## City of Sanford / County of Lee / Town of Broadway BUILDING PERMIT APPLICATION

115 Chatham St., Suite 1, Sanford, NC 27330

| Affidavit of Workers' Compensation Coverage (N.C.G.S. \$87-14)   |  |
|--|--|
|  | ed applicant for Building Permit Number being the:  Contractor  Owner  Officer/Agent of the Contractor or Owner  |
| the permit:  | m under penalties of perjury that the person(s), firm(s), or corporation(s) performing the work set forth in has/have three (3) or more employees and have obtained workers' compensation insurance to cover them, |
|  | $\square$ has/have one or more subcontractor(s) and have obtained workers' compensation insurance covering them,   |
|  | $\square$ has/have one or more subcontractor(s) who has/have their own policy of workers' compensation insurance covering themselves,  |
|  | $\square$ 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 Inspection Department issuing the permit may require certificates of coverage of workers' 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. |  |
| Signature of Qualifier Required  |  |
| Name of Company (if applicable) Chamberlain Homes LLC  |  |
| Print Name: Frank Barbee   |  |
| Signature:   | Frankli P. Barka Jr.   |
| Date:  | 5.28.25  |
|  |  |
|  |  |