\* Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address, company name & phone must match Application # 1250029879

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: STANCIL BUILDERS, INC.	Date: 11 7/12
Site Address: 1632 TINGEN Pd. BROADWAY NC	
Directions to job site from Lillington: Hwy 27 West -	PAST WESTERN
HARLETT HIGH School- TURN	LEFT ON TINGEN
Top of HIM ON Right	20 7 514 11120
0 10 - 0 16	Lot: 4
	# of Bedrooms: 3
Description of Proposed Work: New Construction	# of Bedrooms.
Heated SF: 1307 Unheated SF: Finished Bonus Room? General Contractor Information	Crawl Space: Slab;
STANCIL BUILDERS, INC.	919-639-2073
Building Contractor's Company Name	Telephone
466 STANCIL ROAD ANGIER, NC	
Address 27501	Email Address
034533	
Description of Work New Const. Service Size:	2
Description of Work New CONST. Service Size:	200 Amps T-Pole: Yes No 9191 - 427-6952
JI O EICOIRIO	
Flectrical Contractor's Company Name 19655, NC Hwy 210 ANGIOR, NC	Telephone
Address ALGIOZ, HC	Email Address
13075-L	
License #	
Mechanical/HVAC Contractor Inform	ation
Description of Work CONST.	919-329-0686
STEPHENSON HVKC	Telephone
Mechanical Contractor's Company Name 343 Supwash DRIVE GARNER, NC	relephone
Address	Email Address
18644	•
License #	n
Description of Work New Const.	
Description of Work New Const.	_# Baths
Plumbing Contractor's Company Name	Telephone
P.O. Box 1207 AJGLER, NC	
Address 10 C 27501	Email Address
P17735	
License #	in .
TATILLE TIRLIATING TIL	919-661-0999
Insulation Contractor's Company Name & Address	Telephone

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

Questionnaire per G.S. 87-14 Regulations as to Issue of Building Permits (Memo available)	der Owners Exemption. able upon request)	
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?	YesNo	
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 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 of Owner/Contractor/Officer(s) of Corporation  Date		
Affidavit for Worker's Compensation N.C.G.S. 87-14		
/ lilian	• •	
The undersigned applicant being the:		
The undersigned applicant being the:  General Contractor Owner Officer/Agent of the Contra	ctor or Owner	
The undersigned applicant being the:	ctor or Owner	
The undersigned applicant being the:	ctor or Owner n(s) performing the work surance to cover them.	
The undersigned applicant being the:  X General Contractor Owner Officer/Agent of the Contractor Do hereby confirm under penalties of perjury that the person(s), firm(s) or corporation set forth in the permit:  X Has three (3) or more employees and has obtained workers' compensation in Has one (1) or more subcontractors(s) and has obtained workers' compensation them.	ctor or Owner  n(s) performing the work  surance to cover them.  ion insurance to cover	
The undersigned applicant being the:  X General Contractor Owner Officer/Agent of the Contra  Do hereby confirm under penalties of perjury that the person(s), firm(s) or corporation set forth in the permit:  X Has three (3) or more employees and has obtained workers' compensation in  Has one (1) or more subcontractors(s) and has obtained workers' compensation.	ctor or Owner  n(s) performing the work  surance to cover them.  ion insurance to cover	
The undersigned applicant being the:  X General ContractorOwnerOfficer/Agent of the ContractorOwnerOwnerOfficer/Agent of the ContractorOwner	ctor or Owner  n(s) performing the work  surance to cover them.  ion insurance to cover  ompensation insurance	
The undersigned applicant being the:  X General Contractor Owner Officer/Agent of the Contractor Do hereby confirm under penalties of perjury that the person(s), firm(s) or corporation set forth in the permit:  X Has three (3) or more employees and has obtained workers' compensation in them.  Has one (1) or more subcontractors(s) and has obtained workers' compensation.  X Has one (1) or more subcontractors(s) who has their own policy of workers' covering themselves.	ctor or Owner  n(s) performing the work  surance to cover them.  ion insurance to cover  ompensation insurance  Central Permitting  pensation insurance prior  n, firm or corporation	