13-50030518

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 H&H Constructors, Inc.	
4-Site Address 88 Bison Lane	Phone
Directions to job site from Lillington Take Hay 27 to Dec	Rd., Junn Letty
-go export 1.< wires for left into subdivision	
Subdivision Oakmont Description of Proposed Work New Single Funity Duelling	Lot <u>34</u>
Description of Proposed Work New Single Family Duelling	75 # of Bedrooms
Heated SF 3494 Unheated SF 743 Finished Bonus Room?	Crawl Space Slab
General Contractor Information	0 00 1186-118601
Half Constructorsing	710-456-4564 Telephone
Building Contractor's Company Name	Mariautimm whhhomes con
Address 2510000 Ave. Ste 400 Fuel Heur He NC 1	Email Address
31554-0	
License #	
Description of Work <u>Electrical Contractor Information</u> Service Size <u>SOD</u> Amps T-PoleYesNo	
Description of Work Service Size Service Size	
Electrical Contractor's Company Name	<u>9/0 - 74/ - 0370</u> Telephone
Po Box, 544, Sounds Ferry, N. 28460	Light house to Cu @Collon
Address	Email Address
23887-L	
License #	
Mechanical/HVAC Contractor Information	
Description of Work	
Caroling Confort Air. Inc	919-934-1060
Mechanical Contractor's Company Name	Telephone
Mechanical Contractor's Company Name? 5212 US HULL TO BUSINESS, Clay for NO 27500	Curo 11/1 a Control fair wyanten
Address	Email Address
29077/1-3-1	
License # Plumbing Contractor Information	1 _
	# Baths 3
Description of Work	910-424-6712
Plumbing Contractor's Company Name	Telephone
Plumbing Contractor's Company Name 3242 Mid Pinelicad, Fayetkville, NC 28304	Wan johning Vislumbingion
Address	INCO 104 NION @ VI Fluid BING LOU Email Address
07756 P-1	
License #	•
Insulation Contractor Information	
Insulation Contractor's Company Name & Address	970-486-8655 Telephone
Insulation Contractor's Company Name & Address	Leiebuone

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 ! 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 Affidavit for Worker's Compensation N C G S 87-14 The undersigned applicant being the Owner _____Officer/Agent of the Contractor or 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 them

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

Has no more than two (2) employees and no subcontractors

Has one (1) or more subcontractors(s) who has their own policy of workers compensation insurance

Company or Name

covering themselves

Sign w/Title

1 Pern. Hiny Culding Bate 2.27.13