

*Each section below must be filled out by whoever is performing the work. Must be owner or licensed contractor. Address, company name & phone must match information on state license.

Application # 18-50043781
Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits
COMMERCIAL

Application for Building and Trades Permit

Owner's Name: Corbin Sorrells Date: 10/15/17
Site Address: 490 Chestersfield Lake Rd Phone: 919 639 4320

Directions to job site from Lillington: go on 210 toward Angler Turn
Right on Matthews Mill pond Rd turn Left
on chestersfield Building on Right

Subdivision: _____ Lot: _____
Description of Proposed Work: Add 23'x10"x20'9" to one side 12'7"x23'10" to other
Heated SF 1368 Unheated SF _____

General Contractor Information: Building Cost \$ 88,000.00
PDL construction LLC Telephone (919) 624 8943
Building Contractor's Company Name
15 Rawls Rd Angier NC 27501 Email Address Notchense123@gmail
Address
Glenn Bass License # 71783
Signature of Owner/Contractor/Officer(s) of Corporation

Electrical Contractor Information: Electrical Cost \$ 5,500
Description of Work Addition to building Service Size: 200 Amps #T-Poles _____
Jason E BYRD Electrical
Electrical Contractor's Company Name Telephone _____
825 Neills creek Road Email Address _____
Address License # _____
Lillington NC

Mechanical Contractor Information: Mechanical Cost \$ 6,000
Description of Work install new HVAC to Building # Units _____
B&J Heat And Air Service Telephone 910 893 8057
Mechanical Contractor's Company Name
P.O Box 737 Buies Creek NC 27506 Email Address _____
Address License # 20380
Signature of Owner/Contractor/Officer(s) of Corporation

Plumbing Contractor Information: Plumbing Cost \$ 3,200
Description of Work Plumbing one bath room # Baths 1
Black River Plumbing Telephone (910) 527 4741
Plumbing Contractor's Company Name
6250 barefoot rd wade NC 28395 Email Address _____
Address License # 32506
Signature of Owner/Contractor/Officer(s) of Corporation

Insulation Contractor Information
PDL construction LLC Telephone (919) 624/8943
Insulation Contractor's Company Name & Address

*NOTE: General Contractor must fill out and sign the second page of this application

Sprinkler Contractor Information

Sprinkler Contractor's Company Name _____

Telephone _____

Address _____

Email Address _____

Signature of Officer(s) of Corporation _____

License # _____

Fire Alarm Contractor Information

Fire Alarm Contractor's Company Name _____

Telephone _____

Address _____

Email Address _____

Signature of Officer(s) of Corporation _____

License # _____

Driveway Access - NC Department of Transportation Driveway Access/Permit? Yes No

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 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 charged at full price per current fee schedule.


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

4/11/18
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.

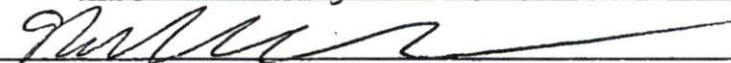
Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them.

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.

Company or Name: PDL Construction LLC

Sign w/Title:  Date: 10/15/17