Each section below to be filled out by whomever performing work Must be owner or licensed contractor Address company name & phone 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

Owners Name ABJ Investments, LC	Date
Site Address	Phone 914-781-8104
Directions to job site from Lillington From Lillington, take H	tw. 210 towards Fayetteville.
Take left at McNeill Hobbs Rd. Follow approximately	4/2 miles to tern sight at
Wire Rd. Kenlan Farms subdivision is located appr	princelly 31/2 mike mylle city
Subdivision Kenlan Farms	Lot
Description of Proposed Work New single-family dwelling	
Heated SF Unheated SF Finished Bonus Room?	
General Contractor Informa	tion Space Slab
Sawy Homes, LLC	919-781-8104
Building Contractor's Company Name	Telephone
6030 Credmor Rd., Ste. 101, Rokich, Nr. 27612	QZOTTO @ SAVVY hornes. Con
Address	Email Address
<u>47375</u>	
License # <u>Electrical Contractor Information</u>	tion
Description of Work New SFD Service Size	e 200 Amps T-Pole Yes No
Raleigh Lenchart Electric Co.	919 - 303 - 6266
Electrical Contractor's Company Name	Telephone
1120 Burma Dr. , Aprx , NC 27502	tighe lanehart. com
Address	Email Address
24986 - U	
License # Mechanical/HVAC Contractor Infor	
	mauon
Description of Work THE SFD	
Charles William Burgess	919- 909-4635
Mechanical Contractor's Company Name	Telephone
6290 Rosalind Rd., Huntington, WV 25705	Chucka carolina heat cool.com
	Email Address
311 57 License #	
Plumbing Contractor Information	on
Description of Work new SFD	# Baths
Northwest Plumbing NC, Inc.	919.278.6739
Plumbing Contractor's Company Name	Telephone
5516 Caterpillar Dr. Apex NC 27539	Telephone twelcheleNwPent.com
ddress	Émail Address
29752 Icense #	
cense #	
Insulation Contractor Information	
Eastern Insulation 334 E. Mountain Dr. Fayetteville, N. 38304	910-486-8855
sulation Contractor's Company Name & Address	Telephone

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 08.03.12 Signature of Owner/Contractor/Officer(s) of Corporation Affidavit for Worker's Compensation N C G S 87-14 The undersigned applicant being the Officer/Agent of the Contractor or Owner Owner General Contractor 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 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 PERMITTING CORDINATODATE 08.03.12

Sign w/Title

I hereby certify that I have the authority to make necessary application that the application is correct