

App	olication	#	
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Each section below to be filled out by whomever performing work Must be owner or licensed contractor. Address, company name & phone must match information on license Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Application for Residential Building and Trades Permit

on on license
Owner's Name: Matthew Taulor Date: 6-8-22
Site Address: 1262 S Railroad St Coats NC Phone: 910-658-8875
Subdivision: Matthew Tauler 21521 Lot
Description of Proposed Work: _ New Construction - Duffex
General Contractor Information
(a soling (asstruction + Restoration 911) -850-4207
Building Contractor's Company Name Telephone
Email Address General Contractor Information Acolina Construction + Restoration 910 - 850 - 4207 Telephone P. D. Box 203, Lillington, NC 27546 imp Cc restoration. Con Email Address Email Address
Address Email Address
10495
License #
Description of Work New Construction Service Size: 200 Amps T-Pole: Yes \(\text{No} \)
Proper Electric 919-499-7767
Electrical Contractor's Company Name Telephone
SO NeIll Thomas Rd, Lillington
Address Email Address
21643-U
License #
Mechanical/HVAC Contractor Information
Description of Work New Construction
JAM Heating + Air 919-291-0376
Tolonhono
Address Dunn, NC Address Dunn, NC Address
17164
License # Plumbing Contractor Information
Description of Work New Construction #Baths 4
Tolonhone
11770 N/ Hum Sp S Newton Grove NC
Address Plumbing Contractor's Company Name 11770 NC Hwy So S, Newton Grove, NC Address Email Address
33354
License #
Insulation Contractor Information
Tatum Iosulation 11 SIA Old Drug Store Rd. 919-661-0999
Tatum Insulation 11 S19 Old Drug Store Rd. 919-661-0999 Insulation Contractor's Company Name & Address Garner, No Telephone
27529

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.

12/2/00

Signature of Owner/Contractor/Officer(s) of Corporation 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: Date: 6/8/22