

Harnett County Central Permitting

PO Box 85 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 Fitzpatrick Date 4-18-12

Site Address _____ Phone _____

Directions to job site from Lillington South on 421. After passing Prospect Church Rd 421 splits. Lot is on north bound side just past Crepe Myrtle Ln

Subdivision Bernice R. Johnson Lot 2

Description of Proposed Work SFD # of Bedrooms ✓

Heated SF 3059 Unheated SF 1001 Finished Bonus Room? NO Crawl Space ✓ Slab _____

General Contractor Information

J.A. Johnson Construction + Custom Homes Inc 919-820-1438
Building Contractor's Company Name Telephone

177 Friendship Lane Erwin NC 28379 jaj.construction@gmail.com
Address Email Address

61207
License #

Electrical Contractor Information

Description of Work Electrical Service Size 200Amps T-Pole ✓ Yes ✓ No _____
Bartlett's D2 Electric Inc 910-309-2637
Electrical Contractor's Company Name Telephone

100 Hidden Creek Ln Lillington NC 27546 _____
Address Email Address

24311-6
License #

Mechanical/HVAC Contractor Information

Description of Work _____
Wessex Heating + Cooling 910-892-3197
Mechanical Contractor's Company Name Telephone

1001 Deann Dr. Erwin NC 28379 _____
Address Email Address

License #

Plumbing Contractor Information

Description of Work _____ # Baths _____
Glavers Contract Plumbing Inc 919-868-0959
Plumbing Contractor's Company Name Telephone

67 Hunter View Lane Coats NC 27521 _____
Address Email Address

23160
License #

Insulation Contractor Information

Insulation II 919-661-0999
Insulation Contractor's Company Name & Address Telephone

519 Old Drug Store Rd Garner NC 27529

*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

Joseph A Johnson
Signature of Owner/Contractor/Officer(s) of Corporation

4-18-12
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 J A Johnson Construction + Custom Homes Inc

Sign w/Title Joseph A Johnson President Date 4-18-12

Plan Box # A-9

Date 4-27-12

Job Name J A Johnson Const

App # 12500 28802

Valuation 239,940

SQ Feet 3693

Inspections for SFD/SFA

Crawl X

Slab _____

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 No

Envlr. Health New

Other _____

Additions / Other

3059

Footing _____

Foundation _____

Slab _____

Mono _____

Open Floor _____

Rough In _____

Insulation _____

Final _____