

09/09/11

4.10.12

Application #

12 50028527

Harnett County Central Permitting
PO Box 85 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 Kenneth Cummings Date 4-10-12
Site Address 630 Griffin RD Lillington NC 27546 Phone 910 984 6765
Directions to job site from Lillington Highway 27 West T.L. Tiger Point
1st Left House on Right
Subdivision Tiger Point Lot 122
Description of Proposed Work New House # of Bedrooms 3
Heated SF 1683 Unheated SF 554 Finished Bonus Room? Crawl Space Slab

General Contractor Information

Building Contractor's Company Name CPDC Const Inc Telephone 910 984 6765
Address 630 Griffin RD Lillington NC 27546 Email Address _____
License # 14656

Cancelled
4.12.12

Electrical Permit Information

Description of Work New House Service Size: 200 Amps TPole: yes/no
JM POPE Elect Telephone 910 890 -3655
Electrical Contractor's Company Name
Address 3483 Cameron Dr. License # 21326
Signature of Officer(s) of Corporation James M. Pope #

Mechanical Permit Information

Description of Work New House
Parolina Comfort Air Telephone 919 332 4320
Mechanical Contractor's Company Name
Address 5212 US 70 W Clayton NC 27520 License # H3-29077
Signature of Officer(s) of Corporation Phillip Powell

Plumbing Permit Information

Description of Work New House # Baths _____
Jamie Johnson Plumbing Telephone 910 984 6277
Plumbing Contractor's Company Name
Address 1490 Clark RD Lillington NC 27546 License # 21649
Signature of Officer(s) of Corporation Jamie Johnson

Insulation Permit Information

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

[Signature]
Signature of Owner/Contractor/Officer(s) of Corporation

4-16-12
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 CEVA CONST INC

Sign w/Title [Signature] Date 4-16-12