11/38/18



Application # BBES 18 11 -

Harnett County Central Permitting

PO Box 65 Lillington, NC 27546 910-893-7525 Fax 910-893-2793 www.harnett.org/permits 0046

* 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

on on ilcense.	
Owner's Name: Hannigan, MSGT Benjamin	Date: 11/28/18
Site Address: 3214 Carolina Way, Sanford No	Phone: 919-842-9066
Subdivision: <u>Carolina Lakes</u>	Lot:
Description of Proposed Work: Plumbing, Electrical, HVF	AC, insulation
General Contractor Information	
Showcase Restoration Building Contractor's Company Name	910 - 864 - 0911 Telephone
5500 Yadkin Rd, Fayetteville NC.	PS7 @ 9115 howcase.com Email Address
60767 License #	
Electrical Contractor Informatio	<u>n</u>
Description of Work Culbert Son Flectical Service Size:	
Electrical Contractor's Company Name	910 - 723 ~ 3293 Telephone
222 010 Gate Rd Fagetheville	NC Curbertson Electric (8 Graft Email Address
716627 - L License #	
Mechanical/HVAC Contractor Inform	nation
Description of Work Replacing duct Work	
Bell COW	910-748-6020
Mechanical Contractor's Company Name	Telephone
1328 Spona Rd Fayetteville PC	Email Address bell con hvac. com
Plumbing Contractor Information	<u>in</u>
Description of Work Replace bathtubs, toilets, Pta	6# Baths 3
On Time Plumbing Plumbing Contractor's Company Name	910-884-8702 Telephone
220 Eastwood Are Fayetteville	Ontime 3014 @ yahao. com Email Address
Address	Email Address
Insulation Contractor Information	<u>on</u>
The fill later the 294 times March to	A
Tri City Insulation 334 East Mountain De Insulation Contractor's Company Name & Address Fayetteville No	(910 - 486 - 8855 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 Date

emanda emanda ekanologi ja 🕶 i
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:
The unique 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: John Dofte Date: 11/28/18

the state of the state of the state of the state of