



Application # BRES1912-0031

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: Asont Anita Makowski; Edwards Date: 1/23/2020
Site Address: 91 Sandra Ct Phone: (757) 831-0411
Subdivision: Mcills Creek Farm Lot: _____
Description of Proposed Work: Turn Basement into Apt. Total Job Cost: \$22,000

General Contractor Information

QNR Construction Telephone: (919) 868-1045
Building Contractor's Company Name
173 Deer Tracks Dr. Email Address: Bvay823@yahoo.com
Address
N/A
License #

Electrical Contractor Information

Description of Work: Wire Basement/move + add service Service Size: _____ Amps T-Pole: Yes No
Power Source Electric Telephone: (919) 422-5209
Electrical Contractor's Company Name
3005 Lindsay Dr. Email Address: _____
Address
16419 - unlimited
License #

Mechanical/HVAC Contractor Information

Description of Work: Add system for New Work
Enviormental Comfort Heating & Air Telephone: (919) 413-5483
Mechanical Contractor's Company Name
5848 Farington Pl. Suite 100 Email Address: _____
Address
HVAC 34676 Etc #28045
License #

Plumbing Contractor Information

Description of Work: 2 Baths / Kitchen # Baths: 2
Cam Atlantic LLC Joe Meyers Telephone: (919) 215-9551
Plumbing Contractor's Company Name
7928 Bud Morris Rd Email Address: _____
Address
07798
License #

Insulation Contractor Information

Tatum Insulation Telephone: 919
Insulation Contractor's Company Name & Address

*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

1/24/2020
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]

Date: 1/24/2020