

09/09/11

Application #

1350030503

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**

Owner's Name Empire Investment G Date 2-7-13  
Site Address \_\_\_\_\_ Phone \_\_\_\_\_  
Directions to job site from Lillington 210 Hwy North LF Harnett Central Rd  
LF English Springer Dr. Rg Painter Dr.  
Subdivision Quail Glen Lot 20  
Description of Proposed Work New house. # of Bedrooms 4  
Heated SF 2638 Unheated SF \_\_\_\_\_ Finished Bonus Room?  Crawl Space  Slab \_\_\_\_\_

**General Contractor Information**

BRC Homes Inc Telephone 919 422 0355  
Building Contractor's Company Name  
7101 Hawk Hill Ct Wake Forest NC 27587 Email Address Bulmarad@embarqmail.com  
Address  
71436  
License # \_\_\_\_\_

**Electrical Contractor Information**

Description of Work new Service Size 200 Amps T-Pole  Yes  No  
Pedro Electric. Telephone 919 868 5249  
Electrical Contractor's Company Name  
P.O. Box 61307 Raleigh NC 27661 Email Address \_\_\_\_\_  
Address  
21572  
License # \_\_\_\_\_

**Mechanical/HVAC Contractor Information**

Description of Work New house.  
Casey services. Telephone 919 556 3338  
Mechanical Contractor's Company Name  
Purnell Rd Wake forest. Email Address \_\_\_\_\_  
Address  
10540 H3.  
License # \_\_\_\_\_

**Plumbing Contractor Information**

Description of Work New House. # Baths 3 1/2  
W W Plumbing. Telephone 919 639 0195  
Plumbing Contractor's Company Name  
Angier NC Email Address \_\_\_\_\_  
Address  
14087  
License # \_\_\_\_\_

**Insulation Contractor Information**

Smith Insulation Telephone 919 496 3512  
Insulation Contractor's Company Name & Address

\*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

Bulmaro Rodriguez  
Signature of Owner/Contractor/Officer(s) of Corporation

2-7-13  
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 BRC Homes Inc.

Sign w/Title Bulmaro Rodriguez Date 2-7-13

