

09/09/11

Application #

Hernett County Central Permitting
PO Box 85 Lillington NC 27546
910 893 7825 Fax 910 893 2793 www.hernett.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 Bryant Lockamy Date 3.11.19
5-14-18
Site Address _____ Phone 919-524-3354
Directions to job site from Lillington _____

Subdivision _____ Lot _____
Description of Proposed Work _____ # of Bedrooms _____
Heated SF _____ Unheated SF _____ Finished Bonus Room? _____ Crawl Space _____ Slab _____

General Contractor Information

Southern Touch Homes, LLC 919-639-4672
Building Contractor's Company Name Telephone
PO Box 2135 Angier, NC 27501 SouthernTouchHomesLLC@gmail.com
Address Email Address
78270
License #

Electrical Contractor Information

Description of Work _____ Service Size 200 Amps T-Pole Yes No
SNO Electric 919-427-6952
Electrical Contractor's Company Name Telephone
19655 NC Hwy 210 Angier, NC 27501 N/A
Address Email Address
13075
License #

Mechanical/HVAC Contractor Information

Description of Work _____
Mainstream Mechanical HVAC 919-934-9339
Mechanical Contractor's Company Name Telephone
412 Lazy Branch Drive, Benson, NC 27504 mainstreammechanical@gmail.com
Address Email Address
31005
License #

Plumbing Contractor Information

Description of Work _____ # Baths _____
Double J Plumbing 910-814-7705
Plumbing Contractor's Company Name Telephone
1614 Byrd Road, Bunker, NC 28323 Jamie.johnson.plumbing@gmail.com
Address Email Address
21649
License #

Insulation Contractor Information

Tri-City Insulation 910-486-8855
Insulation Contractor's Company Name & Address Telephone
334 East Mantle Drive License # 41733
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 Hamett 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 Hamett County Central Permitting Department of any and all changes

EXPIRED PERMIT FEES - 8 Months to 2 years permit re-issuue fee is \$160 00 After 2 years re-issuue fee is as per current fee schedule

Signature Bryant L. Lukamy
 Signature of Owner/Contractor/Officer(s) of Corporation

~~5/14/18~~
 Date 3.11.19

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 Southern Touch Homes, LLC

Sign w/Title Bryant L. Lukamy (Owner) Date ~~5/14/18~~

3.11.19