



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: Gamebird Properties LLC Date: 4/8/21
Site Address: 133 Taylow Trail Cameron NC 28326 Phone: _____
Subdivision: Lexington Plantation Lot: 265
Description of Proposed Work: Finish Bonus Room Total Job Cost: \$8900

General Contractor Information

Bramble Home Improvements Inc 9109880033
Building Contractor's Company Name Telephone
5353 Red Tip Rd STE 107 Fayetteville NC 28314 Chrisbramble@gmail.com
Address Email Address
84794 550
HEATED SQ FT 1773 GARAGE SQ FT 441
License #

Electrical Contractor Information

Description of Work 14 lights, 10 receptacles, 1 exhaust Fan Service Size: _____ Amps T-Pole: Yes No
Zips Electric 9105279404
Electrical Contractor's Company Name Telephone
5211 Perry Oliver Dr Hope Mills NC 28348 Zipselectric@gmail.com
Address Email Address
21119
License #

Mechanical/HVAC Contractor Information

Description of Work _____
Mechanical Contractor's Company Name Telephone _____
Address Email Address _____
License # _____

Plumbing Contractor Information

Description of Work Existing Plumbing add-on for remodel # Baths 1/2
Brocato's Plumbing 9106246693
Plumbing Contractor's Company Name Telephone
6530 Celestial Pine Dr Hope Mills NC 28348 Cbrocato93@gmail.com
Address Email Address
P 34764
License #

Insulation Contractor Information

A1 Insulation 2069 Yarborough Rd St Pauls NC 910429-2990
Insulation Contractor's Company Name & Address Telephone
28384

***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.

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

4/8/21
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: Chris Bramble / owner Date: 4/8/21