



Application # BRES-1807-009

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

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

Application for Residential Building and Trades Permit

Owner's Name: UNITED-EQUITABLE PROPERTIES Date: 7-16-18
Site Address: 366 S McTaleg St Combs NC Phone: 919-422-5682
Subdivision: _____ Lot: _____
Description of Proposed Work: Interior Upgrade All Trades

General Contractor Information

Glenn Jones Inc 919-291-3475
Building Contractor's Company Name Telephone
PO Box 534 Ferguson Station NC baik61442@gmail.com
Address 27526 Email Address
43503

Electrical Contractor Information

Description of Work Complete upgrade Service Size: 200 Amps T-Pole: Yes No
JMSMA Electric 919-422-5898
Electrical Contractor's Company Name Telephone
1117 Shannondale Dr Raley NC
Address 27603 Email Address
23304-L
License #

Mechanical/HVAC Contractor Information

Description of Work Complete Upgrade New
SC Heat & AIR 919-369-2657
Mechanical Contractor's Company Name Telephone
1539 WADE STEPHENSON
Address HOLYSPIRINGS NC Email Address
H312655 27540
License #

Plumbing Contractor Information

Description of Work Complete Upgrade New # Baths 2
RONALD Lindsay Plumbing 910-658-7957
Plumbing Contractor's Company Name Telephone
464 Parkhill Rd Benson NC
Address 27504 Email Address
29636
License #

Insulation Contractor Information

Insulation Inc L# 21972 919-772-9000
Insulation Contractor's Company Name & Address Telephone

***NOTE: General Contractor / owner must fill out and sign the second page of this application.**

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 **by signing below I have obtained all subcontractors permission to obtain these permits** and if **any** 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

7-16-18
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.

Sign w/Title: GC OWNER  Date: 7-16-18



TOWN OF COATS

ZONING PERMIT APPLICATION

NOTE: Attach a site plan that includes property lines (front, side, and rear), location of proposed structures (including driveways, decks, etc.), and existing structures. This plan should be drawn to scale. This permit along with plans shall be submitted to the Harnett County Building Inspections Department.

Permit No.: 7-13-18-1 Date: 7/13/18 Fee: \$50.00

Parcel ID*: 07069015250007 Area Zoned As: R20

APPLICANT:

PROPERTY OWNER:

Name (Print) Glen Jones LLC
 Address PO Box 5347
 City, State Fayetteville, NC
 Zip Code 27526
 Phone # 919-291-3475

Name UEP
 Address 6735 Benton Hardacre Rd
 City, State Benson
 Zip Code 27509
 Phone # _____

Location of Property: IN-TOWN ETJ _____ ETJ (contiguous) _____

Present Use of Property: Dwelling

PROPOSED USE OF PROPERTY:

- Single Family Dwelling: # Rooms: 4 # Bedrooms: 2 Square Feet: 840
- Multi Family Dwelling: # of Units: _____ #Bedrooms (per unit): _____ Square Feet (per unit) _____
- Mobile Home (single lot): Single wide: _____ Double Wide: _____
- Mobile Home Park: Section 16, Zoning Ordinance must apply
- Business: Total # of employees per day _____ Type of business _____
- Others (specify): _____

Existing structure: Renovate: Addition: _____ Demolish: _____

WATER AND SEWER SUPPLY:

Water: Private Public Proposed Existing
 Sewer: Private Public Proposed Existing

Applicant: I certify that all of the information presented in this application is true, complete, and accurate to the best of my knowledge. False information is grounds for rejection of the application.

Signature: [Signature] Date: 7-13-18

ZONING ADMINISTRATOR USE ONLY

Notes: Renovation of interior

Approved: Denied:

Zoning Administrator: Rock Holcomb Date: 7/13/18

THIS PERMIT IS VALID FOR 12 MONTHS

HARNETT COUNTY CASH RECEIPTS

*** CUSTOMER RECEIPT ***

Oper: LLUCAS Type: CP Drawer: 1

Date: 7/16/18 85 Receipt no: 20024

Description	Quantity	Amount
BPPC	BUILDING PERMITS CC	
	1.00	\$400.00
INTERIOR RENO-COATS		

GLENN JONES INC

Tender detail

CP CREDIT CARD \$400.00

Total tendered \$400.00

Total payment \$400.00

Trans date: 7/16/18 Time: 11:02:21

** THANK YOU FOR YOUR PAYMENT **

** THANK YOU FOR YOUR PAYMENT **

Trans date: 7/16/18 Time: 11:55:51

Total payment \$400.00
Total tendered \$400.00
CP CREDIT CARD \$400.00
Tender detail

GLENN JONES INC

INTERIOR RENO-COATS
1.00
BUILDING PERMITS CC
Description Quantity Amount
\$400.00

Date: 7/16/18 85 Receipt no: 50954
Opert: LUCAS Type: CP Drawer: 1

*** CUSTOMER RECEIPT ***

HARNETT COUNTY CASH RECEIPTS