Application #

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

m t i t to to the filled and	
Each section below to be filled out	
by whomever performing work	
Must be owner or licensed	
contractor Address company	
name & nhone must match	

Application for Residential Building and Trades Permit

phone must match Application for Residential Building and Ti	
Owner's Name / / /NC.	Date 3/18/2020
site Address 26 RainmakerSt, Linder	NC Phone
Directions to job site from Lillington	
Directions to jest the manning.	
Subdivision Sweet water	Lot 19
Description of Proposed Work SFD	# of Bedrooms
Heated SF 1904 Unheated SF 588 Finished Bonus Room?	NO Crawl Space Slab
General Contractor Informatio	1
Building Contractor & Company Name	910-237-3461
	Telephone
POBOX 64778	Telephone trougiverconnet Emay/Address
Address	EmajirAddress
57917 /LTD License #	
Description of Work Au LEW Con(SmacTon Service Size	on
Description of Work Hu HEW COMSTMETTON Service Size	Amps T-Pole Yes No
SANON RIOCK FURETRIC Electrical Contractor's Company Name	910 - 323 - 2458 Telephone
Electrical Confractor's Company Name	de la constante de la colorante de la colorant
45+ WHITEHEAD RO. FAURTFULLE ALC Address 28312	Email Address)
NC 11:29701	
License #	
Mechanical/HVAC Contractor Inform	mation
Description of Work NEW CONSTACTION	
Mechanical Contractor's Company Name	910-858-000 Telephone
Mechanical Contractor's Company Name	Telephone EHRIN, CECTIFICE GMAIL. CON
Po Box 1071 Hope MILLS, NC Address	Email Address
	Elifaii Addiooo
H3C1/20012 License #/	
Plumbing Contractor Informati	<u>on</u>
Description of Work New (SALSTRUCTION)	# Baths 77
MARI (REE PUMBING.	910-424-1766
Plumbing Gontractor's Company Name.	Telephone
7051 CORST ST. HARTHANIE NE 28306.	lleeping Cad. Com
Address	Email Address
USUTT PL License #	
insulation Contractor Informat	ion
HTUR NSMATION. SIR DED DANG STORE RO	919-661-0499
Insulation Contractor's Company Name & Address /	Telephone
GARNERE NC 27529	· ·

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 Affidavit for Worker's Compensation N C G S 87-14 The undersigned applicant being the Officer/Agent of the Contractor or Owner Owner General Contractor 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 in surance 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 Sign w/Titte GAS CONTRACTOR.

FOR GAS LOG FIRE PLACE

DIVERSIFIED ENERGY

17220 US HWY 421 5. DWM, NC 256334-8757

LICI # 31611 FP

I hereby certify that I have the authority to make necessary application, that the application is correct