

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

| Application for Residential Building and T | 1 |
|---|---|
| Owner's Name: Kewa Properties UC | Date 10 27 23 |
| Site Address: 733 W W St. | Phone <u>9/9-454-73</u> 42 |
| Subdivision: | Lot |
| Description of Proposed Work: INVIOUS YEMPOUTON | _ Total Job Cost |
| General Contractor Information | |
| See General Contracting | 919-806-4529 |
| Building Contractor's Company Name | Telephone |
| ASSO Weridian play Ste 300 Durham NC 27713 Address | In 62 Stalneral Contract. Com Email Address |
| 84312 GARAGES | Q FT N/A |
| License # | , |
| Electrical Contractor Information Description of Work Wing for proposed Lights & relepton Service Size: 200 Amps T-Pole: Yes VNo | |
| 1st Sen election Services 110 | 919-201-1950 |
| 1st Sep electrical Services uc Electrical Contractor's Company Name | 919-201-1955 Telephone |
| PO-BOX 52334 Durham NC 27703 Address | 1st Step electrical and gmail. Com Email Address |
| 20647 | |
| License # Mechanical/HVAC Contractor Information | |
| | |
| Description of Work Install Was Unit & renun duct u | |
| Mechanical Contractor's Company Name | 919-390-984/ Telephone |
| 30 94 Bethwick Court. Daleghane 27604 | nccooland heat of gmail.com |
| Address | Email Address |
| 36053 | |
| License # | |
| Plumbing Contractor Information Description of Work NUN plumbing a Nowl for property | n fixtures |
| Description of Work NUN Dlumbing Whouse for profite | Baths |
| Mandain tute & plumbing Plumbing Contractor's Company Name | 844-270-2345 Telephone |
| | relephone |
| 3105-107 Gresnam Lake 12d Ralagra NC | Email Address |
| 33458 | Email Address |
| License # | |
| Insulation Contractor Information | |
| Serz Goneral Contracting | 919-806-4529 |
| Insulation Contractor's Company Name & Address 2530 Wendlan Plwy Durham NC 27713 | 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 bermission 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

| 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: 10/27/23 | |