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

## Application # 12-500 29285

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: Gary Robinson Homes, LLC	Date: 10   10   10   10   10   10   10   10
Site Address: 65 Valor Circle, Bunnlevel, N	06 28323 Phone 910-1401-5505
Directions to job site from Lillington: Ne 2105 approx	14 miles on lack
THE STATE OF THE S	Trimes on teet
Subdivision: Gwen Oaks	Lot: 30
Description of Proposed Work: New Construction	# of Bedrooms: 3
Heated SF: 3037 Unheated SF: 558 Finished Bonus Room?	X Crawl Space: X Slab:
Gary Robinson Homes	910-977-2562
Building-Contractor's Company Name	Telephone
55/11 Ramsey St, Suite 100, Fay, NC283/1	gary robinson homes a yahoo . con Email address
Signature of Owner/Contractor/Officer(s) of Corporation	67530 unlimited
Electrical Contractor Information	on
	Amps T-Pole: VYes No
Current Technologies Electrical Contractor's Company Name	919-278-8894
	Telephone
4/008 Bourrett Dr. Starz, Raleigh, NC 27609 Address	Empil Address
Address	Email Address
Signature of Owner/Contractor/Officer(s) of Corporation	23963 (L License #
Mechanical/HVAC Contractor Inform	
Description of Work New Construction	
Custom Heating & air	919-820-7063
Mechanical Contractor's Company Name	Telephone
276 Jernigon Rd, Dunn, NC	
Address	Email Address
Mails Shank	04508 H31
Signature of Owner/Contractor/Officer(s) of Corporation  Plumbing Contractor Information	License #
Description of Work New Construction	# Baths
Dell Haire Plumbing Plumbing Contractor's Company Name J	910-429-9939 Talanhara
	Telephone
7612 Documentary Drive, Fay NC 28311 Address, 1	Email Address
Tall Starre	24 204 P-1
Signature of Owner/Contractor/Officer(s) of Corporation	License #
Insulation Contractor Information	
Insulation Contractor's Company Name & Address , LLC	7 401-5505 o

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

	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?YesNo			
	2. Have you hired or intend to hire an individual to superintend and manage construction of the project? YesNo			
	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? YesNo			
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? YesNo				
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 <u>any</u> 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 FERMS - 6 Months to 2 years permit re-issue fee is \$150.00. After 2 years re-issue fee is as per current fee schedule.				
	Day 1 1/12			
	Signature of Owner/Contractor/Officer(s) of Corporation 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.			
	them.  Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance			
	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			
	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			