



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/occupier or licensed contractor. Address, company name & phone must match information on license.

Application for Residential Building and Trades Permit

Owner's Name: Louis Fitch Date: 11/12/2020
Site Address: 468 Basket Oak Cir Phone: 8144409291
Subdivision: Forest Oaks Lot: 129
Description of Proposed Work: Interior Fire Renovations Total Job Cost: \$100,000

General Contractor Information

Servpro of Lee & South Chatham Counties Starr H Harris 9195336776
Building Contractor's Company Name Telephone
114 Commerce Ct Unit C 4228 Bacon Cr. Ct office@servpro10849.com
Address (919) 398-5032 Holly Springs 27540 Email Address
82644 HEATED SQ FT 2396 GARAGE SQ FT 400
License # _____

Electrical Contractor Information

Description of Work Work in Kitchen Service Size: _____ Amps T-Pole: Yes No
BPC Electric LLC Telephone 919-442-7420
Electrical Contractor's Company Name
7434 CAPITAL BLVD RALEIGH NC 27616 Email Address
Address 25278
License # _____

Mechanical/HVAC Contractor Information

Description of Work New HVAC SYSTEM
HOOAH HEATING AND AIR Telephone 919-586-6147
Mechanical Contractor's Company Name
169 COUNTRY FOLKS LANE HOLLY SPRINGS Email Address
Address 27540
33597
License # _____

Plumbing Contractor Information

Description of Work LAUNDRY ROOM DIPS WORK # Baths _____
CARDINAL POINTS PLUMBING, LLC Telephone 919-895-4162
Plumbing Contractor's Company Name
74 CROSS LINK DR. ANCLIER NC 27561 Email Address
Address
34588
License # _____

Insulation Contractor Information

All American Painters LLC 9196002715
Insulation Contractor'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 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

11/12/2020
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]* Owner Date: 11/13/2020