

Application for Building and Trade Permit

Owner's Name: Kenneth Burkens Date: 8-25-17
Address: 35 Swan Lane Angier NC Phone: 919-427-4628
Directions to job site: Hwy 210 N to Angier - Right on Hwy 55 - Left on Old Stage Rd. - Right on Langdon Rd - Left on Popes Lake Rd - Left on Swan Lane.

Subdivision: Pepe Lake Lot: 889

Construction Type: (Please Check)
 New
 Renovation
 Addition
 Moved House
 Other
Building Use: (Please Check)
 Residential
 Modular
 Commercial
 Multi-Family

Description of Proposed Work: Single Family
Total Project Cost: 275,000

Building Permit Information

Heated SF 2898 Crawl Space ()
Unheated SF 864 Slab ()
Keith Bullark Builders Inc
Building Contractor's Company Name
72 Overlook Ct Angier NC 27501
Address
[Signature]
Signature of Officer(s) of Corporation
Building Construction Cost \$ 275,000
Acres Disturbed .5 Stories 1
919-427-4628
Telephone
47504
License #

Electrical Permit Information

Description of Work New Electrical Cost \$ _____
TS Pole: Yes () No () Underground () Overhead ()
Permanent Service: Underground () Overhead () Service Size: 200 Amps
Dean Electric, LLC
Electrical Contractor's Company Name
2793 Baptist Grove Rd. Fuquay Varina
Address
Austin Dean by Keith Bullark
Signature of Officer(s) of Corporation
919-669-0063
Telephone
29839-L
License #

Mechanical Permit Information

Description of Work New
Number of Units 1 Type System HP Mechanical Cost \$ _____
Carolina Comfort Air, Inc.
Mechanical Contractor's Company Name
5717 US Hwy 70 BJS Clayton, NC 27530
Address
JP Moore by Keith Bullark
Signature of Officer(s) of Corporation
Telephone H29077
License #

Plumbing Permit Information

Description of Work New
Number of Baths 2.5 Plumbing Cost \$ _____
L.R. Glover Plumbing, Inc.
Plumbing Contractor's Company Name
PO Box 764 Benson, NC 27504
Address
L.R. Glover by Keith Bullark
Signature of Officer(s) of Corporation
919-894-5877
Telephone
207958
License #

Insulation Permit Information

Residential () Other () Not Required ()
Insulating Inc.
Insulation Contractor's Company Name
Salish, NC
Address
919-772-9000
Telephone

**Affidavit for Worker's Compensation
N.C.G.S. 87-14**

The undersigned applicant for Building Permit # _____ being the:

- 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/have three (3) or more employees and has/have obtained workers' compensation insurance to cover them.

_____ Has/have one (1) or more subcontractors(s) and has/have obtained workers' compensation insurance to cover them.

_____ Has/have one (1) or more subcontractors(s) who has/have their own policy of workers' compensation insurance covering themselves.

_____ Has/have not 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.

Firm Name: Keith Bullock Builders Inc.

By/Title: [Signature]

Date: 8-25-17

Sprinkler System Information

<u>Sprinkler Contractor's Company Name</u>	<u>Telephone</u>
<u>Contact Person</u>	
<u>Address</u>	<u>License #</u>
<u>Signature of Officer(s) of Corporation</u>	


Fire Alarm System Information

<u>Fire Alarm Contractor's Company Name</u>	<u>Telephone</u>
<u>Contact Person</u>	
<u>Address</u>	<u>License #</u>
<u>Signature of Officer(s) of Corporation</u>	

Driveway Access

NC Department of Transportation Driveway Access/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 if any changes occur including listed contractors, site plan, 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 Division of any and all changes.


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

8-25-17
Date