Application # 13 500 305 2 4

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 4 H Constructors, Inc.	Date 2-12-13
+Site Address 108 Bison Court	Phone
Directions to job site from Lillington Take Hay 27 to De	cs Rd., Junn Lett.
go about 1. Ewiles dura Left. into subdivision	
Subdivision Dakmont	Lot 35
Description of Proposed Work NEW Single Funily Duelli	AC # of Bodrooms 5
Heated SF 3453 Unheated SF 1139 Finished Bonus Room?	Crawl Space Slab
General Contractor Information	
Half Constructors.	910-486-4864
Building Contractor's Company Name	Telephone
3919 Breezeroud Ave., Ste 400 Fuel to the NX Address	Marinutimms with homes con
	Email Address
31554-0 License #	
Electrical Contractor Information	
	<u>⊇∪0</u> Amps T-PoleYesNo
Lighthouse Electric, NC	910- 741-0376
Electrical Contractor's Company Name	Telephone
PO Box 544. Speads Ferry, Nr 28460	liant house recurrention
Address	Email Address
23882-1	
License # Mechanical/HVAC Contractor Information	
Description of Work	
Caroling Confort Air. Inc	010 02 1-11/10
Mechanical Contractor's Company Name	7/9-934-1060 Telephone
5212 US HUUY 70 BOSINESS, Clayton NO 2750	Curolina confortai aundicon
Address	Email Address
2907711-3-1	
License #	
Plumbing Contractor Information	
Description of Work	_# Baths
Plumbing Contractor's Company Name	910-424-6712
Plumbing Contractor's Company Name	Telephone
3242 Mid Princhad, Fuyetkurlle, NC 28304	i <u>Jan Johnson @ Vj Glum</u> bing (6)
_ 07756 P-1	Email Address
License #	
Insulation Contractor Information	
Insulation Contractor's Company Name & Address	910-48655 Telephone
Insulation Contractor's Company Name & Address	Telephone
200001	

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 2.12.12 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 _____ 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 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