



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: Jeannie Bullock Pope Date: 7-27-2021
Site Address: 89 Gillis Court Coats 27521 Phone: 910-303-9888
Subdivision: Cottleston Estates ATTIC Lot: 9
Description of Proposed Work: Finish of existing attic Total Job Cost: 27,000
add deck & stairs

General Contractor Information

Jerry Pounds Construction, Inc 919-422-1175
Building Contractor's Company Name Telephone
5839 Elevation Road BENSON jerry.pounds@hotmail.com
Address 27504 Email Address
38095 **HEATED SQ FT** 506 **GARAGE SQ FT**
License # DECK 88

Electrical Contractor Information

Description of Work wiring attic room Service Size: _____ Amps T-Pole: Yes No
RA JACKSON ELECTRICAL 919-730-1251
Electrical Contractor's Company Name Telephone
9261 Raleigh Road BENSON NC RAJACKSONELECTRIC@
Address 27504 Email Address embargmail.com
21144
License #

Mechanical/HVAC Contractor Information

Description of Work HVAC for wiring attic build out
AIR TEMP MECHANICAL 919-625-0529
Mechanical Contractor's Company Name Telephone
73 Laughter Lane GARNER BEVANS@AIRTEMPNC.COM
Address 27519 Email Address
21362
License #

Plumbing Contractor Information

Description of Work Plumb bath in attic build out # Baths 1
L R G LOVER PLUMBING 919-820-0026
Plumbing Contractor's Company Name Telephone
PO Box 764 BENSON NC Leeglover22@yahoo.com
Address 27504 Email Address
7958
License #

Insulation Contractor Information

Insulation IN 5902 Fayetteville 919-772-9000
Insulation Contractor's Company Name & Address Telephone
Rd
RALEIGH NC 27603

***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.

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

7-31-21
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: Jerry Pounds President Date: 7/31/21