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

Application #

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Owner's Name: Huth Michael Ray	<u>lential Bullding and Trac</u> (Date: 12 - 1 - 08
	 Phone: _	
Directions to job site from Lillington:	-	
Subdivision:	L	_ot:
Description of Proposed Work:		#Bedrooms:
leated SF Fini		Crawl Space () Sla
As Owner	Contractor Information	
uilding Contractor's Company Name	Telephone	
ddress Celes Ino Sabundo Jefec	A Must sign & fill out	License #
Signature of Owner/Contractor/Officer(s) of Corp	oration	Jacona paga
Rescription of Work	al Permit Information Service Size:	Amps TPole: yes/no
lectrical Contractor's Company Name	Telephone	
		/
ddress		License #
ignature of Office(s) of Corporation	. /	
	HVAC Permit Information	<u>n</u>
Pescription of Work		-
lechanical Contractor's Company Name	Telephon	ne
ddress		License #
signature of Officer(s) of Corporation		
	g Permit Information	
Pescription of Work	#	Baths
lumbing Contractor's Company Name	Telephon	e
ddress		License #
duross		LIUGHISC #
ignature of Officer(s) of Corporation		
<u>Insulation</u>	n Permit Information	
psulation Contractor's Company Name & Addres		Telephone
ibulation Contractor's Company Maine & Audites	າວ	i eréhinine

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?
2. Have you hired or intend to hire an individual to superintend and manage construction of the
project?yesno
2. De very intend to directly central 2 augustion continuition?
3. Do you intend to directly control & supervise construction activities? yes no
4. Do you intend to schedule, contract, of 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
Thereby 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.
C1-1500 Accord FER 17-9-68
Cele/Jano Sebundo Efeda 12-9-68 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:
The undersigned applicant being the:
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
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:
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
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
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.
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