

09/09/11

Application #

Harnett County Central Permitting

PO Box 65 Lillington NC 27546

910 893 7525 Fax 910 893 2793 www.harnett.org/permits

1650088016 R

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 Kenneth Cummings LLC Date 2-20-19
Site Address 119 Bare Dr Phone 910 984 6765
Directions to job site from Lillington old Hwy 421 North 3 miles on left
7A Bare Dr 4 lot on left

Subdivision Ross Bare McClure Lot 4
Description of Proposed Work New House # of Bedrooms _____
Heated SF 2245 Unheated SF 0 Finished Bonus Room? 616 Crawl Space Stab stem wall
1022 **General Contractor Information**

CEBCO Construction 910 984 6765
Building Contractor's Company Name Telephone
670 Griffin RD Lillington KLC mGC@charter.net
Address Email Address
14856
License #

Electrical Permit Information

Description of Work New House Service Size: 200 Amps TPole: yes/no
JM POPE Elect 910 890-3655
Electrical Contractor's Company Name Telephone
3483 Cameron Dr. 40770
Address License #
James M. Pope #
Signature of Officer(s) of Corporation

Mechanical Permit Information

Description of Work New House
Carolina Comfort Air 419 333 4320
Mechanical Contractor's Company Name Telephone
5212 US 70 W Clayton NC 27520 H3-29077
Address License #
Phillip Powell
Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work New House # Baths _____
Jamie Johnson Plumbing 910 984 6277
Plumbing Contractor's Company Name Telephone
1490 Clark RD Lillington NC 27546 21649
Address License #
Jamie Johnson
Signature of Officer(s) of Corporation

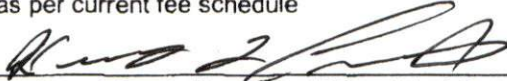
Insulation Permit Information

Alan D. Te
Insulation Contractor's Company Name & Address Telephone

*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


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

2-20-19
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 Kenneth Cummings LLC

Sign w/Title Kenneth Cummings Date 2-20-19