Application # 10 5 10 24 511

* 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 for Residential Building and Trades Permit

Owner's Name: PINE GROVE DEVELOPMENT CORP.	Date:	
Site Address: 226 Cold Finch Circle Opmeron NC 28326 Phone: 919-499-1841		
Directions to job site from Lillington: Hwy 27W - luston Hwy 24 - Right		
Onto Red Birl Drine - left Onto Coaldfinch - io bis		
located at end of childeson on	-iaht -	
Subdivision: NATURE'S CROSSROADS	Lot: 40	
Description of Proposed Work: CONST. BRICK&CONCRETE 8'X16' MASONRY STO # of Bedrooms: N/A		
Heated SF: N/P Unheated SF: N/P Finished Bonus Room? N/P Crawl Space: N/P Slab: N/P		
General Contractor Information		
STOVALL & SONS CONSTRUCTION	919-499-7861	
Building Contractor's Company Name	Telephone	
101 WIMBLEDON DRIVE PINEHURST NC	· · · · · · · · · · · · · · · · · · ·	
Address	Email Address	
Signature of Owner/Contractor/Officer(s) of Corporation	29186 License #	
Electrical Contractor Informatic		
Description of Work N/A Service Size:		
N/A		
Electrical Contractor's Company Name	Telephone	
N/A		
Address	Email Address	
Signature of Owner/Contractor/Officer(s) of Corporation	License #	
Mechanical/HVAC Contractor Inform	nation	
Description of Work <u>N/A</u>		
N/A		
Mechanical Contractor's Company Name	Telephone	
N/A		
Address	Email Address	
Signature of Owner/Contractor/Officer(s) of Corporation	License #	
Plumbing Contractor Informatic		
Description of Work <u>N/A</u>	# Baths	
N/A		
Plumbing Contractor's Company Name	Telephone	
N/A		
Address	Email Address	
Signature of Owner/Contractor/Officer(s) of Corporation	License #	
Insulation Contractor Information		
N/A		
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?	✓ Yes No	
2. 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?	✓ YesNo	
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?		

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.

\$ gnature of Owner/Contractor/Officer(s) of Corporation

116/10

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.

 $\underline{\checkmark}$ 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: Pine Grove Dev. Corp	
Sign w/Title: Amonta Stavall Const. Man	Date: <u>(0 16 10</u>