



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: Patrick and Mary Nelson Date: 28 NOV 2021
Site Address: 167 Lakeside Lane Sanford, NC 27332 Phone: 910-723-0722
Subdivision: Carolina Lakes Lot: 52
Description of Proposed Work: First floor room addition Total Job Cost: \$20,000

General Contractor Information

Freddie Bowling 2764920212
Building Contractor's Company Name Telephone
P.O. Box 771 Vass NC 28394 c.bowling2007@hotmail.com
Address Email Address
#77109 **HEATED SQ FT** 144 **GARAGE SQ FT** 0
License #

Electrical Contractor Information

Description of Work Install lights and outlets Service Size: 200 Amps T-Pole: Yes No
TBBtiggs Electric 910-585-0260
Electrical Contractor's Company Name Telephone
556 Thurlow Lake Rd Carthage, NC 29327
Address Email Address
#27492-L
License #

Mechanical/HVAC Contractor Information

Description of Work _____
B Tech HVAC Service LLC (910)783-5545
Mechanical Contractor's Company Name Telephone
311 Craven Lane Carthage, NC 28327 btechhvac@gmail.com
Address Email Address
3350e
License #

Plumbing Contractor Information

Description of Work N/A No Plumbing work # Baths _____
Plumbing Contractor's Company Name Telephone _____
Address Email Address _____
License # _____

Insulation Contractor Information

Freddie Bowling 2764920212
Insulation Contractor's Company Name & Address Telephone

***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.

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

28 NOV 2021
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: Mary Allen Date: 28 NOV 2021