1350030519

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

	2
Owners Name H + H Constructors, Inc.	Date _ 2.27.13
4Site Address 107 Bison Court	Phone
Directions to job site from Lillington Take Hay 27 to Deco	Ka, Jurn Cell,
-go subout 1.5 wires form left. into subdivision	
	T-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
Subdivision Oakmont	Lot140
Description of Proposed Work New Single Funity Duelling	19 # of Bedrooms
Heated SF 0900 Unheated SF 537 Finished Bonus Room?	Crawl Space Slab
General Contractor Information	0 - 1166-1161-11
Hat H Constructors Inc.	910-456-4564
Building Contractor's Company Name	Telephone Mari <u>au Himmy who hom</u> es cod
2919 Breezewood Ave., Ste 400 Fuer Heur He, NC Address	Email Address
31554-0	2
License #	
Description of Work Electrical Contractor Information Service Size 300 Amps T-PoleYesNo	
Electrical Contractor's Company Name	<u>9/0 - 74/ - 0370</u> Telephone
PO Box, 544, Speads Ferry, Nr 28440	Tight house fecu paction
Address	Email Address
<u> </u>	
Mechanical/HVAC Contractor Information	
Description of Work	
Mechanical Contractor's Company Name	9/9-934-7060 Telephone
Mechanical Contractor's Company Name	Telephone
5212 US HWY 70 BUSINESS, Clay for NO 27500	Email Address
Address	Email Address
<u> </u>	
Plumbing Contractor Information	
Description of Work	# Baths 3.5 #
Name Johnson Plumbing (0) Inc Plumbing Contractor's Company Name 3242 Mich Prochad, Fayetkurlle, NC 28304	910-424-6712
Plumbing Contractor s Company Name	Telephone
3242 Mid Pineliad Fayetkville, NC 28304	Van johnson@ Viglumbing. 104
Address	Email Address
07756 P-1	
License # Insulation Contractor Information	
Insulation Contractor's Company Name & Address	910-486-8855 Telephone
~15.307	

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 Officer/Agent of the Contractor or Owner Owner Do hereby confirm under penalties of periury 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 1 Peron. Hiny (widen Bate 2.77.13

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