* 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 27546 910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Application # <u>EKESIGO 7.002</u> |

HRES 1902.001 0

Application for Residential Building and	Trades Permit 1851902.000
Owner's Name: Timothy Walter Struct	Date:
Site Address: 2104 Ebenzzer Ch. Rd Coats 1	WC 27541 Phone: 919-820-0128
Directions to job site from Lillington: 27 40 Coats	127 toward Benson/
^	on Ebeneza Ch. Rd.
	s on right
	Lot:/
Description of Proposed Work: Interior Renougtion	# of Bedrooms:
Heated SF: 1,000 Unheated SF: Finished Bonus Room? General Contractor Informat	Crawl Space: Slab:
SECILL	919-805-0664
Building Contractor's Company Name	Telephone
flo Box 157 Bries Creek, NC 2-7506 Address	breffs@si-nc.com
	Email Address
1/100 19- 100	62649
Signature of Owner/Contractor/Officer(s) of Corporation Electrical Contractor Informa	License #
Description of Work Service Siz	e:Amps T-Pole:YesNo
Young's Electric, Inc	919-868-7298
Electrical Contractor's Company Name	Telephone
Address 1 1 Angier, NC 27501	Lenvel @ Youngs electric. Com Email Address!
Loud Ward	4504 - U
Signature of Owner/Qontractor/Officer(s) of Corporation	License #
Mechanical/HVAC Contractor Info	<u>ormation</u>
Description of Work	
Young's Electric Fine	919-868-7298
Mechanical Contractor's Company Name	Telephone
10 Bax 398 Angier, NC 7-7501	Lenvel Q young selectric. 10 m
Address	Email Address ' ' 4469
Signature of Owner/Contractor/Officer(s) of Corporation	License #
Plumbing Contractor Informa	
Description of Work	# Baths
Yang's Floresc, From	919-868-7298
Plumbing Contractor's Company Name	Telephone
10 Bax 398 Anjer, NC 27501	lenvel @ youngs electric.com
Address Way W	Email Address
Signature of Owner/Contractor/Officer(s) of Corporation Insulation Contractor Informa	License #
SEC 110 A B 150 B C 1 A	916 955 201

27506

Insulation Contractor's Company Name & Address

Telephone

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)
Do you own the land on which this building will be constructed? YesNo No
Have you hired or intend to hire an individual to superintend and manage construction of the project? No
3. Do you intend to directly control & supervise construction activities?
4. Do you intend to schedule, contract, or directly pay for all phases of construction work to be done?
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 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. 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
Signature of Owner/Contractor/Officer(s) of Corporation Date Affidavit for Worker's Compensation N.C.G.S. 87-14
Signature of Owner/Contractor/Officer(s) of Corporation Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:
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
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:
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
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the: General Contractor Owner 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
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the: General Contractor Owner 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.
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