

* 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. Harnett County Central Permitting PO Box 65 Lillington, NC 27546

910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Application # BRES 1907-0007

ERES 1907-0083

Addes Permit PRES 1907-0017

TRES 1907-0000

Application for Residential Building and Trades Permit

| Owner's Name: Robert L. Rader II and Deeann M. Rader | Date: July 25, 2019 | |
|---|---------------------------------------|--|
| Site Address: 111 Cypress Woods LN, Cameron, NC 28326 | Phone: 910-309-0421 | |
| Subdivision: Cypress Woods | Lot: 1 | |
| Description of Proposed Work: Detached Garage with Bathroom | | |
| General Contractor Information | on | |
| Custom Contracting Corporation | 919-775-1497 | |
| Building Contractor's Company Name | Telephone | |
| 1504 So. Horner Blvd., Sanford, NC 27330 | vangroce@grocecompanies.com | |
| Address | Email Address | |
| 8664 | | |
| License # | | |
| Description of Work Electric wiring and installation Service Size | | |
| | | |
| Electrical Contractor's Company Name | 19 258-3175 Cuo-337-5697 Telephone | |
| | | |
| Address | Email Address | |
| Address Fayetteville N.C. 2830 | Littali Address | |
| License # | 1/6 | |
| Mechanical/HVAC Contractor Info | rmation | |
| Description of Work Install heating and cooling | | |
| Affordable Heating and Air | 919-498-2791 | |
| Mechanical Contractor's Company Name | Telephone | |
| P.O. Box 326, Lemon Springs, NC 28355 | highflying4x4@gmail.com | |
| Address | Email Address | |
| 20046 | | |
| License # | | |
| Plumbing Contractor Informat | tion | |
| Description of Work Install plumbing | # Baths_1 | |
| Reliable Plumbing | 919-499-7359 | |
| Plumbing Contractor's Company Name | Telephone | |
| 1480 Zion Church Road | reliableplumbing@windstream.ne.* | |
| Address | Email Address | |
| 7151 | | |
| License # | | |
| Insulation Contractor Information | | |
| B Organized Insulation | 919-615-3175Bill | |
| 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

| 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: 125/19 | | |
| | Sign w/Title: Ver Date: 1/65/17 | |