

Harnett County Central Permitting
PO Box 85 Lillington NC 27548
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 America Homesmith Date _____
Site Address _____ Phone 919 600 8988
Directions to job site from Lillington Hwy 27 W Turn L on Tinjan Rd
 Turn L into Pattons Point

Subdivision Pattons Pointe Lot 37
Description of Proposed Work New SFD # of Bedrooms 3
Heated SF 1799 Unheated SF 542 Finished Bonus Room? _____ Crawl Space _____ Slab X

General Contractor Information

America Homesmith Telephone 919 600 8988
Building Contractor's Company Name
Po Box 97365 Raleigh NC 27624 twebb@americahomesmith.com
Address 68116 Email Address
License # _____

Electrical Contractor Information

Description of Work New SFD Service Size 200 Amps T-Pole Yes No
Lighthouse Telephone 910 741 0370
Electrical Contractor's Company Name
Po Box 544 Sneads Ferry NC
Address 27882-1 Email Address
License # _____

Mechanical/HVAC Contractor Information

Description of Work ~~SEA~~ New SFD
Carolina Craft Air Telephone 919 550 7711
Mechanical Contractor's Company Name
5215 US Hwy 70W Clayton NC
Address _____ Email Address
29077
License # _____

Plumbing Contractor Information

Description of Work New SFD # Baths 2 5
Thornbush Plumbing Telephone 919 550 4833
Plumbing Contractor's Company Name
3160-A Vinson Rd Clayton NC
Address _____ Email Address
22152
License # _____

Insulation Contractor Information

Tricity Fay NC Telephone 910 486-8855
Insulation Contractor's Company Name & Address

*NOTE General Contractor 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


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

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 America Homesmith

Sign w/Title   Mgr Date 1

Puttone Paint # 88

Plan Box # File

Date 1-17-12

Job Name American Home Sm #4

App # 07500174 34 RR Valuation 149,315

SQ Feet 2300

Inspections for SFD/SFA

Crawl _____

Slab X

Mono _____

Footing	Footing	Plumbing Under Slab
Foundation	Foundation	Ele Under Slab
Address	Address	Address
Open Floor	Slab	Mono Slab
Rough In	Rough In	Rough In
Insulation	Insulation	Insulation
Final	Final	Final

>2500 _____

>2500 _____

>2500 _____

Foundation Survey _____

Envir Health Yes

Other _____

Additions / Other

Footing _____

Foundation _____

Slab _____

Mono _____

Open Floor _____

Rough In _____

Insulation _____

Final _____