

09/09/11

Application #

35715

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 JEREMY HAMILTON Date 3/19/15
Site Address 194 Guy Rd Angier NC 27501 Phone 248-425-7090
Directions to job site from Lillington 210 TO ANGIER - RT ON Hwy 55 E - go to SHERRILL WRECKER; TURN LEFT ON Guy Rd - 1/8 mi on RT House w/CHAIN LINK FENCE.
Subdivision _____ Lot _____
Description of Proposed Work INSTALL T-pole FOR CONST. # of Bedrooms 3
Heated SF 1600± Unheated SF _____ Finished Bonus Room? _____ Crawl Space Slab _____
General Contractor Information TIGHT

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

Electrical Contractor Information

Description of Work INSTALL T-pole Service Size 200 Amps T-Pole Yes No Blad
CHURCH'S ELECTRIC Co., Inc Telephone 919-868-9352 mobile
Electrical Contractor's Company Name 5392 CHRISTIAN LIGHT Rd FOGY VALENTIA 27526 Email Address robbie_church@yahoo.com
Address 21305-4
License # _____

Mechanical/HVAC Contractor Information

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

Plumbing Contractor Information

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

Insulation Contractor 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

Robert A Church
Signature of Owner/Contractor/Officer(s) of Corporation

3/19/15
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 CHURCH'S ELECTRIC CO INC

Sign w/Title *Robert A Church* Date 3/19/15

HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

LILLINGTON, NC 27546

For Inspections Call: (910) 893-7525 Fax: (910) 893-2793

Bldg Insp scheduled before 2pm available next business day.

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Application Number . . . . . 15-50035715           Date  3/19/15
Property Address . . . . . 91748 TECH 1
PARCEL NUMBER . . . . . - - - - -
Tenant nbr, name . . . . . REF 15-5-35714
Application type description  CP TEMPORARY LAND USE
Subdivision Name . . . . .
Property Zoning . . . . . UNZONED

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Owner

Contractor

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HAMILTON ELIZABETH AND JEREMY
194 GUY RD
ANGIER NC 27501
(248) 425-7090

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OWNER

Applicant

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HAMILTON ELIZABETH AND JEREMY
194 GUY RD
ANGIER NC 27501
(248) 425-7090

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--- Structure Information 000 000 39FT TRAVEL TRAILER
Flood Zone . . . . . FLOOD ZONE X
Other struct info . . . . . # BEDROOMS 1.00
PROPOSED USE TRAVEL TRAILER
SEPTIC - EXISTING? YES
WATER SUPPLY COUNTY

```

Permit TEMPORARY ELECTRICAL PERMIT

Additional desc

Phone Access Code 1078013

Issue Date 3/19/15

Valuation 0

Expiration Date 3/18/16

Special Notes and Comments

T/S: 03/19/2015 10:06 AM DJOHNSON --

194 GUY RD

CORNER OF GUY RD AND LANGDON RD

XX

PERMIT INCLUDES BLDG, ELEC, MECH, PLUMB

INSULATION AND LAND USE.

XX

Work must conform and comply with the
STATE BUILDING CODE and all other State
and local laws, ordinances & regulations

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Application description . . .	CP TEMPORARY LAND USE		
Subdivision Name			
Property Zoning	UNZONED		

Permit TEMPORARY ELECTRICAL PERMIT

Additional desc . .

Phone Access Code . 1078013

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
999	207	E207	R*ELEC TEMP SERVICE POLE	_____	___/___/___
999	267	E267	C*ELEC TEMP SERVICE POLE	_____	___/___/___

HARNETT COUNTY CASH RECEIPTS

*** CUSTOMER RECEIPT ***

Oper: DIOHNSON Type: CP Drawer: 1
Date: 3/20/15 54 Receipt no: 277183

Year	Number	Amount
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2015	50035715	
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91748 TECH 1

LILLINGTON, NC 27546

RI RP - PERMIT FEES

Z2	CRED CRD SURCHG - NO APPL	\$50.00
	1.00	\$2.00

CHURCH'S ELECTRIC CO INC

Tender detail

CP CREDIT CARD

Total tendered

Total payment

Trans date: 3/20/15 Time: 10:30:33

** THANK YOU FOR YOUR PAYMENT **

\$62.00

\$62.00

\$62.00