



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 whom ever performing work. Must be owner/contractor or licensed contractor. Address, company name & phone must match information on license.

Application for Residential Building and Trades Permit

Owner's Name: CSJD LTD LLC, Carolyn Dorman, Mgr Date: _____
Site Address: 307 E J St, Erwin, NC 28339 Phone: 919-594-9714
Subdivision: _____ Lot: _____
Description of Proposed Work: Repair + Remodel Home Total Job Cost: \$82,300

General Contractor Information

Danny Ray Fisher Telephone: 910 990 1524
Building Contractor's Company Name
604 WONDERTOWN DR, ERWIN 28339 Email Address: dfisherfb@yahoo.com
Address
72543 License # 1280

Electrical Contractor Information

Description of Work Completely wire home Service Size: _____ Amps T-Pole: Yes No
Robert McCullen / Day + Night Electric Telephone: 910-237-0660
Electrical Contractor's Company Name
5550 Timothy Rd, Dunn, NC 28334 Email Address: _____
Address
19412 License # _____

Mechanical/HVAC Contractor Information

Description of Work Replace HVAC
Jamie Bowden AC Dow Telephone: 910-822-4294
Mechanical Contractor's Company Name
595 Palestine Rd, Winder, NC Email Address: Jab1975@gmail.com
Address
19660 h3 License # _____

Plumbing Contractor Information

Description of Work Add new bath, connect existing # Baths: 2
Plumbing in bath, laundry + kitchen Telephone: 984-249-7900
Plumbing Contractor's Company Name Jeremy Wilkins
7124 Old Fairground Rd, Benson, NC 27504 Email Address: _____
Address
23023 License # _____

Insulation Contractor Information

PAI AMO Insulation Telephone: 919-369-3770
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 listing below I have obtained all subcontractor permits 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.

Carl Y. Waff
Signature of Owner/Contractor/Officer(s) of Corporation

12-9-20
Date

Carl Y. Waff, Owner

12/10/20

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: *Carl Y. Waff Owner* Date: 12-9-20