

09/09/11

Application #

BRES1807-0048

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.

Application for Residential Building and Trades Permit

Owner's Name GARY MORRISON & Kelli Date 7-31-18

Site Address 678 RAVEN ROCK RD. Phone _____

Directions to job site from Lillington 421 SOUTH, TURN RIGHT ON RAVEN ROCK RD.

PROPERTY ON RIGHT
0621-30-8722000 / 130021 0001 PA-20R

Subdivision _____ Lot _____

Description of Proposed Work COMPLETE REPAIR FROM STORM DAMAGE # of Bedrooms 3

Heated SF 1633 Unheated SF _____ Finished Bonus Room? _____ Crawl Space Slab _____

General Contractor Information

GUNTER CONSTRUCTION CO.
Building Contractor's Company Name

919-353-2283 - Cary
Telephone

5811 COX MILL RD. SANFORD, NC 27332
Address

gunter.const@outlook.com
Email Address

62231
License #

Electrical Contractor Information

Description of Work REWIRE HOME Service Size 200 Amps T-Pole Yes No

HARMON'S ELECTRIC
Electrical Contractor's Company Name

919-498-4321
Telephone

3164 POPULAR SPRINGS CHURCH RD
Address

harmonshomeimprovement@yahoo.com
Email Address

V-32567
License #

Mechanical/HVAC Contractor Information

Description of Work REMOVE + REPLACE 3TON HEAT PUMP

KING HEATING AND AIR
Mechanical Contractor's Company Name

919 776-5118
Telephone

300 WILSON RD SANFORD
Address

kinghgair1895@gmail.com
Email Address

28280 ← ?
License #

Plumbing Contractor Information

Description of Work _____ # Baths _____

Plumbing Contractor's Company Name _____

Telephone _____

Address _____

Email Address _____

License # _____

Insulation Contractor Information

TRI-CITY INSULATION
Insulation Contractor's Company Name & Address

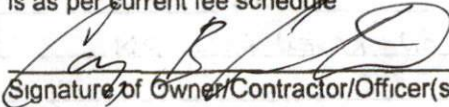
910-486-8855
Telephone

334 E. MOUNTAIN DR FAYETTEVILLE, NC 28306

*NOTE General Contractor 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

7-31-18
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

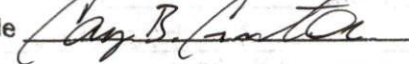
Has one (1) or more subcontractors(s) and has obtained workers compensation insurance to cover them

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

Company or Name GUNTER CONSTRUCTION CO.

Sign w/Title  GC & OWNER Date 7-31-18