

Application for Building and Trade Permit

Owner's Name: BERTHA CAMPBELL Date: 09/09/2020
Address: 280 301 TW CAMPBELL LANE, LILLINGTON, NC Phone: _____
Directions to job site: _____

Subdivision: THEODORE CAMPBELL Lot: _____

Construction Type: (Please Check) Building Use: (Please Check)

- | | |
|--------------------------------------|---|
| <input type="checkbox"/> New | <input checked="" type="checkbox"/> Residential |
| <input type="checkbox"/> Renovation | <input type="checkbox"/> Modular |
| <input type="checkbox"/> Addition | <input type="checkbox"/> Commercial |
| <input type="checkbox"/> Moved House | <input type="checkbox"/> Multi-Family |
| <input type="checkbox"/> Other | |

Description of Proposed Work: HVAC CHANGEOUT

Total Project Cost: \$4,500.00

Building Permit Information

Heated SF Crawl Space () Building Construction Cost \$ _____
Unheated SF Slab () Acres Disturbed _____ Stories _____

Building Contractor's Company Name Telephone

Address License #

Signature of Officer(s) of Corporation

Electrical Permit Information

Description of Work HVAC Equipment changeout Electrical Cost \$ _____

TS Pole: Yes () No () Underground () Overhead ()

Permanent Service: Underground () Overhead () Service Size: 200 Amps

Black & Roberson Electric **(252) 814-1466**

Electrical Contractor's Company Name Telephone

1715 Black Road, Robersonville, NC **08900-L**

Address License #

Signature of Officer(s) of Corporation

Mechanical Permit Information

Description of Work HVAC equipment changeout

Number of Units 1 Type System split system Mechanical Cost \$4,500.00

LePage Heating & Air, Inc. **(919) 247-4766**

Mechanical Contractor's Company Name Telephone

516 Lassiter Rd, Four Oaks, NC 27524 **29206**

Address License #

E. E. ...

Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work _____

Number of Baths _____ Plumbing Cost \$ _____

Plumbing Contractor's Company Name Telephone

Address License #

Signature of Officer(s) of Corporation

Insulation Permit Information

Residential () Other () Not Required ()

Insulation Contractor's Company Name

Address

Telephone

Sprinkler System Information

Sprinkler Contractor's Company Name

Telephone

Contact Person

Address

License #

Signature of Officer(s) of Corporation

Fire Alarm System Information

Fire Alarm Contractor's Company Name

Telephone

Contact Person

Address

License #

Signature of Officer(s) of Corporation

Driveway Access

NC Department of Transportation Driveway Access/Permit? Yes ___ No ___

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 if any changes occur in the above contractors I certify it is my responsibility to notify the Harnett County Inspections Division of any changes.

E. Lee Dye, Sr./Pres.

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

09/09/2020

Date

**Affidavit for Worker's Compensation
N.C.G.S. 87-14**

The undersigned applicant for Building Permit # _____ being the:

 x 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:

 x Has/have three (3) or more employees and has/have obtained workers' compensation insurance to cover them.

 Has/have one (1) or more subcontractors(s) and has/have obtained workers' compensation insurance to cover them.

 Has/have one (1) or more subcontractors(s) who has/have their own policy of workers' compensation insurance covering themselves.

 Has/have not 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.

Firm Name: LePAGE HEATING & AIR, INC.

By/Title: Eileen LePage, Secretary/Treasurer

Date: 09/09/2020