

Application #	

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

\* Each section below to be filled out by whomever performing work. Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license.

Application for Residential Building and Trades Permit

ition on license.		
Owner's Name: Patrick Whitefre		Date:
Site Address: PIN 0547 - 72 - 8	3713.066	Phone: (410) 578-5467
Subdivision:		Lot:
Description of Proposed Work: New Hou	se Build	Total Job Cost: <u>40 50, 960 . 00</u>
	I Contractor Information	
Butter Homes LLC		(919) 616-6902 Telephone
Building Contractor's Company Name		
31B E Vance St FV N Address	C 27526	<u>staven@ butterhomes</u> usa. com Email Address
	FT GARAGE SQ	FT
License #	al Contractor Information	
Description of Work New Home Serv	Service Size:	400 Amps T-Pole: Yes No
The Electria Company Name Electrical Contractor's Company Name		984-301-353/
		Telephone
909 S. Main St FV, MC 29 Address	7526	Email Address
34492		
License #	HVAC Contractor Inform	ation
Description of Work New Mekhani		
Jeschphon of Work New /AZEMAN	al systems 4 c	/33/2) 7/0-9984
Mechanical Contractors Company Name		(336) 260 - 9984 Telephone
369 Timber Knoll Lane Was	Le forest, NC 27587	Email Address Jangley heating and air . co
		Email Address V V
32 842 License #		
	ng Contractor Information	
Description of Work New Home + Shop	plumbing	# Baths 3 - 5
Plumbing Contractor's Company Name	, 0	(919) 414 - 8637 Telephone
1290 Lafayette R& FV, Address	NC 27576	Email Address
Z9988		Ellian / Garage
License #		
		<u>n</u> ()
Prime Energy Group	t.	(919) 621-7860
Insulation Contractor's Company Name & Ad	Insulation Contractor Information  Prime Energy Gray  sulation Contractor's Company Name & Address  Insulation Contractor Information  (919) 621-7860  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.

Date

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

	Affidavit	for Worker's (	Compensatio	n N.C.G.S. 87	-14
The undersigned a	applicant being t	the:			
General C	Contractor	Owner	Officer/Age	ent of the Contra	ctor or Owner
Do hereby confirm set forth in the peri	under penalties mit:	*			n(s) performing the work
Has three (3	3) or more empl	oyees and has ob	tained workers'	compensation ins	surance to cover them.
Has one (1) them.	or more subco	ntractors(s) and h	as obtained work	cers' compensation	on insurance to cover
Has one (1)	or more subco	ntractors(s) who h	as their own poli	cy of workers' co	empensation insurance
Has no more	e than two (2) e	mployees and no	subcontractors.		the state of planting
While working on the Department issuing to issuance of the parrying out the wo	g the permit ma permit and at ar	y require certificat	es of coverage of	f worker's compe	central Permitting ensation insurance prior firm or corporation
Sign w/Title:	en	5-	-	D-	