



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

Application for Residential Building and Trades Permit

Owner's Name: AARON THOMAS Date: 7/28/20
 Site Address: 2068 McNEAL HOBBS RD, BURN LEVEL N.C. Phone: 910-973-5080
 Subdivision: _____ Lot: LOT 76
 Description of Proposed Work: INSTALL MODULAR HOME Total Job Cost: 204,000.00

General Contractor Information

WALKER BUILDERS INC. Telephone: 910 277-6924
 Building Contractor's Company Name
1108 CRESTLINE RD LAURINBURG NC 28352 Telephone: WALKERBUILDERS@HOTMAIL.COM
 Address
45384 Email Address
 License #

Electrical Contractor Information

Description of Work: INSTALL 200 AMP METER BASE Service Size: 200 Amps T-Pole: Yes No
R. RIPPINS ELECTRICAL Telephone: 910 266-9020
 Electrical Contractor's Company Name
11990 HASTY RD LAURINBURG N.C. 28352 Email Address: R.RIPPINS.ELECT@ICLOUD.COM
 Address
13084 License # Homeowner

Mechanical/HVAC Contractor Information

Description of Work: INSTALL HEAT PUMP 3 TON ELECTRIC
AIRESERV OF FAYETTEVILLE Telephone: 910-843-2354
 Mechanical Contractor's Company Name
111 TOMMYE LAUGHLIN RD REDSPRINGS, NC, 28377 Email Address: AIRESERV.FAYETTEVILLE@GMAIL.COM
 Address
29874 License #

Plumbing Contractor Information

Description of Work: INSTALL DRAIN LINES UNDER HOME # Baths: 2
DAVID CUMMINGS PLUMBING Telephone: 910-318-3822
 Plumbing Contractor's Company Name
105 SOUTH HILLTOP RD. REDSPRINGS NC 28377 Email Address: _____
 Address
29681 License #

Insulation Contractor Information

N/A Telephone: _____
 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 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.

Harry Walker
Signature of Owner/Contractor/Officer(s) of Corporation

7/28/20
~~12/12/19~~
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: *Harry Walker*

Date: 7/28/20
~~12/12/19~~



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Application for Residential Building and Trades Permit

Owner's Name: ARON THOMAS Date: 8/3/21

Site Address: 2068 McNEILL Hobbs Rd. BUNNLEVEL Phone: 910-973-5080

Subdivision: _____ Lot: _____

Description of Proposed Work: SET MODULAR HOME Total Job Cost: 203,052.00

General Contractor Information

WALKER BUILDERS INC. 910-277-6924

Building Contractor's Company Name Telephone

16620 BIRTBOSER Rd MAXTON, NC 28364 LWALKERBUILDERS@HOTMAIL.COM

Address Email Address

45384 HEATED SQ FT 1540 GARAGE SQ FT

License #

Electrical Contractor Information

Description of Work INSTALL METER BASE Service Size: 200 Amps T-Pole: Yes No

SOUTH AVENUE JERRY RIGGINS JR. 910-266-9020

Electrical Contractor's Company Name Telephone

11990 HASTY Rd LAURINBURG NC 28352 NC

Address Email Address

10574 13084

License #

Mechanical/HVAC Contractor Information

Description of Work INSTALL 3 TON PACKAGE HTU AIR

HOME OWNER ARON THOMAS 910-973-5080

Mechanical Contractor's Company Name Telephone

2068 McNEILL Hobbs Rd BUNNLEVEL N.C.

Address Email Address

License #

Plumbing Contractor Information

Description of Work TIE PLUMBING DROPS TO SEPTIC TANK # Baths 3

David Cumming plumbing 910-318-3822

Plumbing Contractor's Company Name Telephone

608 SOUTH HILLTOP Rd RED SPRINGS NC 28377

Address Email Address

29681

License #

Insulation Contractor Information

Larry Walker 910 277-6924

Insulation Contractor's Company Name & Address Telephone

***NOTE: General Contractor / owner must fill out and sign the second page of this application.**



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Date

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Sign w/Title: _____ Date: _____