



Application # BRES1905-0032

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: MATHEW & LACENE VAUGHN Date: 5-7-19
Site Address: 66 MELS MEADOW CT. Phone: 919 810 2023
Subdivision: _____ Lot: _____
Description of Proposed Work: FEMBIER 2ND STORY

General Contractor Information

Bobby Oliver CONSTRUCTION 919 795-8872
Building Contractor's Company Name Telephone
721 VALLEYWATER ST., FV, NC bobbyoliverconstruction
Address Email Address @gmail.com
25664
License #

Electrical Contractor Information

Description of Work RELOCATE BREAKER BOX Service Size: 200 Amps T-Pole: Yes No
REWIRE UPSTAIRS 919 271 4929
Electrical Contractor's Company Name Telephone
A+A ELECTRICAL, DURHAM, NC aa.williams@electric@gmail.com
Address Email Address
21128-L

Mechanical/HVAC Contractor Information

Description of Work RELOCATE SUPPLY TO AREAS
FIVE STAR MECHANICAL
Mechanical Contractor's Company Name Telephone
KALEIGH 3816 CASHW DR.
Address Email Address
30361 Raleigh N.C. 27616
License #

Need mech Info

Plumbing Contractor Information

Description of Work RELOCATE BATH # Baths 1
BASIC PLUMBING 919 662 1082
Plumbing Contractor's Company Name Telephone
GARNER, NC
Address Email Address
5100
License #

Insulation Contractor Information

INSULATING INCORPORATED, GARNER
Insulation Contractor's Company Name & Address Telephone

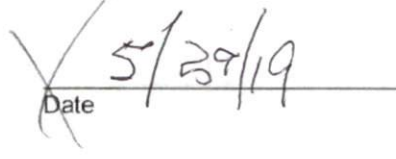
*NOTE: General Contractor / owner must fill out and sign the second page of this application.

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



Date

Affidavit for Worker's Compensation N.C.G.S. 87-14

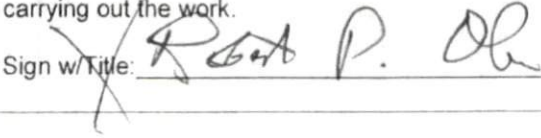
The undersigned applicant being the:


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: 5/9/19