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4/13



Harnett County Central Permitting  
PO Box 65 Lillington, NC 27546  
910-893-7525 Fax 910-893-2793 www.hamett.org/permits

Application # BLES1904.0012

ELIS1904.0009  
NRLES1904.0000  
PLS1904.0005  
RES1904.0005

\* 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**

Owner's Name: Christopher Voltz Date: 4/2/19  
Site Address: 21 Sawtooth Oak Circle Phone: 301-645-3437  
Subdivision: Bunnlevel, NC 28323 Lot: \_\_\_\_\_  
Description of Proposed Work: restoration

**General Contractor Information**

Highland Construction Telephone: 910.485.6738  
Building Contractor's Company Name  
1409 Clinton Rd Fayetteville NC Address: 25594 28312 #1  
Address  
License # \_\_\_\_\_ Email: ronald.rodriquez@teammhighland.com  
lisa.little@teammhighland.com

100.00

**Electrical Contractor Information**

Description of Work: electrical scope Service Size: \_\_\_\_\_ Amps T-Pole:  Yes  No  
Timothy Lambert Telephone: 910.990.4460  
Electrical Contractor's Company Name  
3065 Howard Rd Autryville NC Address: L.31414 28318  
Address  
License # \_\_\_\_\_ Email Address: trebma41@gmail.com

60.00

**Mechanical/HVAC Contractor Information**

Description of Work: HVAC scope  
AC Man Heating & Air Conditioning Telephone: 901-797-4287  
Mechanical Contractor's Company Name  
1817 Geiberger Dr. Fayetteville NC Address: 31632 28303  
Address  
License # \_\_\_\_\_ Email Address: johnsonmichael458@gmail.com

60.00

**Plumbing Contractor Information**

Description of Work: plumbing scope # Baths: 3  
Wood's Plumbing Service, LLC Telephone: 910.920.3908  
Plumbing Contractor's Company Name  
1109 Hope Mills Road Fayetteville NC Address: 33076 28304  
Address  
License # \_\_\_\_\_ Email Address: woodsplumbingllc@gmail.com

50.00

**Insulation Contractor Information**

Tri City Insulation & Building Prod Telephone: 910.486.8855  
Insulation Contractor's Company Name & Address

55.00

\*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 is as per current fee schedule.

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

4-3-19  
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: [Signature] General Manager Date: 4-3-19