

Application for Building and Trade Permit

Owner's Name: _____ Date: _____
Address: _____ Phone: _____
Directions to job site: _____

Subdivision: N/A Lot: _____
Type Construction: (Please Check)
New Renovation Addition Building Use: (Please Check)
Moved House Other Residential Modular
Commercial Multi-Family
Specify Type of Work: _____

Building Permit Information

Heated Crawl Space Building Construction Cost \$ _____
Unheated Slab Acres Disturbed 1 Stories _____
Mess Home Builders & Realty P.O. Box 577 Lillington, NC
Building Contractor's Company Name Address
W. Al [Signature] License # 18637 Telephone 910-893-4875
Signature of Officer(s) of Corporation

Electrical Permit Information

Description of Work Electrical Electrical Cost \$ _____
TS Pole: Yes No Underground Overhead
Permanent Service: Underground Overhead Service Size: _____ Amps
P. Power Electric & Maintenance Co., Inc. 4212 Old 05421 Lillington, NC, 27546
Electrical Contractor's Company Name Address
Neil B. [Signature] License # 21643 Telephone 910-814-3751
Signature of Officer (s) of Corporation

Insulation Permit Information

Residential Other Not Required _____
TLCI CITY INSULATION 418 Person St Fayetteville, NC
Insulation Contractor's Company Name Address
Telephone 910-486-8855

Mechanical Permit Information


Description of Work HVAC Number of Units _____ Type System _____ Mechanical Cost \$ _____
Number of Tons _____
Beasley's Hgt A/C, Inc. 5769 C. Beasley Ln. Coats N.C. 27522
Mechanical Contractor's Company Name Address
R. Brent Beasley License # 9497 Telephone 919-294-4248
Signature of Officer(s) of Corporation

Plumbing Permit Information

Description of Work Plumbing Number of Baths _____ Plumbing Cost \$ _____
Dwight J Plumbing LLC 6014 Byrd Rd Bunnville NC 28323
Plumbing Contractor's Company Name Address
[Signature] License # 21649 Telephone (910)814-7705
Signature of Officer(s) of Corporation

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 of Owner/Contractor/Officer(s) of Corporation

May 24 2019

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:  VP

Date: May 24 2019