

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

Application # BRES 1611.0010

ERES 1811.0011

Appermits

1 CES 1811.0003

ades Permit

MRES 1811.0011

Application for Residential Building and Trades Permit

Owner's Name: Jan Rode	Date: 11/05/2018
Owner's Name. 245 Atkins Place	Phone: 757-880-2994
Subdivision:	Lot:
Description of Proposed Work: Inspect a sunroom that was n	never permitted
General Contractor In	nformation
Hunt Construction Co. Inc	919-539-3775
Building Contractor's Company Name	Telephone
260 Old Cabin Ct. Angier NC 27501	guitarheadhunt@msn.com
Address	Email Address
66505	
License #	Later was hit to m
Description of WorkSer	information Orice Size: 200 Amps T-Pole: Tyes X No
Electric expression	919-524-1627
Electrical Contractor's Company Name	Telephone
924 Barnford Mill Rd Wake Forest NC 27587	· Tolophono
Address	Email Address
25580sfd	
License #	
Mechanical/HVAC Contract	ctor Information
Description of Work Added 2 duct lines to addition	
Stephenson's Heating and Air	919-329-0686
Mechanical Contractor's Company Name	
343 Shipwash Dr. Gamer NC	7,40
Address	Email Address
License #	
Plumbing Contractor	<u>Information</u>
Description of Work	# Baths
•	
Plumbing Contractor's Company Name	Telephone
Address	Email Address
	U
License #	.\()
Insulation Contractor	· · · · · · · · · · · · · · · · ·
tatum 2 519 old drug store rd. dr gamer	919-661-0999
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

11-5-2018 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: Date: 11-5-18		