

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: Chelsea Leighann Brownfield		Date02	/09/23
Site Address: 57 Inlet View Sanford, NC 27332		Phone 703.582.	
Subdivision: Carolina Lake		Lot 35	
Description of Proposed Work: Complete 2nd F	loor Remodel Tot	al Job Cost 400,050.00	
General C	Contractor Information		
Freys Building and Remodeling		.552.1724	
Building Contractor's Company Name 311 Ashville Avenue, Suite E, Cary, NC 27518		phone as@freysremodeling.com	
Address 70553 HEATED SQ FT	2610 Ema	ail Address	
License # Electrical Description of Work New lights, switches & receptacles throughout 2nd floor. I Thomas Swaim Electric	Contractor Information New amp as requir@ervice Size: (1)20	_Amps T-Pole:Ye 9.448.8156	es <u>×</u> No
Electrical Contractor's Company Name	Tele	phone	
5026 Lansdowne Drive, Durham, NC 27712	Ni	ck.nceg@gmail.com	
Address 05424 License # Mechanical/HV	AC Contractor Information	ail Address	
Description of Work Install new Bath Fans in Bathrooms. Install (1)	NVAC duct in wail of bonds from & relocate(1)	supply vent in wall	
Comfort Shield HVAC of NC, Inc.		9.588.8015	
Mechanical Contractor's Company Name 937 N. Brightleaf Blvd, Smithfield, NC 27577		phone	
Address 32187		comfortshieldhvacofn iil Address	c.com
	Contractor Information		
Description of Work New plumbing & plumbing fixtures DBC-NC Services, Inc.		ths_4 0.999.9549	
Plumbing Contractor's Company Name 712 Whitley Way, Wendell, NC 27591	Tele	phone cg@dbc-nc.com	
Address 33377		il Address	7
Insulation Contractor's Company Name & Address	Contractor Information Doing	phone	
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*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.

02/00/22

02/03/25	
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:	
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 wo set forth in the permit:	rk
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 pri to issuance of the permit and at any time during the permitted work from any person, firm or corporation carrying out the work.	or
Sign w/Title: Date: 2-28 -33	