



Authorized by Brad Sell the app without Asbestos.

Application # BRES19 01-0017

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: Dale and Cori Backus Date: 12-31-2018
Site Address: 255 Shue Rd Broadway, NC 27505 Phone: 919-280-3550
Subdivision: _____ Lot: _____
Description of Proposed Work: DEMO

General Contractor Information

Patton General Contracting 919-280-3550
Building Contractor's Company Name Telephone
115 Arlington Ridge Cary, NC 27513 joejtata@gmail.com
Address Email Address
67792 Building
License #

Electrical Contractor Information

Description of Work Temporary Service Pole Service Size: 100 Amps T-Pole: Yes No
Salz and Miller electrical contractors 919-625-0185
Electrical Contractor's Company Name Telephone
810 Bryn Mawr Apex, NC 27502 joejtata@gmail.com
Address Email Address
27598-U
License #

Mechanical/HVAC Contractor Information

Description of Work _____
Mechanical Contractor's Company Name Telephone
Address Email Address
License #

Plumbing Contractor Information

Description of Work _____ # Baths _____
Plumbing Contractor's Company Name Telephone
Address Email Address
License #


Insulation Contractor Information

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

12-31-2018

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: 12-31-2018

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**Certification of Work Performed By Owner/Contractor
(Individual Trade Application)**

Owner (s) of Structure: DALE + CORI BACKUS Phone: 919-2803550

Owner (s) Mailing Address: 255 SHUE RD BROADWAY NC 27505

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: _____

PIN # _____ Parcel # _____

Job Cost: \$5000 Description of Work to be done DEMO SITEET-ROCK - INSULATION SIDING. FLOORING ASBESTOS

Mechanical: New Unit With Ductwork ___ New Unit Without Ductwork ___ Gas Piping ___ Other ___

Electrical*: 200 Amp ___ <200 Amp ___ Service Change ___ Service Reconnect ___ Other ___

* For Progress Energy customers we need the premise number

Plumbing: Water/Sewer Tap ___ Number of Baths ___ Water Heater ___

Specific Directions to Job from Lillington:

Subdivision: _____ Lot #: _____

I JOE TATA will provide the ELECTRICAL labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 67792, which entitles me to perform such work on the above structure legally. All work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations.

PATTON GENERAL CONTRACTING
Contractor's Company Name
115 ARLINGTON RIDGE RD CARY NC
Address 27513

919-2803550
Telephone
JOETATA@GMAIL.COM
Email Address

License # _____

Structure Owner / Contractor Signature: [Signature] Date: 1-9-19

By signing this application you affirm that you have obtained permission from the above listed license holder to purchase permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or sell the listed property for 12 months after completion of the listed work.

***Company name, address, & phone must match information on license**