

Application # BRESIGOS - OOL

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

and the state of t	
Owner's Name: Nancy Keith Cameron	Date: <u>5/1/2 of</u> 9
Site Address: 10 Address PIN 9586-62-2268.00	
Subdivision: By Halo Lk	Lot: = 3 Map 12 Buffelle
Description of Proposed Work:	
General Contractor Information	n
DEL Builders Inc	919-776-4923
Building Contractor's Company Name	
PO Box 994 Janford NC 27331	davide Sandspur, WS
Address	Email Address
77556	
License # Electrical Contractor Information	on.
Description of Work House Move Service Size:	200 Amps T-Pole: Yes No
Parker Power Systems	
Electrical Contractor's Company Name	Telephone
5111 Tyndal Dr Sanford NC 27330	Parkepower System SLLL ag mail Com Email Address
Address	Email Address
23863 L License #	
Mechanical/HVAC Contractor Inform	nation
Description of Work/// N	
////4	
Mechanical Contractor's Company Name	Telephone
Address	Email Address
License #	
License # Plumbing Contractor Informatio	n
Description of Work Hock up water / Sewer Line	
	9/0-670-3831
Plumbing Contractor's Company Name	Telephone
230 Jenni Ln Sanford NC 27330 Address	Simpson and Sons On a Mail. Com
Address	Email Address
20261	
License # Insulation Contractor Informatio	n .
AI/A	N/A
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!

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HAVE SAN	5/1/2019	
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	
Sign w/Title: Date: \$1112019	