S10-263-9049
Casey Daniels

Harnett
COUNTY
NORTH CAROLIN

Application #

* Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address, company name & phone must match Harnett County Central Permitting PO Box 65 Lillington, NC 27546 910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Application for Residential Building and Trades Permit

ation on license.		
		Date:
Site Address:	106 Pope Street.	Phone: 910 - 514 - 318Z
Subdivision:	ERWN NC 28339	Lot:
Description of Propo	eed Works	Total Job Cost: \$ 30,000 -
*	General Contractor Informatio	<u>n</u>
Kenin	Tyndall Buildens Inc	910-237-4237
Building Contractor's	Company Name	Telephone
1014 W	Core Rd Dunn NC 28334	tyndallbuilders embargmail.com Email Address
Address		Enfail Address
71658		
License #	Floatuical Contractor Informatic	
Description of Work	New Service Service Size:	700 Amps T-Pole: V Yes No
	lectric Inc.	919 - 894 - 4404
Electrical Contractor		Telephone
	op 957 BensonWC	seclecteicinchensonucs Email Address smail.com
Address		Email Address Cmril.com
19589-L		8
License #		
	Mechanical/HVAC Contractor Inform	<u>mation</u>
Description of Work	Bathfans	
	HUAC	919-894-4248
	or's Company Name	Telephone
57WC	Bensly Lane Couts	
nuuless	U	Lilian muuress
9497		
License #	Plumbing Contractor Information	on
Description of Work	Replumbry	# Baths 2
Double Plumbing Contractor	's Company Name	970 814-7705 Telephone
		гегерионе
Address	Byrd Rd Bunn Level NC 28323	Email Address
21449		
License #		
	Insulation Contractor Informati	on
PARKER	e Bros. Troulator	910-990-5928
Insulation Contracto	r'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! 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.

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. 9-1-70			
Signature of Commercion Officer(s), of Corporation. Date			
Affidavit for Worker's Compensation N.C.G.S. 87-14			
The undersigned applicant being the:			
General Contractor Owner Officer/Agenit 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: Date: 9-1-20			