our plumber contractor ^{ABE S} is being replaced due to incompetence, inability to follow instructions. He plumbed the solid waste out the wrong side of the house.

27 June 13
James Arp