

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: James T. Schumacher Jr. Date 03 April 2024
 Site Address: 479 O.L. Phillips Lane, Broadway, NC 27505 Phone 919-897-9344
 Subdivision: Carlton C. Robertson PC # F 365B Lot #1
 Description of Proposed Work: Addition Sunroom, porch, finish attic Total Job Cost \$ 80,000

General Contractor Information

James T. Schumacher Jr (owner) 919-897-9344
 Building Contractor's Company Name Telephone
479 O.L. Phillips Lane, Broadway, NC 27505 TomSchumacher2016@gmail.com
 Address Email Address
Owner HEATED SQ FT 880 GARAGE SQ FT 0
 License #

Electrical Contractor Information

Description of Work 120 + 240 volt Service Size: _____ Amps T-Pole: Yes No
CJS Electric Company 919-353-2466
 Electrical Contractor's Company Name Telephone
1101 South 3rd Street, Sanford NC 27330 cjs electric@spectrum.net
 Address Email Address
23795-4
 License #

Mechanical/HVAC Contractor Information

Description of Work Install 18k BTU minisplit + ductwork
MP Mechanical 919-937-7844
 Mechanical Contractor's Company Name Telephone
274 weldon Painter Road, Timberlake, NC michael@heatdoneight.com
 Address Email Address
31404 27583
 License #

Plumbing Contractor Information

Description of Work Install 1/2 bath # Baths 1/2
GW Plumbing Services L.L.C. 919-353-3586
 Plumbing Contractor's Company Name Telephone
1049 Cool Springs Road, Lillington NC 27546 service@gwplumbingnc.com
 Address Email Address
35745
 License #

Insulation Contractor Information

Spray Foam Insulation of NC 919-820-0434
 Insulation Contractor's Company Name & Address Telephone
910-892-1580

***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.

J S L
Signature of Owner/Contractor/Officer(s) of Corporation

03 April 2024
Date

Affidavit for Worker's Compensation N.C.G.S. 87-14

The undersigned applicant being the:

_____ General Contractor JTS 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:

JTS 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.

JTS 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: J S L (owner) Date: 03 April 24