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

Application for Building and Trade Permit

Date: 07/28/2023

Owner's Name: OVERBY, LUCY MAE	Date: <u>07/28/2023</u>		
Address: <u>2203 MATTHEWS ROAD</u>			
Directions to job site:			
Subdivision:	Lot:		
Construction Type: (Please Check)	Building Use: (Please Check)		
New	_X_ Residential		
Renovation	Modular		
Addition	Commercial		
Moved House	Multi-Family		
Other	CEOLIT agreement and a		
Description of Proposed Work: HVAC CHANGE Total Project Cost: \$5000.00	GEOOT equipment only		
	Building Permit Information		
Heated SFCrawl Space ()	Building Construction Cost \$		
Unheated SFSlab ()	Acres DisturbedStories		
Building Contractor's Company Name	 Telephone		
Building Contractor's Company Name	тетернопе		
Address	License #		
Signature of Officer(s) of Corporation	<u> </u>		
orginature or ormoor(o) or corporation			
	Electrical Permit Information		
Description of Work HVAC Equipment change			
TS Pole: Yes () No () Underground ()			
	nead () Service Size:Amps		
Black & Roberson Electric	<u>(252) 814-1466</u>		
Electrical Contractor's Company Name	Telephone		
1715 Black Road, Robersonville, NC			
Address	License #		
Signature of Officer(s) of Corporation	_		
Description of Work HVAC equipment ch	lechanical Permit Information		
Number of Units 1 Type System	angeout heat pump Mechanical Cost \$4,500.00		
LePage Heating & Air, Inc.			
Mechanical Contractor's Company Name	Telephone		
516 Lassiter Rd, Four Oaks, NC 27524	29206		
Address	License #		
" Eccellige, Se / heas.			
Signature of Officer(s) of Corporation	<u> </u>		
orginature or ormoor(o) or corporation			
	Plumbing Permit Information		
Description of Work	Dhambin - Ocal A		
Number of Baths	Plumbing Cost \$		
Dlumbing Centractor's Commany Name	Talanhana		
Plumbing Contractor's Company Name	Telephone		
Address	License #		
Signature of Officer(s) of Corporation			

Residential () Other () Not Required ()	Insulation Permit I	<u>nformation</u>	
Insulation Contractor's Company Name	Address	Telephone	
	Sprinkler System I	nformation	
Sprinkler Contractor's Company Name	Telepho	ne	
Contact Person			
Address	License	#	
Signature of Officer(s) of Corporation	Fire Alarm System	Information	
-	•		
Fire Alarm Contractor's Company Name	Telepho	ne	
Contact Person			
Address	License	#	
Signature of Officer(s) of Corporation	Driveway Ac	cess	
NC Department of Transportation Driveway A	Access/Permit?	Yes No	
I hereby certify that I have the authority to maconstruction will conform to the regulations in Harnett County Zoning Ordinance. I state the first any changes occur in the above contral Inspections Division of any changes.	in the Building, Elec e information on the	trical, Plumbing and Mechanical codes, and above contractors is correct as known to me	the
Edlerige, Schrens.			
		07/28/2023	
Signature of Owner/Contractor/Officer(s) of C		Date	

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

The undersign	ned applicant for Building Permit # being the:
X	Contractor Owner Officer/Agent of the Contractor or Owner
Do hereby corforth in the per	nfirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set rmit:
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.
Department is	g on the project for which this permit is sought it is understood that the Central Permitting suing the permit may require certificates of coverage of worker's compensation insurance prior to e permit and at any time during the permitted work from any person, firm or corporation carrying out
Firm Name:	LePAGE HEATING & AIR, INC.
By/Title:	Eileen LePage, Secretary/Treasurer
Date: 07/28/	/2023