Each section below to be filled out by whomever performing work Must be owner or licensed contractor Address company name & phone must match

Harnett County Central Permitting PO Box 65 Lillington NC 27546 910 893 7525 Fax 910 893 2793 www harnett org/permits

Application # 175664360 4

Application for Residential Building and Trades Permit

* 1	Shorle must mater	1 1.0
	Owner's Name JUAN A. LOMUS-CHAVER & BRENDA	
	Site Address 1052 ROSSER FITTMAN Rd Brook	WAY, Nehone 919 353-3330
	Directions to job site from Lillington 115 42 1 N. Left or	MCANTHUR Rd AND then
	R on ROSSER. PITIMAN Rd. SITE IS ~ 150 yds	past Knight Rd on R.
	•	
	Subdivision GROVER C. PRINCE	Lot
	Description of Proposed Work Single FAMILY DWELLIN	# of Bedrooms 4
	Heated SF 2 70 Unheated SF 66 Finished Bonus Room?	
	General Contractor Information	<u>1</u>
	CUSTOM CONTRACTING CORP.	919-775-1497
	Building Contractor's Company Name	Telephone
	PO Box 2825 Sanford, NC 27331	varoceir@ grocecompanies com
	Address	Email Address
	8664 License #	
Flectrical Contractor Information		
	Description of Work Wire House Service Size	200 Amps T-Pole Yes No
	BILLINGS ELECTRIC	919-258-3115
	Electrical Contractor's Company Name	Telephone
	736 John ROSSER RD SANTERD NC 27332	josheffed 569@ hotmail.com
	Address	Email Address
	18798-0	
	License # Mechanical/HVAC Contractor Inform	nation
Description of Work 2 HVAC Dryer Vent / Bath Vent / Hood Vent		
	Mechanical Contractor's Company Name	919 498 - 472 Telephone
	POBOX 326 Lemon SPRINGS, NC 28355	relephone
	Address	Email Address
	20046	Endi Address
	License #	
Plumbing Contractor Information		
	Description of Work PLUMB HOUSE	# Baths 2 : 5
	RELIABLE PLUMBING	919-775-5782.
	Plumbing Contractor's Company Name	Telephone
	1480 FIONCH Rd SANFORD, NC 27330	719-775-5782. Telephone reliable plumbing windstream ne Email Address
	Address	Email Address
	7151	
	License #	
Insulation Contractor Information Me ENERGY GROUP 7300 We STUKENING ROOM STELDS 919-821-3288		
14	ne EVERBY GROUP 2300 WESTWEHOUSE BLUD STE 10:	
	Insulation Contractor's Company Name & Address 24 Company	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.

Va 18		
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 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 Costo Contract ING Corp		
Sign w/Title Va P. Date 6 17 18		