

4' screened porch add.
bedroom addition



Harnett
COUNTY
NORTH CAROLINA

Application # BRES2304-0039

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: Mashekia Raines Date 4-13-23
Site Address: 3305 US HWY 401S Lillington, NC 27546 Phone 910-891-8316
Subdivision: _____ Lot _____
Description of Proposed Work: Renovation of Existing home / Addition Total Job Cost \$145,000

General Contractor Information

Mashekia Raines (self) 910-891-8316 to include bathroom bedroom screened porch
Building Contractor's Company Name Telephone
same srelliott6@gmail.com
Address Email Address
N/A HEATED SQ FT GARAGE SQ FT
License #

Electrical Contractor Information

Description of Work New Addition Service Size: 200 Amps T-Pole: Yes No
Mashekia Raines 910-891-8316
Electrical Contractor's Company Name Telephone
same srelliott6@gmail.com
Address Email Address
N/A
License #

Mechanical/HVAC Contractor Information

Description of Work New HVAC System
J & M Heating & A/C, Inc. 910-897-5501
Mechanical Contractor's Company Name Telephone
724 Turlington Rd. Dunn, NC 28334 Jandmhvac@centurylink.net
Address Email Address
17164
License #

Plumbing Contractor Information

Description of Work Re-plumbing / Addition # Baths 3
Mashekia Raines 910-891-8316
Plumbing Contractor's Company Name Telephone
same srelliott6@gmail.com
Address Email Address
N/A
License #

Insulation Contractor Information

Insulating NC 5902 Fayetteville Rd. Raleigh 919-772-9000
Insulation Contractor's Company Name & Address NC 27603 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.



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

4/13/23

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:

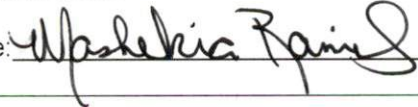
_____ Has three (3) or more employees and has obtained workers' compensation insurance to cover them.

_____ 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: 4/13/23