



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: The Life House Partnership, LLC Date 5/6/2023
Site Address: 84 Ravens Wood Cir Sanford NC 27332 Phone 914 512 0417
Subdivision: Block H Carolina Lakes Lot 27
Description of Proposed Work: Removal of interior walls, re-route of electrical and plumbing Total Job Cost \$ 15,000

General Contractor Information

Weaver Development Co., Inc. 910 433 0888
Building Contractor's Company Name Telephone
350 Wagoner Dr, Fayetteville, NC 28303
Address Email Address
L. 26962 **HEATED SQ FT** 1476 **GARAGE SQ FT** ~ 475
License #

Electrical Contractor Information

Description of Work Moving Electrical Circuits Service Size: _____ Amps T-Pole: Yes No
Flash Gordon Electric LLC 910 583 8441
Electrical Contractor's Company Name Telephone
511 Porter Rd, Hope Mills, NC 28348 flashgordonelectricllc@gmail.com
Address Email Address
SP.SFD.33679
License #

Mechanical/HVAC Contractor Information

Description of Work _____
Mechanical Contractor's Company Name Telephone
Address Email Address
License #

Plumbing Contractor Information

Description of Work Moving Washer, Fridge, and Dishwasher # Baths 2
Plumbing by BFW 910 849 6653
Plumbing Contractor's Company Name Telephone
561 Gillespie St, Fayetteville, NC 28301
Address Email Address
L. 33732
License #

Insulation Contractor Information

Insulation Contractor's Company Name & Address 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.

E. Monty Bell owner The Life House Partnership, LLC 8 May 2023

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: *E. Monty Bell*

Date: 8 May 2023