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

Owners Name Ms. Ramona D. Artis	Date 8.17.12
Site Address 2440 Bud Hawkins Road Dunn MC	
Directions to job site from Lillington Huy 421 to Dung-Jake H	104 I-95 South- Exit 71- At
Stopsign (end of ramp) Turn left Copast Harder's on	16ft - 1st Rd Turn right on
Bud Hawains Road-Lot is I mile on the right in-	
Subdivision Theeman Chang, Subdivision	Lot #2
Description of Proposed Work New Consnuction of Single Funity	Residential # of Bedrooms 3
Heated SF 1700 Unheated SF Finished Bonus Room? General Contractor Information	Crawl Space X Slab
William Elmore Builders, LLC.	910.892.6900
Building Contractor's Company Name	Telephone
109 S. Ellis Aux. Dunn no. 28334 Address	Email Address
67832	
License # Electrical Contractor Informat	uon .
Description of Work <u>Install New electrical</u> Service Size	e <u>200</u> Amps T-Pole Yes No
Johnston Beasley	910.984.6051
Electrical Contractor's Company Name	Telephone
191 Fred meleod Lane Coats, NC 27521 Address	Email Address
210739	
License # Mechanical/HVAC Contractor Info	rmation
Description of Work Tristal New HVPC	
Custom Heat and aire	919.820.7066
Mechanical Contractor s Company Name	Telephone
2716 gernigan Road Dunn, Nr. 28334	
Address	Email Address
4508	
License # Plumbing Contractor Information	<u>tion</u>
Description of Work Trestall New Plumbing	# Baths_2
	910.214.1274
Plumbing Contractor's Company Name	Telephone
1638 Timothy Road Dunny C. 28334	Email Address
Address	Email Address
License #	
Insulation Contractor Informa	ation Oliveria
Ini-City Insulation	910-486-8855
Insulation Contractor's Company Name & Address	Telephone

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.

Will of Class	0.7410
Signature of Owner/Contractor/Officer(s) of Corporation	Date
Affidavit for Worker's Compensation of 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) set forth in the permit	firm(s) or corporation(s) performing the work
Has three (3) or more employees and has obtained worker	ers compensation insurance to cover them
Has one (1) or more subcontractors(s) and has obtained them	workers compensation insurance to cover
Has one (1) or more subcontractors(s) who has their own covering themselves	policy of workers compensation insurance
Has no more than two (2) employees and no subcontracte	ors
While working on the project for which this permit is sought it is a Department issuing the permit may require certificates of covera to issuance of the permit and at any time during the permitted we carrying out the work	ige of worker's compensation insurance prior ork from any person firm or corporation
Company or Name William Elmore Build Sign w/Title Will B. Glas Owner	Date 8-22-12