



Application # _____

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: Jennifer Sheemaker Date: 12/3/19
Site Address: 245 Ruth Circle, Fugay, Virginia, NC 27526 Phone: 919-291-2424
Subdivision: Ballard Woods Lot: 17
Description of Proposed Work: Finish walk up Attic Space Total Job Cost: 14,000

General Contractor Information

Owner - Jennifer Sheemaker
Building Contractor's Company Name

919-291-2424
Telephone

Address

Jsheemaker@Campbell.edu
Email Address

License #

Electrical Contractor Information

Description of Work put more recepticals/lights Service Size: _____ Amps T-Pole: Yes No
SNO Electric
Electrical Contractor's Company Name

919-
Telephone

191655 NC 210, Angier, NC 27501
Address

Nelsonowen65@gmail.com
Email Address

1307-L
License #

Mechanical/HVAC Contractor Information

Description of Work mini split
JC's Heating & Air
Mechanical Contractor's Company Name

919-369-2657
Telephone

1539 Wake Stephenson Holly Springs, NC 27540
Address

JCSHVAC@gmail.com
Email Address

H3-12655
License #

Plumbing Contractor Information

Description of Work N/A
Plumbing Contractor's Company Name

Baths 0
Telephone

Address

Email Address

License #

Insulation Contractor Information

Spray Foam Insulation, P.O. Box 1220
Insulation Contractor's Company Name & Address Dunn

910-892-1580/919-820-1676
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]
Signature of Owner/Contractor/Officer(s) of Corporation

12 - 5 - 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: *[Signature]*, owner Date: 12-5-19