

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: Edric Williams Date: 10/23/19
 Site Address: 180 Cedar Lane Sanford NC 27332 Phone: 910-391-4136
 Subdivision: Carolina Lakes Lot: 335
 Description of Proposed Work: new windows + door, new elec. fixtures, relocating plumbing fixtures - new tubs, new cabinets, vanities, flooring

General Contractor Information

SMG Precision Properties Telephone 910-988-8172
 Building Contractor's Company Name
256 Briar Hill Rd. Raeford NC 28376 shawn@precisioncustomhomes.nc.com
 Address Email Address
72380

Electrical Contractor Information

Description of Work Rough-in / Remodel Service Size: _____ Amps T-Pole: Yes No
Charles M. Brooks Electrical LLC Telephone 910-605-7648
 Electrical Contractor's Company Name
136 Huntsville Cir Fayetteville 28306 charlesmbrookselectric@gmail.com
 Address Email Address
31172

Mechanical/HVAC Contractor Information

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

Plumbing Contractor Information

Description of Work Rough ins / Remodel # Baths 4
Woods Plumbing Telephone 910-920-3908
 Plumbing Contractor's Company Name
1109 Hope Mills Rd NC 28304 woodsplumbingllc@gmail.com
 Address Email Address
33076

Insulation Contractor Information

NA
 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

10/23/19

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:   owner SMC Precision Properties Date: 10/2/19