Appl	cation	#
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Harnett County Central Permitt PO Box 65 Lilington NC 27546	ing
Each section below to be fulled out 910 893 7526 Fax 910 893 2793 www harnett by whomever performing work	org/permits
Must be owner or licensed contractor Address company Application for Residential Building and	Trades Permit
name & phone must match	TIENDS FOILT
Owners Name Wade wrnky Homes	Date 112017
Site Address 385 COHULAKE DR.	Phone <u><u><u>A</u>1<u>Q</u>.<u>Q</u><u>A</u>5.<u>5</u><u>4</u>5<u>U</u></u></u>
Directions to job site from Lillington <u>HLad</u> W. ON E. Frank	
Take US4215. to USUR Campbell AL	
<u>Continue on lesse campbell to snows</u>	
Subdivision COTTLStone	Lot
Description of Proposed Work SFR	# of Bedrooms <u>3</u>
Heated SF <u>2410</u> Unheated SF <u>403</u> Finished Bonus Room? General Contractor Information	Crawl Space Slab X
WIH.ILC	334-282-3406
Building Contractor s Company Name	Telephone
3300 Baklle ground AVE SIEZ30 Grounsbord	Email Address
Address 27410	Email Address
L cense #	
Description of Work <u>ELLIFICAL</u> <u>Electrical Contractor Informat</u>	Amps T-Pole Yes No
(L)=3	G19.5507341
Electrical Contractor s Company Name	Telephone
Clayton	Email Aldress
Address	Email Address
License #	
Mechanical/HVAC Contractor Info	mation
Description of Work Hlading & Air	336-794-9730
COMCORLAN Mechanical Contractor s Company Name	Telephone
POBOX 527 CLEMMONS NC270R	Kayaushr@autaok_com Email Address
Address	Email Address
<u> </u>	
Plumbing Contractor Informat	<u>ion</u>
Description of Work <u>Plumbing Tustall</u>	# Baths
Plumbing Contractor's Company Name	<u> </u>
Blue A VINSon RD. Clayton 27520	
Address	Email Address Com
22.152	
License # Insulation Contractor Informat	lon
Builders Thsulation	<u>912.188.9806</u>
Insulation Contractor s Company Name & Address	Telephone

*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	
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 consect months following completion of construction and do you understand that you do not do so, it creates the presumption under law that you frauduler secured the permit?	if	

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 <u>I affirm that I have obtained all listed contractors</u> <u>permission to obtain these permits</u> 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.

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.

Tara Rabitz	10/5/2017
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.
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:
Sign w/Title: Date: Date:

RESIDENTIAL BUILDING APPLICATION

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04/11