

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

Harnett County Central Permitting
PO Box 65 Lillington, NC 27548
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Application # 1350032226

Application for Residential Building and Trades Permit

Owner's Name: Wynn Construction, INC Date: 2-24-15
Site Address: 610 Kentucky Derby Ln Phone: 919 603-7965
Directions to job site from Lillington: 27W To Doc's Rd
Left on Doc's Rd. Subdivision on Right

Subdivision: Trotters Ridge Lot: 22
Description of Proposed Work: New Construction SFD # of Bedrooms: 4
Heated SF: 2259 Unheated SF: 796 Finished Bonus Room? N Crawl Space: X Slab:

General Contractor Information
Building Contractor's Company Name: Wynn Construction, INC Telephone: 919 603-7965
Address: 2550 Capital Dr Email Address: edward@wynnconstruction.com
46295 License #

Electrical Contractor Information
Description of Work: New Construction Service Size: 200 Amps T-Pole: Yes No
Electrical Contractor's Company Name: R. A. Jackson Telephone: 919 730-1251
Address: 9261 Raleigh Road Benson, NC 27504 Email Address:
21144 License #

Mechanical/HVAC Contractor Information
Description of Work: New Construction
Certified Heat + Air Telephone: 910 858-0000
Mechanical Contractor's Company Name: 779 Sunset Lake Rd Lumber Bridge, NC 28357
Address: NZ 20012 #3 Class I Email Address:
License #

Plumbing Contractor Information
Description of Work: New Construction # Baths: 2.5
Plumbing Contractor's Company Name: Thornton's Plumbing Telephone:
Address: 3160A Omar Rd Clayton NC Email Address:
22152 License #

Insulation Contractor Information
Insulation Contractor's Company Name & Address: Tatum Insulation Telephone: 919 661-0999

*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? ___ Yes ___ No
2. Have you hired or intend to hire an individual to superintend and manage construction of the project? ___ Yes ___ No
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? ___ Yes ___ No
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? ___ Yes ___ No

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.

J. Edward Averett
Signature of Owner/Contractor/Officer(s) of Corporation

2-24-15
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: *Wyr Construction, Inc.*

Sign w/Title: *J. Edward Averett*

Date: 2-24-15

Designated Lien Agent Investors Title Insurance Company Online: http://www.liensnc.com/ Address: 19 W. Hargett St., Suite 507 / Raleigh, NC 27601 Phone: 888-690-7384 Fax: 913-489-5231 Email: support@liensnc.com	Project Property trotters ridge lot 22 Lot: lot 22 610 kentucky derby lane hillington, NC 27546 Tax Parcel ID: 9597932848000	Print & Post  Contractors: Please post this notice on the Job Site. Suppliers and Subcontractors: Scan this image with your smart phone to view this filing. You can then file a Notice to Lien Agent for this project.
Property Type 1-2 Family Dwelling	Pre-Permit Workers none	
Owner Information wynn construction inc 2550 capitol dr., suite 105 creedmoor, NC 27522 United States Email: nancy@wynnconstruct.com Phone: 919-528-1347		

Technical Support Hotline: (888) 690-7384