## Harnett County Central Permitting PO Box 65 Lillington, NC 27546 Telephone Number 910-893-4759

Application for Buildin           Owner's Name:         SMITH GEORGE ARTHUR& SMITH           Address:         3919 BUNNLEVEL ERWIN RD           Directions to job site:	<b>KATHERINE B</b> Date: 08/20/2021
New     _X_F       Renovation     _Mage       Addition     _Call	Lot: <u>168</u> ng Use: (Please Check) Residential odular ommercial ulti-Family equipment only
Building Permit	Information
	ng Construction Cost \$ DisturbedStories
Building Contractor's Company Name	Telephone
Address	License #
Signature of Officer(s) of Corporation  Electrical Permi Description of Work HVAC Equipment changeout	
TS Pole: Yes () No () Underground () Overh Permanent Service: Underground () Overhead () Black & Roberson Electric Electrical Contractor's Company Name 1715 Black Road, Robersonville, NC Address Signature of Officer(s) of Corporation	
Mechanical Perm Description of Work HVAC equipment changeour	<u>t</u>
Number of Units <u>1</u> Type System <u>heat p</u> LePage Heating & Air, Inc.	<u>bump</u> Mechanical Cost \$ <u>4,500.00</u> (919) 247-4766
Mechanical Contractor's Company Name 516 Lassiter Rd, Four Oaks, NC 27524 Address Euclinge, Schreas	Telephone <b>29206</b> License #
Signature of Officer(s) of Corporation	
Description of Work Number of Baths	t Information Plumbing Cost \$
Plumbing Contractor's Company Name	Telephone
Address	License #
Signature of Officer(s) of Corporation	
Insulation Permi Residential () Other () Not Required ()	it Information

Address

**Sprinkler System Information** 

Sprinkler Contractor's Company Name	Telephone
Contact Person	
Address	License #
Signature of Officer(s) of Corporation	
- · · ·	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 Drivew	ay Access/Permit? Yes No
correct and that the construction will Plumbing and Mechanical codes, and information on the above contractors is o	to make necessary application, that the application is conform to the regulations in the Building, Electrical, the Harnett County Zoning Ordinance. I state the correct as known to me and if any changes occur in the nsibility to notify the Harnett County Inspections Division

alleringe, Sic/Ireas.

of any changes.

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

<u>08/20/2021</u> 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: 10/07/2020