Buildins# 37



Application #

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

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Contra	ector: Address to	dingany	
name	& phone must re	atch	
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## Application for Residential Building and Trades Permit

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Owner's Name:	Campbell Binte Parture LLC	Date: 6/22/20
	44 Butle- Commons Daine	
Subdivision:	CAMPSell Brists Phase TV	Lot:
Description of Propos		
July P	General Contractor Informatio	
Duilding Contractor's	Company Name	9/0 8/9- 923/ Telephone
	Ville 2d Lillington Ne 2754	JPRILEDN STRUCTION OF YARD
Address	and the trining of the test	Email Address
50859		
License #	Electrical Contractor Informati	on
Description of Work	New Townhome Service Size	: <u>Pub</u> Amps T-Pole:Yes \_No
W3 Klickie		919550-7341
Electrical Contractor		Telephone
Address Address	in Street (/a, for re22000	Stores W3electric. con
11 452- L	4	Email Address
License #		
200000000000000000000000000000000000000	Mechanical/HVAC Contractor Infor	mation_
	New Townham	
Certofuel	Heating + Air Inc	910 858-0000
	or's Company Name	Telephone
Address	Pannell St. Packto, NL 38371	Email Address
H36120	20/3	
License #		
Application of the state of the	Plumbing Contractor Informati	on /
Description of Work _	New Townhans	# Baths
6 lovers Cont	trat Pluming Inc	919868 0959
Plumbing Contractor	1111 2 11 4	Telephone
Address Address	Hollow San ford, NC 27332	Slave plansing inca Rolls frail Frail Address
23/100		
License #		
01	Insulation Contractor Informati	
14eler Sucil	stien 825 Killy Fork Ed Clinton	910564-4132
Insulation Contractor	's Company Name & Address	Telephone
The state of the s		
ANOTE COMO	at Contractor / owner must fill out and sign the	Second happe 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.

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.

1012()	6/22/20		
Signature of Owner/Contractor/Officer(s) of Corporation	Date /	7	

Δffidavit	for Worker's C	Compensation N.C.G.S. 87-14
The undersigned applicant being	the:	
General Contractor		Officer/Agent of the Contractor or Owner
Do hereby confirm under penaltie set forth in the permit:	es of perjury that th	ne person(s), firm(s) or corporation(s) performing the work
Has three (3) or more emp	oloyees and has ob	btained workers' compensation insurance to cover them.
them.		nas obtained workers' compensation insurance to cover
Has one (1) or more subcoopering themselves.	ontractors(s) who h	has their own policy of workers' compensation insurance
Has no more than two (2)	employees and no	subcontractors.
I was the same of	MILL ROMITING CONTING	s sought it is understood that the Central Permitting ates of coverage of worker's compensation insurance prior e permitted work from any person, firm or corporation
Sign w/Title:	1)//	resident Date: 6/2/25