J Dawson @ harnett.org



Application # Bres 2004-0011

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

Application for Residential Building and Trades Permit

ion on license.	-
Owner's Name: Shawn + Dee Block	Date: <u>Apr 9 2020</u>
Site Address: 165 CrestMaven Rd Sanford NC 2	27322 Phone: 910 -728-6233
Subdivision:	Lot:
Description of Proposed Work: Living Addition	Total Job Cost: <u>#60</u> , 000
General Contractor Information	
Construction Solutions	910-583-8485
Building Contractor's Company Name	Telephone
1804 Mcgongan Rd Fayetteville NC 28303 Address	<u>Spencegowie gmailicon</u> Email Address
80703	
License # Electrical Contractor Information	
Description of Work Rough / Trim Service Size:	200 Amps T-Pole: Yes X No
Baxley Electric	910 - 705 - 3370
Electrical Contractor's Company Name	Telephone
S645 Buie Philadelphus Rd Redsprings	Email Address
31240-U	Litali Address
License #	
Mechanical/HVAC Contractor Information	
Description of Work Split Unit Rough + Trim	
- Chrathan Mestad	910-709-3964
Mechanical Contractor's Company Name	Telephone
3832 Windsong Cir	Email Address
Address 12 100 H3-1	Email Address
License # Faying 28306	
Plumbing Contractor Information	1
Description of Work Washer Box Rough / Trim	_# Baths
	910-977-6723
Plumbing Contractor's Company Name	Telephone
PO Box 27131 rayethille 28314	ted & to plumbing service Ilc Email Address 'Co
Address 1031 Kinsty Rd	Email Address / CO/
Plumbing Contractor's Company Name PO Box 27131 rayothrille 28314 Address 18908-P1 License # Insulation Contractor Information	
insulation contractor information	
Construction Solutions	910-583-8485
Insulation Contractor's Company Name & Address	Telephone

*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 bermission 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.

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

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: Date: Apr. 9 2020	
oigh withdo.	