

Application # CPSF18-500 44190

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 information on license.

Application for Residential Building and Trades Permit	Application	for	Residential	Building	and	Trades	Permit
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ation on license.	1 .
Owner's Name: Eric & Lavalee Cook	Date: 5/14/19
Site Address: 6163 Ponderosa Rd. Sa	nford Phone: 254-535-4727
Subdivision:	Lot: 2.
Description of Proposed Work: Installing 14 x35 fil	berglass pool inground
General Contractor Inform	
Cool Pools NC, LLC	919-367-7277
Building Contractor's Company Name	Telephone
2300 Old US I HWY Apex, NC 275	02 Chere coolpoolsne.com
Address	Email Address
59776	
License #  Electrical Contractor Infor	motion
Description of Work Equipment hookup Service	Size: Amns T-Pole: Tyes TNo
ARC Electricalic	919.888-3500
ARC Electric UC Electrical Contractor's Company Name	Telephone
P.O.Box 58355 Raleigh NC 27658	
Address	Email Address
29565-L	211141171441000
License #	
Mechanical/HVAC Contractor I	nformation
Description of Work	
Mechanical Contractor's Company Name	Telephone
	C. (A. C.
Address	Email Address
License #	
Plumbing Contractor Infor	mation
Description of Work	# Baths
Plumbing Contractor's Company Name	Telephone
Address	Email Address
License #	
Insulation Contractor Information	mation
instance constactor mon	THE STATE OF THE S
Insulation Contractor's Company Name & Address	Telephone
	n en-positive

\*NOTE: General Contractor / owner 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

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is as per current fee schedule.

Signature of Charges (Contractor (Office) of Connection
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.
Sign w/Title: