Eachsection below to be filled out by whanever performing work Must becomer or licensed contractor Address company name sphone must match

Harnett County Central Permitting PO Box 65 Lillington NC 27546 910 893 7525 Fax 910 893 2793 www harnett org/permits

Application for Residential Building and Trades Permit

Owner's Name Comfort Homes Inc.	Date
Site Address	Phone 9/9-553-324;
Directions to job site from Lillington 45 401 Nl. Right on	Chalybeate Spring Rd.
Left on Meredith's Lone	
Cerr on recognition	
Subdivision Meredith's Station	Lot _/6
Description of Proposed Work Construction of Single Family	to Home # of Bedrooms 3
Description of Proposed Work Constitution of Single Page 1	Craud Space X Sigh
Heated SF 1380 Unheated SF 434 Finished Bonus Room? General Contractor Informat	ion
Confort Homes Inc	919-553-3242
Building Contractor's Company Name	Telephone
P.O. Bx369 Clayton NC 27528	Confrthames @ adi Con
Address	Email Address
33184	
	ation .
Description of Work Rough In + Trim out Service Size	ze 2 Amps T-Pole X YesNo
Summerfield Electric	919-975-0599
Floring Contractors Company Name	Telephone
705 Thanksgiving Vol. Fine Dept. Rd. Selma UC	1 1 2 2
Address	Email Address
22825	
License # Mechanical/HVAC Contractor Info	ormation
Mechanical/HVAC Contractor into	ormation
Description of Work Rough In + Trim out	919-329-0686
Stephenson Heat + Air	Telephone
Mechanical Contractor's Company Name	Totophone
343 Shipwosh Dr. Garner NC 27529	Email Address
Address	
186 44 License #	
Plumbing Contractor Informa	ation 7
Description of Work Rough In + Trim out	# Baths Z
Theretale Plumbine	919-550-4833
Thornton's Plumbing Plumbing Contractor's Company Name	Telephone
3160 Vinson Rd. Clayton N.C. 27527	
Address	Email Address
22152	
License # Insulation Contractor Inform	ation
Tatum Tusulation - 519 Old Drug Store Rd Ga	
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 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

Plan Box #		Job Name Comfort Homes		
App # 1 250039193			SQ Feet	
Inspections for SFD/SFA				
Crawl	Slab	Mono		
Footing Foundation Address Open Floor Rough In Insulation Final	Footing Foundation Address Slab Rough In Insulation Final	Plumbin Ele. Und Address Mono Sl Rough In Insulatio Final	ab	
>2500	>2500	>2500_		
Foundation Survey	Envir. Health	_ Other_		
Additions / Other				
Footing				
Foundation				
Slab			* **	
Viono				
Open Floor				
Rough In nsulation				
inal			; **	