

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: Samantha and Derek Demers		Date 5/18/2022	
Site Address: 79 Brickhouse Ln Fuquay Varina, NC 27526			
Subdivision:			
Description of Proposed Work: Residential inground pool			
General Contractor Information			
Anthony & Sylvan Pools	919-886-0679		
Building Contractor's Company Name	Telephone		
2101 Westinghouse Blvd, Raleigh, NC 27604	kt.poolpermi	its@gmail.com	
Address	Email Address		
68766 HEATED SQ FT GARAGE SQ	• FT		
License #			
Description of Work Service Size: _	<u>1</u> Amps T-P	Pole: Yes No	
<u>Frontier Electric</u> 919-417-6369 Electrical Contractor's Company Name Telephone		<u> </u>	
4070 Pine Ridge Dr, Franklinton, NC	frontierelectrical2011@gmail.com		
Address	Email Address		
23712-1			
License #			
Mechanical/HVAC Contractor Inform			
Description of Work heater for pool		-	
Drip Drop 919-645-8454		4	
Mechanical Contractor's Company Name	Telephone		
		mbingoffice@gmail.com	
Address	Email Address		
33736			
License #	•		
Plumbing Contractor Information	_		
Description of Work	_# Baths		
Plumbing Contractor's Company Name	Telephone		
Trumbing Contractor's Company Name	relepriorie		
Address	Email Address		
License #			
Insulation Contractor Information	<u>n</u>		
Insulation Contractor's Company Name & Address	Telephone	<del>_</del>	

\*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 <a href="by-signing-below-I have obtained all subcontractors-permission to obtain these permits">by-signing-below-I have obtained all subcontractors-permission to obtain these permits</a> and if <a href="mailto:any">any</a> 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.

DocuSigne	d by:			
ashley	y Yammon		5/18/2022	
Signature of @wi	rer/€ontractor/Office	er(s) of Corporation	Date	
3		(-)		
			pensation N.C.G.S. 87-14	
The undersigned	d applicant being the:			
x 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 employe	ees and has obtaine	ed workers' compensation insurance to cover them.	
Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them.				
X 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: 0			Assistant General Manager 5/18/2022 Date:	