

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 Wellons Realty Inc. Date
Site Address 1545 Cane Mill Rd. Coats N.C. Phone 910-892-3123
Directions to job site from Lillington Enter Coats on 27 Hwy, turn right at first Stoplight go to next light turn left on Main, continue straight until the intersection of Cane Mill + Williams Street, job on corner.
Subdivision Hunters Run II Lot 22
Description of Proposed Work SFD # of Bedrooms 3
Heated SF 1378 Unheated SF 540 Finished Bonus Room? Crawl Space Slab

General Contractor Information

R.P. Wellons Building Contractor's Company Name
P.O. Box 730 DUNN N.C. Address
7746 UH License #
Telephone 910-892-3123
Email Address rpwellons@wellonsrealty.com

Electrical Contractor Information

Description of Work SFD Service Size 200 Amps T-Pole Yes No
JHP Electrical Telephone 919-820-0837
Electrical Contractor's Company Name jhp@electrical@hotmail.com
81 Beaver Creek Dr. DUNN N.C. Address
27284 U License #
Email Address

Mechanical/HVAC Contractor Information

Description of Work SFD
J+M HVAC Telephone 910-897-5501
Mechanical Contractor's Company Name jendmhvac@centurylink.net
724 Turlington Rd. DUNN N.C. Address
17164 License #
Email Address

Plumbing Contractor Information

Description of Work SFD # Baths 2 1/2
Wagner Plumbing Telephone 910-890-2299
Plumbing Contractor's Company Name wagnerplumbingco@yahoo.com
555 Tirzah Rd. Lillington N.C. Address
315760 License #
Email Address

Insulation Contractor Information

Tri-City Insulation Telephone 910-486-8855
Insulation Contractor's Company Name & Address

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

7-12-17
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 Wellons Realty Inc.

Sign w/Title *[Signature]* Superintendent Date _____