



Harnett County Central Permitting  
 PO Box 65 Lillington, NC 27546  
 910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Application # \_\_\_\_\_

\* 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: Francesca Bloom Date: 6-10-2020  
 Site Address: 250 Woodland Ridge Dr, Fuguey-Varina Phone: 757-653-6757  
 Subdivision: Woodland Ridge Lot: \_\_\_\_\_  
 Description of Proposed Work: Basement Renovation Total Job Cost: \$150,300

**General Contractor Information**

Wimberly Builders, LLC Telephone: 919-669-7066  
 Building Contractor's Company Name  
PO Box 1793, Angier NC 27501 Email Address: tony@wimberlybuilders.com  
 Address  
83329  
 License #

**Electrical Contractor Information**

Description of Work: Basement Reno Service Size: 200 Amps T-Pole: Yes  No  
Joseph Fredley  
 Electrical Contractor's Company Name Telephone: 919-390-8954  
421 Virgil Rd, Durham NC 27703  
 Address  
32169  
 License # Email Address \_\_\_\_\_

**Mechanical/HVAC Contractor Information**

Description of Work: Basement Reno  
HVAL Specialist  
 Mechanical Contractor's Company Name Telephone: 919-669-9509  
5843 Cokesbury Rd, Fuguey-Varina NC  
 Address  
22035  
 License # Email Address \_\_\_\_\_

**Plumbing Contractor Information**

Description of Work: Basement Reno - bath + wet bar # Baths: 1  
Glover Contract Plumbing  
 Plumbing Contractor's Company Name Telephone: 919-868-6959  
304 Avail Hollow, Sanford, NC 27332  
 Address  
23160  
 License # Email Address \_\_\_\_\_

**Insulation Contractor Information**

Tatum H Insulating Telephone: 919-427-5693  
 Insulation Contractor's Company Name & Address  
519 Old Drug Store Rd, Garner NC 27529

\*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

6-10-2020  
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: 6-10-2020