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 or licensed
contractor Address company
name & phone must match

Application for Residential Building and Trades Permit

Owner's Name John D. M'Lood	Date _/
Site Address 58 Woodridge Ct, Angles, NC 27501 Phone 919-280-6167	
Directions to job site from Lillington N 401	<u> </u>
R on Rawls Church Rd -> Left on	woodidge Ct
- home straight ahead	
Subdivision	Lot
Description of Proposed Work Finish Basement	# of Bedrooms 5
Heated SF Unheated SF Finished Bonus Room?	Crawl Space Slab
General Contractor Information	
John McLeod (homeowner)	919-280-6162
Building Contractor's Company Name	Telephone John @ decconveb.com Email Address
58 Woodridge Ct Angier NC 27501	John @ deaconnob. com
Address	Email Address
License #	a/
Electrical Contractor Information	1 + Add 200 amp panel.
Description of Work Up rede to 400 amp Source Service Size	400 Amps T-PoleYesNo
Dawson's Electric	919 552-0246
Electrical Contractor's Company Name	Telephone
111 E. VENCE St, FAGAGY VENAL, NC 27526	
Address	Email Address
25948	
License # Mechanical/HVAC Contractor Information	
Description of Work Replace Existing HVAC or Add duetles, Mini-split	
Honorquett & Jones Inc	919-755-4677
Mechanical Contractor's Company Name	Telephone
1217 Twin Creek pd Apex NC 27523	matt. acman @ yahuo. com
Address	Email Address
31092	
License #	
Plumbing Contractor Information	·
Description of Work Mans basement batters	#Baths
Celen's Quality Services	919-938-1813
Plumbing Contractor Company Name	Telephone
636-6B Old Roberts Rd Biason, DC 27504	
Address 2853	Email Address
Treams #	
License # Insulation Contractor Information	
Insulation Contractor's Company Name & Address 27579	Telephone
- 1 1 21 1	

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.

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 and the second s 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 $^{\prime}$ Has one (1) or more subcontractors(s) who has their own policy of workers, compensation insurance covering themselves waster and a street of which we 化氯化铁 建氯化二氯磺酚 化氯化汞 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 (1998) 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 Sign w/Title