

Application # _____

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

* 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

tion on license.	
Owner's Name: Angela Shay	Date: S 13 2020
Site Address: 823 Byrd's Pond Road Erwin, NC 2	8339 Phone:
Subdivision:	Lot:
Description of Proposed Work: Remodel Kitchen + Addition	5 Total Job Cost: \$ 128,500.00
General Contractor Information	
Kevin Tyndall Builders Inc	910-237-4237
Building Contractor's Company Name	Telephone
464 Lucas Rd Dunn NC 28334	tyndall builders a embargmail. Email Address Com
Address	Email Address Com
Electrical Contractor Informatio	n
Description of Work Remodel - Ketchen Bather of Service Size:	Z00 Amps T-Pole:Yes ⚠No
Byrd's Electric Electrical Contractor's Company Name	
	Telephone
148 Mingo Rd Benson NC 27584 Address	tyrdalladming charternet
Address	Erhail Address
<u>20256-L</u> License #	
Mechanical/HVAC Contractor Inform	ation
Description of Work New HVAC - Entire Home	
Beasley's Heating & Air Mechanical Contractor's Company Name	919-894-4248
	Telephone
57 W.C. Beasley In Coats NC 27521	tyrdall admin & Charter. ret Email Address
Address / 9497	Email Address
License #	
Plumbing Contractor Information Adding 1 - Master Bath	
Description of Work Kitchen & Bothroom remodel	#Baths Existing 1
Double J Plumbing	910-814-7705
Plumbing Contractor's Company Name	Telephone
614 Byrd Rd Bunnlevel NC 28323	
Address 21649	Email Address
License #	
Insulation Contractor Informatio	<u>n</u>
Parker Brothers Inc. 825 Kitty Fork Rd	910-564-4132
Insulation Contractor's Company Name & Address Clinton NC	Telephone
28328	

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

8/13/2020 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: 8/13/2020	