Application # 125 2993

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

	- 10 17 11
Owners Name Comfort Homes Inc.	Date 10-17-12
Site Address 174 Meredith Lane	Phone 919-553-3242
Directions to job site from Lillington 45 401 N. Right on C.	halybeate Spring Rd.
Left on Meredith's Lone	
Subdivision Meredith's Station	Lot
Description of Proposed Work Construction of Single Family Home # of Bedrooms 3	
Heated SF 1391 Unheated SF 595 Finished Bonus Room? Deneral Contractor Information	//A Crawl Space X Siab
Confort Hames Inc	919-553-3242
Building Contractor's Company Name	Telephone
P.O. Box 369 Clayton NC 27528	Comfithames @ adi Com
Address	Email Address
33184 License #	
Electrical Contractor Information	On X Anna T Bala X Yas No.
Description of Work Rough In + Trim out Service Size	919-975-0599
Symmerfield Electric	Telephone
705 Thanksquing Vol. Fire Dept. Rel. Selma UC	Totophone
Address	Email Address
22825	
License #	r
Mechanical/HVAC Contractor Information	
Description of Work Rough In + Trim out	55 332 161
Stephenson Heat + Air	919-329-0686
Mechanical Contractor's Company Name	Telephone
343 Shipwosh Dr. Garner NC 27529	Email Address
Address	E.Mail / Idd / GG
186 44 License #	
Plumbing Contractor Information	<u>on</u>
Description of Work Rough In + Trim out	# Baths 2
Thornton's Plumbing	919-550-4833
Thornton's Plumbing Plumbing Contractor's Company Name	Telephone
3160 Vinson Rd. Clayton N.C. 27527	= 1411
Address	Email Address
22152	
License # Insulation Contractor Information	
Tatum Insulation - 519 Old Drug Store Rd Garn,	919-661-0999
Laurister Contractors 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 10-17-12 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 set forth in the permit

The undersigned applicant being the

General Contractor

Owner

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

Also 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

Comfort Homes Inc.

Sign w/Title