

Application #

* Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license. 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

Owner's Name: Sheila Rutledge	- A rived editor		Date11-7-21
Site Address: 243 Whit Ct. Angier, NC 27501	Phone	910-5	514-2967
Subdivision: Neill's Creek Farm	s 'silinabila	Lot	106
Description of Proposed Work: 12 x 37 Sunroom Addition	Total Job Cost _	\$79,0	000
General Contractor Inf	formation		
Howell Builders, Inc.	919-427	-0679	
Building Contractor's Company Name	Telephone		
3408 Oakridge River Rd. Fuquay-Varina, NC 27526 Address	bryan@howell-builders.com Email Address		
41779 HEATED SQ FT_444	GARAGE SQ FT	342	
License #			. Order 8 1954
Description of Work WIRING Electrical Contractor In		ne T	Pole: Yes X No
Malory's	ICE 3126AIII	ips ii-	role res _K_NO
Electrical Contractor's Company Name	Telepho	ne	
231 makes Rd. Arice 111			abryelectrical.com
Address	Email A	ddress	and the second
15077 UNL.		1874 B	
Mechanical/HVAC Contract	or Information		
Description of Work Heat air.	2 #11 12 10 1 gC ave.		eriorische der Da
HUAC Specialist	919	- 66	9-9509
Mechanical Contractor's Company Name	Telepho		3000
5843 Cokes bury Rd. 70. 27526	IVA	150	
Address	Email A	ddress	
24035			
License # Plumbing Contractor In	formation		
Description of Work Plumby 1/2 booth	# Baths	1/2	
	919-	615	- 1947
Plumbing Contractor's Company Name	Telepho	-C 1	
P.O. Box 1045 DUNN. NC. 28335	Dustre	55 0	titous pluntis. con
Address	Email A	ddress	
License # Insulation Contractor Ir	formation		
Totum Fosulation 519 -040 Davis		9-6	61-0999
	arrak Telepho		
	410%		

*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.

carrying out the work

Sign w/Title:

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.

Let a 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