

Application # BIRES 2104-002

## Harnett County Central Permitting 420 McKinney Pkwy Lillington, NC 27546 PO Box 65 Lillington, NC 27546 910-893-7525 ext. 1 Fax 910-893-2793 www.harnett.org/permits

## **Application for Residential Building and Trades Permit**

0 1 11 11	01101
Owner's Name: Donnie + Car   Hamilton	
Site Address: 687 Hog heaven lane	Phone 910-6984-4:
Subdivision: Private Lot	Lot
Description of Proposed Work: OFT Trane Hod	Total Job Cost 148,472.00
General Contractor Information	
Kaven Kock my Movers	919-775-3600
Building Contractor's Company Name	Telephone
Address Nanew Blad Janter 1	Email Address
3400 HEATED SQ FT 1742 GARAGE SQ	FT
License #	1
Description of Work Electrical Contractor Information  Service Size:	Amps T-Pole: Yes No
Daniel Dosh Kms Electrical	919-935-4496
Electrical Contractor's Company Name	Telephone
63 Mercy Ln Broadway	NA
Address	Email Address
23349	
License #	
	ation
Mechanical/HVAC Contractor Information	
Description of Work Install Heatpur	919.708-834 0
Mechanical/HVAC Contractor Information  Description of Work Install Heatplus  Mechanical Contractor's Company Name	
Description of Work Install Heatpur	919.708-834 0
Mechanical/HVAC Contractor Information  Description of Work Install Healphup  Mechanical Contractor's Company Name  3489 Edwards Rd Santal  Address  Address	919.708-834 b Telephone
Mechanical/HVAC Contractor Information  Description of Work Install Healphup  Mechanical Contractor's Company Name  3489 Edwards Rd Sarkach  Address  33513  License #	919.708-834 b Telephone  Ala Email Address
Mechanical/HVAC Contractor Information  Description of Work Install Heal Plum  Mechanical Contractor's Company Name  Address  Address  Plumbing Contractor Information	919.708-834 b Telephone  A A Email Address
Mechanical/HVAC Contractor Information  Description of Work In Stall Head Plum  Mechanical Contractor's Company Name  Address  Address  Plumbing Contractor Information  Description of Work Head Plum  Plumbing Contractor Information  Description of Work Head Plum  Plumbing Contractor Information  Description of Work Head Plum  Plumbing Contractor Information	a19.708-834 b Telephone  A1A Email Address  # Baths 2
Mechanical/HVAC Contractor Information  Description of Work Install Heal Plum  Mechanical Contractor's Company Name  Address  Address  Description of Work Plumbing Contractor Information  Description of Work Porch Server worker  Thomas Plumbing + Repair	919.708-834 b Telephone  A 1 A Email Address  # Baths 2  919-499-8300
Mechanical/HVAC Contractor Information  Description of Work In Stall Head Plum  Mechanical Contractor's Company Name  Address  Address  Plumbing Contractor Information  Description of Work Head Plum  Plumbing Contractor Information  Description of Work Head Plum  Plumbing Contractor Information  Description of Work Head Plum  Plumbing Contractor Information	a19.708-834 b Telephone  A1A Email Address  # Baths 2
Mechanical/HVAC Contractor Information  Description of Work In Stall Head Plum  Mechanical Contractor's Company Name  Address  Address  Plumbing Contractor Information  Description of Work Hopking Server Worker  Plumbing Contractor's Company Name  Plumbing Contractor's Company Name	919.708-834 b Telephone  A 1 A Email Address  # Baths 2  919-499-8300
Mechanical/HVAC Contractor Information  Description of Work Install Heal Plum  Mechanical Contractor's Company Name  Address  Address  Description of Work Plumbing Contractor Information  Percentage	919.708-834 b Telephone  A / A Email Address  # Baths _ 2  G   Q - U   Q   Q - 8300  Telephone    N / A
Mechanical/HVAC Contractor Information  Mechanical Contractor's Company Name  Address  Address  Plumbing Contractor Information  Pescription of Work  Plumbing Contractor Information  Pescription of Work  Plumbing Contractor's Company Name  Rd Byodesy  Address  Address  License #	Telephone  A A Email Address  # Baths 2  GQ-499-8300  Telephone  A Email Address
Mechanical/HVAC Contractor Information  Description of Work Install Heal Plum  Mechanical Contractor's Company Name  Address  Address  Description of Work Plumbing Contractor Information  Percentage	Telephone  A A Email Address  # Baths 2  GQ-499-8300  Telephone  A Email Address
Mechanical/HVAC Contractor Information  Mechanical Contractor's Company Name  Address  Address  Plumbing Contractor Information  Pescription of Work  Plumbing Contractor Information  Pescription of Work  Plumbing Contractor's Company Name  Rd Byodesy  Address  Address  License #	Telephone  A A Email Address  # Baths 2  GQ-499-8300  Telephone  A Email 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.

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

Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the: General Contractor Officer/Agent of the Contractor or Owner 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: