

Application # _____

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

* 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:Barbara Wilson	Date 07/18/2022
Site Address: 136 Regal Crest Dr, Fuquay Varina, NC 27526	Phone 919-552-0188
	Lot 11
Subdivision: <u>REGAL CREST</u> Building an addition of a 6x24 three season room with a stud Description of Proposed Work: deck. Room will be unconditioned and uninhabitable.	dio style roof on a 16X24 New Total Job Cost <u>\$77,000</u>
General Contractor Informa	
Champion Window Company of Raleigh	513-580-5613
Building Contractor's Company Name	Telephone
4018 Patriot Dr, Durham, NC 27703	chakera.jones@getchampion.cor
Address	Email Address
75228 HEATED SQ FT GARAG	
License #	
Electrical Contractor Inform	
Description of Work Adding wall sockets and switches Service S True Power Electric	
Electrical Contractor's Company Name	<u>919-261-0814</u> Telephone
4018 Patriot Dr, Durham, NC 27703	•
Address	truepowernc@gmail.com Email Address
U.25901	
License #	
Mechanical/HVAC Contractor In	formation
Description of Work	
Description of Work	
Description of Work	
Description of Work	Telephone
Description of Work	Telephone
Description of Work	Telephone Email Address
Description of Work Mechanical Contractor's Company Name Address License #	Telephone Email Address
Description of Work Mechanical Contractor's Company Name Address License # Plumbing Contractor Inform	Telephone Email Address
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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 <u>by signing below I have obtained all subcontractors</u> <u>permission to obtain these permits</u> and if <u>any</u> 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.

✓ Chakera Jones wner/Contractor/Officer(s) of Corporation Signature

07/18/2022

Date

Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned 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:
<u>X</u> Has three (3) or more employees and has obtained workers' compensation insurance to cover them.
\underline{X} 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: UMP A A Chakera Jones Permit Agent Date: 07/18/22