

Application # BRES 19 11 - 0084

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

| informa | ation on license.   | 1                         |
|---------|---|---------------------------|
|         |   | Date: //-21-19            |
|         | Site Address: 69 TROPHY RIDGE DV.                               | Phone: 910-814-7789       |
|         | Subdivision:  | Lot:                      |
|         | Description of Proposed Work: Roof over existing                | Total Job Cost: 20,000    |
|         | General Contractor Informatio                                   | o <u>n</u>                |
|         | MIKE WILSON   | 919-801-4885<br>Telephone |
|         | Building Contractor's Company Name                              | Telephone                 |
|         | 1700 WOODLAND Rd. Garner, 27529                                 | Mikewilsoncon@ asl.com    |
|         | Address   | Email Address             |
|         | 40517<br>License #  |                           |
| 1       | Electrical Contractor Information                               | <u>on</u>                 |
| lot.    | Description of Work 12 Can Lts 4 on the Service Size:           | Amps T-Pole:Yes XNo       |
| alid    | MACKS Elec  | 919 553 2035              |
| 1/21/19 | Electrical Contractor's Company Name                            | Telephone                 |
| 12111   | 2035 Julian Ln. Smithfield                                      | radowers 76 @ G-Mail, Com |
| WAS     | 2035 Julian Ln. Gmithfield<br>Address 15692 this has been renew | Email Address             |
| 1       | License #   | ed (1) (2(15)19) min      |
|         | Mechanical/HVAC Contractor Inform                               | mation                    |
|         | Description of Work   |                           |
|         | Description of Front  |                           |
|         | Mechanical Contractor's Company Name                            | Telephone                 |
|         |   |                           |
|         | Address   | Email Address             |
|         |   |                           |
|         | License # Plumbing Contractor Information                       | 200                       |
|         |   |                           |
|         | Description of Work   | # Baths                   |
|         | Discribing Contrologic Company Name                             | Telephone                 |
|         | Plumbing Contractor's Company Name                              | releptione                |
|         | Address   | Email Address             |
|         | nddios  |                           |
|         | License #   |                           |
|         | Insulation Contractor Information                               | on                        |
|         |   | Talanhana                 |
|         | 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 <a href="by signing below I have obtained all subcontractors">by signing below I have obtained all subcontractors</a>
<a href="permission to obtain these permits">permission to obtain these permits</a> and if <a href="any changes occur including listed contractors">any changes occur including listed contractors</a>, 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.

| Multi Lulsa Signature of Owner/Contractor/Officer(s) of Corporation  11-21-19 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: Muh Wilson Organor Date: 1/-21-19   |  |  |  |

LICENSE NUMBER

L.15692

## STATE OF NORTH CAROLINA BOARD OF EXAMINERS OF ELECTRICAL CONTRACTORS

**EXPIRATION DATE**. 10/31/2020

## THIS IS TO CERTIFY THAT:

Mack's Electric of Raleigh

Robert Arthur Clowers

is duly registered and entitled to practice Electrical Contracting in the

Limited Classification License

Limitation: No one project to exceed \$50,000.00 and 600 volts maximum

Mack's Electric of Raleigh 2035 Julian Lane Clayton, NC 27520

Witness our hands and seal of the Board

Gerald Harvell

Chairman

Secretary - Treasurer