

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 _____ Date _____

Site Address _____ Phone _____

Directions to job site from Lillington _____

Subdivision _____ Lot _____

Description of Proposed Work New Construction # of Bedrooms _____

Heated SF _____ Unheated SF _____ Finished Bonus Room? _____ Crawl Space _____ Slab _____

General Contractor Information

Weaver Development, Inc 919-606-4696
Building Contractor's Company Name Telephone

350 Wagoner Dr. Fayetteville, NC 28303
Address

26962 Email Address

License #

Electrical Contractor Information

Description of Work New Construction Service Size 200 Amps T-Pole Yes No

JM Pope Electric 910-890-1060
Electrical Contractor's Company Name Telephone

409 Chatham St. Sanford, NC 27330
Address

21326 Email Address

License #

Mechanical/HVAC Contractor Information

Description of Work New Construction 919-398-4281
Central Air, Inc. Telephone

POB 175 For Oaks, NC 27524
Mechanical Contractor's Company Name Address

28699 Email Address

License #

Plumbing Contractor Information

Description of Work New Construction # Baths _____
Jamie Johnson Plumbing 910-814-7705
Plumbing Contractor's Company Name Telephone

614 Byrd Rd. Bunnlevel, NC 28323
Address

21649 Email Address

License #

Insulation Contractor Information

Insulation, Inc. 919-770-1974
Insulation Contractor's 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

Date

10/18/14

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

Weaver Development, Inc

Sign w/Title



Date

10/18/14